



The Latin American Community Center  
Early Childhood Assistance Program (ECAP)

## **1304.20 Early Childhood Development and Health Services**

1. Intake
2. Determination of Child Health Status
  - Certification of Immunization Status
3. Screening for developmental, sensory, and behavioral concerns
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4. Well-child Physical Examinations, Child Dental Assessment, & Extended Follow-up and Treatment
  - Well-child physical examinations
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  - Extended follow-up and treatment
5. Payment for Health Services
6. Parent's Involvement in Child's Health Care and Assessment



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## Early Childhood Assistance Program (ECAP)

### 1. Intake

Before the beginning of the program year, ECAP staff members will gather child and family data needed to:

1. Determine the eligibility of the child;
2. Support the assessment of the child for the purpose of providing early childhood development and health services; and
3. Provide family support and social services.

Parents of children who are applying for enrollment will be informed as to the purpose and use of all information provided by ECAP staff during the enrollment process. All information will be kept in confidence, and parents will be informed as to their rights of access to student records.

### Procedure

The following forms will be used to collect data as part of the application process and during enrollment and at the beginning of the school year:

<input type="checkbox"/> Enrollment Application	<input type="checkbox"/> Developmental History
<input type="checkbox"/> Contract for Services	<input type="checkbox"/> Birth History
<input type="checkbox"/> Parent Statement of Certification	<input type="checkbox"/> Health Partnership Agreement
<input type="checkbox"/> Eligibility Verification	<input type="checkbox"/> Copy of the medical insurance
<input type="checkbox"/> Income Eligibility Worksheet	<input type="checkbox"/> Health Referral
<input type="checkbox"/> Written Verification	<input type="checkbox"/> Medication Logs
<input type="checkbox"/> Employee Verification Letter	<input type="checkbox"/> Doctor Notes / Excuses
<input type="checkbox"/> Third Party Consent	<input type="checkbox"/> RTI Permission Forms & Documents
<input type="checkbox"/> Homeless Determination Form / Student	<input type="checkbox"/> Mental Health Evaluation Consent
<input type="checkbox"/> Residency Questionnaire	<input type="checkbox"/> IEP or IFSP
<input type="checkbox"/> Child Emergency Card	<input type="checkbox"/> Family Partnership Agreement
<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Legal Documentation (If applicable, for example: Custody)
<input type="checkbox"/> Emergency Consent and Medical	<input type="checkbox"/> Getting to Know Your Child!
<input type="checkbox"/> Information Release	<input type="checkbox"/> Participation CACFP
<input type="checkbox"/> Physical / Immunizations	<input type="checkbox"/> <input type="checkbox"/> Infant (under 12 months)
<input type="checkbox"/> Nutritional Assessment	<input type="checkbox"/> <input type="checkbox"/> Over 12 months
<input type="checkbox"/> Dental	<input type="checkbox"/> Parent Right to Know
<input type="checkbox"/> Health History	<input type="checkbox"/> Signed Releases



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### **2. Determination of Child Health Status**

A complete assessment is completed for each ECAP child at the beginning of the school year. The purpose of this screening process is to make sure that a health issue is not preventing the child from developing and learning to the best of his/her ability. If the need for further evaluation is indicated, ECAP staff will help families get services.

The results of exams and screenings will be kept in the child's file. Each child's file is kept confidential and is stored in a locked cabinet.

Determination of each child's health status must be completed within the first 90 days following enrollment. Assessment will consist of:

- Immunizations recommended by the Centers for Disease Control and Prevention;
- A well-child checkup
- A dental exam; and
- A classroom observation by a Mental Health Professional.

Additional recommendations from the local Health Advisory Committee based on prevalent community health problems will also be addressed.

#### Procedure

At the initial home visit, teachers will discuss with parents the importance of prevention, early intervention, and well child care.

Make a determination as to whether or not each child has an ongoing source of continuous, accessible health care (a "medical home") and a source of funding for health services (private insurance, State of Delaware Health Plan, Children's Health Insurance Program, etc.) in order to assure prompt and complete assessment of the child's health status.



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If the child has a medical home and financial support for health care, ensure that a recent child health appraisal / physical has been completed for the upcoming school year. If not, encourage parents to make a medical and a dental examination appointment. Give the parent the information from KidsHealth.org, "How to Prepare a Child for a Doctor's Appointment." Parent should take the Child Health Appraisal form and the Dental Care form with them to the appointments. The medical providers will return the form to the Family Service Coordinator.

If the child has no source of payment for health services, assist the parent in determining eligibility for Delaware State Health Plan Medicaid insurance or Children's Health Insurance Program (CHIP). ECAP funds can be used for exams and follow-up treatment, if and only if, no other source of funding is available.

If the child has no medical provider, ECAP staff will assist the parent in locating a medical provider, with the intent of establishing long-term care for the child ("medical home".)

For parents that may have difficulty getting their children to medical or dental appointments, ECAP may arrange for transportation assistance (bus ticket, provide a ride, etc.).

ECAP will track the results of the medical and dental examinations and treatment plan, if necessary. The results will become part of the child's health record. ECAP staff will use this confidential information to:

- Provide a developmental program for individual children;
- Identify needed preventive and corrective care.

Preventive and corrective care will be accomplished through:

- Regular checks with parents and other staff members to determine if examinations or treatments have taken place;



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- Careful and repeated review of health records;
- Encouraging health professionals to explain all procedures to families; and
- Ensuring that parents understand how to navigate the referral procedures in various health care delivery systems.

### **Certification of Immunization Status**

To prevent the spread of infectious disease, LACC ECAP will ensure that all enrolled children are immunized in accordance with Delaware Department of Public Health and U.S. Department of Health and Human Services guidelines.

#### Procedure

All children enrolled in the ECAP program shall have a current up-to-date immunization record as dictated by their age. Children, who do not, must have a minimum of the initial immunization series (DPT, OPV, Hep B, MMR, HIB) and a written schedule to complete immunizations. Either the public health clinic or the child's physician must develop this schedule. It is the responsibility of the parent/guardian to keep the schedule of immunizations for their child and submit proof of all updates as they occur.

LACC ECAP will assist the parents of each enrolled child to obtain age appropriate immunizations in accordance with the Delaware Department of Public Health.

Children may be excluded from classroom participation when immunizations are incomplete or not up to date at the time of the local Health Department review. Children with a medical or religious immunization exemption will be excluded from the classroom in the event of an outbreak of disease for which the child is not immunized.



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Children who transfer into ECAP mid-year will be held to the same immunization standard as those newly enrolled.

LACC staff will make every effort to ensure that each enrolled child has received all necessary immunizations, as they are due, prior to public school enrollment working toward the long-term strategy of linking children and families to an ongoing source of health care.

### **3. Screening**

In collaboration with each child's parent, and within 45 calendar days of the child's entry into the program, the LACC must perform or obtain, linguistically and age appropriate screening data to identify concerns regarding a child's developmental, sensory (visual and auditory), behavioral, motor, language, social, cognitive, perceptual, and emotional skills. To the greatest extent possible, these screening procedures must be sensitive to the child's cultural background.

#### **A. Sensory (visual and auditory)**

The ECAP program works in partnership with parents and health care providers to ensure that every child entering ECAP has been screened for vision and hearing abilities. At well-child checkups, primary care physicians determine if children are on track for growth and development. During each visit, the child's height and weight is measured and recorded on growth charts. Hearing, vision, lead, developmental, autism, and other screening tests are done as well. The data from the Physical form is recorded on the Sensory Screening Tracking form

#### **B. Developmental (motor, language, social, cognitive, perceptual)**



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All children will be screened in the areas of cognition, language, motor, social-emotional, behavior and sensory (visual and auditory) development within 45 calendar days of enrollment. Linguistically, age and culturally appropriate standardized screening instruments will be used.

#### Procedure

##### 1. Child Find

Red Clay Consolidated School District's Child Find staff will use the Dial-3 kits for Language, Motor and Concepts domains. Spanish speaking children will be screened in the child's primary language using the Speed Dial by bilingual Child Find staff.

2. The Ages & Stages (ASQ) Questionnaire is the screening tool that is used within the first 30 days to screen a child's development. The ASQ-3 is a screening tool designed to identify those infants and young children who may be eligible for early intervention or early childhood special education services. The ASQ-3 is used to screen children to assess if they are or are not displaying typical development for children of their age.

#### **C. Behavioral**

The Ages & Stages: Social Emotional (ASQ: SE) Questionnaire is the screening tool that is used within the first 30 days to screen a child's behavior. It is a screening tool that identifies infants and young children (ages 3-66 months) whose social or emotional development requires further evaluation to determine if referral for intervention services is necessary.

If any concerns are noted for either the ASQ-3 or the ASQ: SE, the parent/guardians will be notified and provided the Screening Results. The teacher, together with the



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parent/ guardian, will determine whether it best to wait and rescreen the child within 45 days or whether they would like to refer the child for further assessment. The results of the screenings are documented on the Screening Results tracking form as well as Child Plus. The ASQ-3, the ASQ: SE, and the Child Find Screening are filed in the "3<sup>rd</sup> Section – Child Development Documents" of the child's file.

Children who do not pass the initial Child Find screening will be re-screened as soon as possible after the original screening date or may be referred directly for evaluation. This will be arranged with the Child Find Coordinator.

Children who consistently exhibit challenging behaviors that do not change when the behavioral strategies outlined in Policy 10.4 are used, will be referred for a consultation with the contracted Mental Health Consultants.

Regulations under the Individuals with Disabilities Education Act (IDEA) have made issues regarding maladaptive behavior more pertinent than ever for Early Childhood providers. Programs are encouraged to look at proactive strategies, functional behavioral assessments and development of behavioral intervention plans. Clear, realistic goals and expectations must be set for children, staff and environment.

When making the determination that a young child exhibits delays in social, emotional or behavioral development, the team should take into consideration factors such as:

- Isolated traumatic events may lead to emotional/behavioral changes in young children, which, while serious and disruptive, are often of short duration.
- Young children are often responsive to short-term behavioral intervention.
- Many behavior-rating scales have comparatively low test-retest reliability and should be used carefully.
- Medical factors can have potential impact on child behavior
- Differing cultural norms can exert an influence on behavior.
- Inappropriate educational programs/practices can affect child behavior





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### Procedure

The Family Service staff, after consulting with the Mental Health Consultant and informing the Director and teaching staff, will contact the child's parents to obtain permission for the Mental Health Consultant to complete an individual observation. Staff will also review the child's file for pertinent health information, anecdotal records, parent reports, social/emotional and behavioral screening results and previous Mental Health Classroom Observations.

After the Mental Health observation, staff, parents and the Mental Health Consultant will meet to discuss the findings of the observation and other reports. At that time, options will be explored, such as referral for mental health evaluation, Mental Health services and/or the development of a collaborative behavior plan (Individualized Behavior Plan).

When an Individualized Behavior Plan is developed, the Mental Health Consultant, teacher and Family Service staff will assist in monitoring progress on behavior plans and specific individualized teaching strategies. Curriculum materials such as "2<sup>nd</sup> Step: A Violence Prevention Curriculum" will be available and used routinely in the classroom.

Appropriate training relating to behavior management will be made available to staff in partner programs and agencies so that resources are shared and information is widely disseminated.

### **4. Exams**

Children must be healthy to learn. LACC's ECAP work with families to help them achieve and maintain optimal physical health so their children can learn.

#### **A. Well-child physical examinations**



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The Head Start Program Performance Standards require all programs, “obtain from a health care professional a determination as to whether the child is up-to-date on a schedule of age-appropriate preventive and primary health care which includes medical, dental, and mental health. This schedule must incorporate the requirements for a schedule of well-child care utilized by the EPSDT program of the Medicaid agency of the state in which they operate.”

The LACC works with families to help them achieve and maintain optimal physical health so their children can learn. This includes:

- Linking families with a medical home
- Ensuring all enrollees receive well-child physical examinations based on Delaware’s Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) schedule

The LACC ensures compliance with State of Delaware Office of Child Care Centers Licensing Requirements and Delaware Immunization Laws. Children enrolled in ECAP will have a complete medical exam and dental assessment to ensure early identification and treatment of any existing health problems. Evaluation will occur within 90 days following entry into ECAP (unless an exam has been completed prior to entry). If concerns are found, families are supported in obtaining further evaluations, treatment, and any follow-up recommended by the medical professional.

### **B. Child Dental Assessment**

All children enrolled in ECAP will have an initial oral diagnostic examination by a dentist or qualified dental professional.

Priorities for dental treatment beyond the oral diagnostic procedure are as follows:



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- Services required for the relief of pain or infection;
- Restoration of decayed primary and permanent teeth;
- Pulp therapy for primary and permanent teeth as necessary;
- Extraction of non-restorable teeth;
- Dental prophylaxis and instruction in self-care and oral hygiene procedures.

If the child has a record of a physical or dental exam within one (1) year prior to his/her entry into the program, the exam will be considered to have met the 90 day requirement for completion. Teachers will encourage parents to maintain a regular schedule of well child care and remind parents when the next annual exam is due.

Family Service staff will review completed medical and dental exam forms and the results of exams will be recorded for monitoring purposes. The original form will be filed in the child's file and may be given to the parent at the end of the school year. All follow-up treatment will be documented, and the course of treatment will be monitored until treatment has been completed.

### **C. Extended follow-up and treatment**

Family Service staff will follow up with families regarding children who are not up-to-date on medical, dental, immunizations, and/or health screening follow-up. Family Service staff will work to identify barriers that families may have to meeting health requirements, such as transportation, lack of health insurance, etc. and work with families to overcome those barriers.

Family Service staff along with the Director will monitor health requirements and provide support to center staff when requested or as needed.



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If, at the end of the year, a parent continues to indicate they are unwilling to complete any of the identified needed services (medical, dental, follow-up on screenings) for their child, staff should identify what parent education should be provided, if any, and notify the Director to send a Health Requirements Refusal letter be sent to the parent.

#### **5. Payment for Health Services**

Head Start requires that Head Start / ECAP funds be used for exams and treatment only when no other source of funding is available. If a family has private insurance, or is eligible for the Delaware Health Plan (OHP) or Child Health Insurance Program (CHIPS), these sources of funding must be used to their full extent before ECAP can pay for services.

ECAP will pay for initial exams and follow-up treatment if a family has no health coverage, or if the deductible has not been met on private insurance. ECAP will pay health providers only with prior approval and with a purchase order.

#### Procedure (Initial Exam)

When an ECAP Family Service staff member believes that ECAP payment may be required, the staff member will contact the ECAP Director with the following information: the child's name, date of birth, parent's name, the suggested treatment, reason for lacking insurance, and the family's health care provider's name and address.

The ECAP Director will then contact the health care professional and request a reduced fee for health service for the ECAP child. If the family has no Health provider, ECAP Family Service staff will refer them to a provider that has agreed to accept a reduced fee.

The ECAP Director will then complete a purchase order form including: the purchase order number; the date; name, and address of the doctor or dentist; the child's name;



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and staff signature. Purchase orders will be valid for 30 days, except toward the end of the school year, at which time, any exam or treatment must be completed on or before the last day of class.

The completed purchase order will be sent directly to the VP of Lifelong Learning for approval.

### Procedure (Follow-Up Exam)

Parents will let the program know the health care provider's recommendation for treatment. The ECAP Director must then be contacted for approval. Following approval, the ECAP Director will contact the health care provider for an estimate of treatment cost.

A new purchase order will then be forwarded it to the health care provider.

Unless treatment by a specialist is necessary, the family must use their own health care provider or one of the service providers listed as having a reduced-fee agreement with ECAP.

## **6. Parent's Involvement in Child's Health Care and Assessment**

Because parents have the primary, long-term responsibility for their children's health, it is critical for them to be fully involved in the process of obtaining health services for their children. LACC ECAP will work with the child's family to ensure that each child has a source of continuous, accessible health care that will be available after that child leaves ECAP.

Parents have extensive knowledge about their child to share with ECAP staff. In order to promote strong communication between teacher and family regarding the child's developmental history, strengths, concerns and progress, teachers will provide varied



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opportunities for parents to be involved in their child's ongoing assessment as team members and will help them learn observation skills and strategies.

### Procedure

Parents will complete the ASQ-3 or the ASQ: SE questionnaires as part of the initial screening in behavior. Staff will review the results of the screening and address parent concerns and questions during home visits.

When parents volunteer in the classroom, they may be asked to complete an observation of their own child in a particular setting.

Each classroom will post information regarding developmentally appropriate practice, vocabulary, and ways to interact with children and learning objectives so that parents and other volunteers are aware of Creative Curriculum goals and objectives.

Results of the assessments will be shared with parents on home visits or parent-teacher conferences, with requests for feedback and ideas for appropriate goals for the child. Information on the child's progress toward meeting goals will be shared regularly with parents, and parents will be asked to report on progress observed in the home environment.



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## **1304.21 Education and Early Childhood Development**

1. Child Development and Education Approach
  - Best Practice in Early Childhood Education
  - Curriculum Planning
  - Individualization
2. Inclusion and Classroom Celebrations
3. Dual Language Learners
4. Social and Emotional Development
  - Behavior Management and Guidance
5. Parent Involvement through Home Visits



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### **1. Child Development and Education Approach**

Classroom and outdoor activities will be provided to meet children's individual needs and to stimulate learning in all developmental areas: physical, social-emotional, language and cognitive. Routines and transitions will be done in a way that they occur in a timely and predictable pattern to meet each child's needs.

Teachers understand that children are active, sensory learners who need many opportunities for self-chosen exploration, social interaction, and problem solving, and that children learn best through direct, hands-on experience.

#### **Best Practice in Early Childhood Education.**

Developmentally appropriate practices will be based on knowledge of basic child development and an awareness of individual differences and needs of children.

Child-initiated play will be encouraged through the lesson plans.

Ample time will be allowed for children to make choices for learning among those offered by the teacher.

Opportunities will be provided for active exploration and experimentation with concrete learning experiences in which children construct their own knowledge to add to the base of knowledge that teachers impart to them.

Teachers will use methods that support all areas of growth in the child, including but not limited to language, cognitive, physical and social-emotional development.

Teachers will plan activities and experience to enhance the child's thinking and reasoning abilities, and other cognitive and psychomotor skills.

Methods will be employed that help children develop and gain mastery of skills through supportive interactions, stimulating questions, and positive reinforcement.





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ECAP staff will respect and support of children's parents and families, and a commitment to work as a team with parents, building positive relationships, and including parents in decisions about their children's care and education.

### **Curriculum Planning**

LACC ECAP follows a curriculum that is consistent with the Head Start Program Performance Standards and is based on sound child development principles about how children grow and learn. Our approach is based on universal child development principles that guide the ways in which we work with children, taking into consideration our families, and communities. Children need play: active, hands-on experiences, nurturing relationships, and intentionally planned opportunities using the environment, everyday materials, daily routines, and child interests to foster learning. Teachers engage children in meaningful conversations about the work (play) they are doing. We develop our curriculum using the Head Start Child Development and Early Learning Framework. We create school readiness goals using our child outcomes and information from local school districts. We use school readiness goals and Teaching Strategies Gold (TSG) assessment data to plan for children transitioning into kindergarten. Our base curriculum is Creative Curriculum through the Expeditionary Learning model of learning. The activities from this curriculum correlate to TS GOLD Objectives

Curriculum is defined in the Performance Standards as a written plan that includes: 1) the goals for children's development and learning; 2) the experiences through which they will achieve these goals; 3) what staff and parents do to help children achieve these goals; and 4) the materials needed to support the implementation of the curriculum.

### Procedure

LACC ECAP uses Teaching Strategies Gold as the basis for written educational plans. A number of other curriculum resources and materials are also available for staff use in



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planning and developing specific activities and goals for children. The Teaching Strategies Gold curriculum is a research based curriculum that is aligned with the Head Start Child Outcomes Framework and the Delaware Early Learning Foundations.

Written curriculum plans consist of: 1) specific goals and objectives; 2) developmentally appropriate indoor and outdoor activities for acquiring basic cognitive, social emotional, language and physical skills; and 3) a system for documenting and assessing children's progress in all areas of development.

Daily activities are designed to be: 1) comprehensive and reflective of each child's developmental level; 2) reflective of the community and cultures represented in the group; 3) clear in recognizing and promoting the role of the parents; 4) child focused; 5) built on each child's individual skills and knowledge; and 6) diligent in promoting every child's self-awareness and positive self-concept.

Curriculum planning is an ongoing creative process in which specific activities are adapted and developed as program staff interacts with individual children and families.

The curriculum is responsive to the emergent interests and needs of children, families and the community and is used as a framework to develop activities as program staff: 1) learn about the developmental levels of each child; 2) identify each child's individual learning style; 3) identify individual needs and interests; and 4) attempt to understand each child's and family's culture and value system.

Curriculum implementation is supported by providing a system of regular monitoring and supervision; procedures and financial support for training staff, parents and volunteers; and regular self-assessment.

### **Individualization**

LACC ECAP will ensure individualization for each child enrolled in the program based on documented child observations, parent input collected at home visits and screenings,



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portfolio materials, and ongoing assessment data. The Individual Child Profile and Development and Learning Report in Teaching Strategies Gold will be referenced as teachers and families meet and create next steps for children on the Student Growth Conference Form, and include specific activities to implement at home and school, that are included in lesson planning.

Each classroom organizes the curriculum to support the individualized needs of each child. Education staff will ensure that individualization of children's needs are done on an ongoing basis.

Individualized teaching is based on identified needs and may occur during one-on-one sessions with a particular child, or in small groups of two or three children.

Individualized teaching is done during free choice time for short periods of time.

### Procedure

Staff will gather information about each child's preferences and interests, developmental level, special needs, language, cultural background, learning style, and temperament. Information will be gathered through conversation with families, screening, ongoing assessment using TS Gold, and in coordination with family service staff.

Information gathered about individual children will be used to create a learning environment appropriate for each child, and to plan daily activities that build on each child's interests to promote individual growth. Daily activities and changes to the environment will be documented in lesson plans.

Staff will modify classroom instruction based on the individual needs of each child.

Modifications may include providing environmental support, modifying materials, modifying activity, providing peer support, and/or providing adult support.

Modifications will be documented in lesson plans.



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Individualized instruction will be embedded throughout the day during child initiated, planned, and routine activities.

Each weekly lesson plan will include several child goals to be targeted during the week. Teachers will use anecdotal records and checklists to monitor progress on identified goals. Every child's goals will be formally addressed on a three week cycle.

Staff will further individualize and modify instruction to meet the needs of children with identified special needs. Teachers will meet quarterly with each child's itinerant special needs instructor from RCCSD.

The teacher and itinerant special needs instructor from RCCSD will schedule a regular consultation day and time to discuss the following:

- review progress on IEP/IFSP goals
- strategies for embedding goals
- updating assessment progress

## **2. Inclusion and Classroom Celebrations**

### **Inclusion**

The LACC ECAP embraces an inclusion approach that strives to provide opportunities for all children to actively participate in all aspects of the program. We support the inclusion of children who require additional support because of a physical, cognitive, social or emotional need. We make changes to our daily program when possible to meet the needs of each child. We respect and value the input from parents and encourage them to be part of the decision making process for their child. We request that families share the IFSP (Individual Family Service Plan) and IEP (Individualized Education Program) with us. We support families by consulting with early intervention professionals when possible. All teachers have knowledge and training in inclusion best



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practices. The goal is to create an environment in which all children are valued and respected in order to support their optimal learning and development

### **Classroom Celebrations**

Every family has special days and certain ways of celebration. Learning about other cultures is part of discovering how people are unique and yet the same. Children enjoy sharing their own special events and sharing in others' joy. At the EDC, we hope to expose children to the diversity in the world: to help them understand the universality of celebration with foods, music, dance, songs and stories; and to help them develop a respect for differences. Teachers work with families to develop celebrations which are appropriate to the children's level of understanding, their abilities, their attention span, and the center's nutrition policy.

Because there is such diversity in tradition and beliefs already being celebrated in the home, ECAP has chosen to celebrate seasonal and cultural events, rather than the more traditional religious-based holidays. Parents can be involved in planning these celebrations and will be provided with guidelines for planning.

### Procedure

If parents wish to provide a special snack to celebrate a birthday, cultural event or holiday please, parents will discuss with their child's teacher at least one week in advance.

We encourage healthy choices instead of sugary items.

The Office of Child Care Licensing regulations require that these foods be commercially prepared and in a sealed container upon arrival at the EDC.

As stated in this handbook (under Meals and Snacks), the EDC strives to be a peanut and tree nut free center, therefore, none of the ingredients in the food may contain nuts or nut byproducts.



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To ensure that the classroom is an inclusive and safe environment for all children, any exchange of gifts, cards or invitations must happen outside of the classroom or center environment.

### Guidelines

Parent's involvement in curriculum and classroom activities provides parents with an opportunity to contribute to what their child learns in the classroom (or what activities are used to provide learning opportunities) and to help parents learn what is developmentally appropriate for preschool children to be doing in the ECAP classroom. This is a valuable contribution to the program.

The teaching staff is responsible for ensuring the appropriateness of all activities and to help parents modify their suggestions, taking into consideration developmentally appropriate practices, safety, health, nutrition, social-emotional appropriateness and program policy.

Special projects may be done as one of many choices for children during free choice and may be delivered as a "thank you" or special gift to some organization or to a family member. As a literacy activity, cards can be made and letters sent throughout the year for any reason- seasons, good for you, get well, we miss you, thank you. The focus is not on a religious or non-religious holiday, but on creative expression, doing something for others, etc. The activity should be designed to enhance fine motor skills, cooperation, sharing of ideas and materials, problem solving, etc.

Parent's desire to celebrate holidays is often a reflection of their desire for their children to have parties and celebrations. Teachers should...

- Find "common ground" issues to celebrate - changing seasons, children's achievements both individually and collectively, baby animals in spring, children's growth, the natural loss of teeth, reading books, developmental milestones... help parent's come up with creative things to celebrate.



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- Explain the program's approach for handling celebrations to parents at the beginning of the year. This information can also be found in the Parent Handbook.
- Determine if any families do not celebrate any events...find out what the boundaries are about that belief/practice to determine if celebrating common events would be a problem. Look for ways to make it work.

### **3. Dual Language Learners**

LACC ECAP's approach to children's language acquisition is developmentally and linguistically appropriate, recognizing that children have individual rates of development as well as individual interests, temperaments, languages, cultural backgrounds, and learning styles. We provide an environment of acceptance that supports and respects gender, culture, language, ethnicity, and family composition. Children develop best if they have continued opportunities for learning their home language as well as developing skills in English. Communication with children and families will be in the family's primary or preferred language, through bilingual staff or interpreters, who understand and support each family's home culture.

We also believe that children need to be proficient in the English language to succeed in the local public school system. For this reason, ECAP actively promotes English language acquisition for those children for whom English is not their first language, while at the same time providing books, materials, and activities that positively reflect the child's home language and culture.

Being the Latin American Community Center, the majority of our enrollment is comprised of Hispanic students who speak Spanish in the home. Our staff is diverse with members who speak Spanish and support Hispanic culture.

#### Procedure

We provide ongoing support for continued development of each child's home language.



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Screening for children is done in their home language with tools that are culturally and linguistically appropriate.

Assessment is done using tools that are culturally and linguistically appropriate, ongoing, completed by a person who speaks that language. Language neutral/ language free assessment for cognitive, social emotional, and physical development is completed. Children are assessed on their home language development and English language acquisition.

Home visits and other communication are conducted in the child and family's primary or preferred language and/or through an interpreter.

Written Materials are translated into the family's home language.

Classrooms are labeled in English and the primary languages of children in the class and have postings and materials to reflect the current cultures of children in the class - books, alphabets, toys, artifacts, instruments, songs, etc.

Activities are adapted to meet the needs of children who are DLL's, eg. Visual cues, rebus charts, etc.

Each child and family's unique culture and ethnic background is supported, free of stereotypes or assumptions.

Classroom staff include qualified native speakers when possible.

Family conference forms include information on children's strengths in Spanish language and literacy as well as acquisition of English. Individual goals for children who are DLL's include steps for home and school for maintaining home language.

Staff share information and resources with families on the importance of maintaining their home language.





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### **4. Social and Emotional Development**

Supportive, responsive relationships among adults and children are an essential component to promoting healthy social emotional development. High quality environments promote positive outcomes for all children. Systematic approaches to teaching social skills can have a preventive and remedial effect. Staff will support social emotional development through designing a physical environment, and a schedule of activities that builds trust; fosters independence; encourages self-control and respect for the feelings and rights of others; and supports each child's home language, culture, and family composition.

#### Procedure

Staff will foster social competence and prevent challenging behaviors by promoting: (a) positive social skills; (b) emotional literacy; (c) positive self-esteem, and (d) provide a nurturing, safe environment.

To facilitate Building Positive Relationships, staff will:

- a. Develop and support meaningful relationships with children and families
- b. Examine their personal, family, and cultural views of child's challenging behavior
- c. Examine their own attitudes toward challenging behavior

To facilitate Creating Supportive Environments, staff will:

- a. Develop schedules and routines
- b. Ensure smooth transitions
- c. Design activities to promote engagement
- d. Give directions that are clear to each child. Have realistic, appropriate expectations based on knowledge of early childhood development and each child's strengths and needs.



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- e. Establish and enforce clear rules, limits, and consequences for behavior
- f. Develop classroom rules with children when possible. Post visual cues of classroom rules and refer to them throughout the year. Review and update as needed
- g. Engage in ongoing monitoring and positive attention
- h. Use positive feedback and encouragement

Staff will utilize Social Emotional Teaching Strategies:

- a. Encourage autonomy by providing children with appropriate choices and opportunities for leadership and responsibility
- b. Utilize effective environmental arrangements to encourage social interactions
- c. Use prompting and reinforcement of interactions effectively
- d. Provide instruction to aid in the development of social skills
- e. Promote identification and labeling of emotions in self and others

- **Behavior Management and Guidance**

LACC ECAP's Behavior Management and Guidance Policy is designed to keep all children and staff safe in the classroom and provide as much support for children as possible. Students, parents, and staff are provided the atmosphere to feel welcome, develop a sense of belonging, and to form respectful friendships and relationships.

LACC ECAP program aims to promote children's social-emotional skills to become competent learners. This includes developing empathy, anger management, problem-solving, and impulse control skills. A consistent and predictable routine in a safe environment in the classroom helps children to behave in a positive way.



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Teachers can help prevent children from behaving in a way that is harmful to themselves, others, or the environment by consistently reviewing the classrooms expectations with parents and children daily. Aggressive behavior has a negative impact on the learning environment and teachers will intervene so children feel supported and safe in the classroom.

#### PREVENTION

- Staff will implement Positive Behavioral Interventions and Supports (see also Social Emotional Development Policy) to prevent challenging behavior and to teach emotional literacy, friendship skills, self-calming skills, and problem-solving skills.
- Teaching staff will foster a respectful classroom environment, that prevents aggressive behavior and facilitate conflict resolution when such behaviors occurs.
- Teaching staff will create a positive social environment in the classroom by consistently modeling appropriate behavior, communication, and teaching children self-responsibility to anticipate and eliminate potential problems.
- Teaching staff will clearly define and communicate classroom expectations and procedures to children in a positive and age-appropriate manner.
- Teaching staff recognizes that children need to be taught every classroom expectation in a variety of ways such as demonstration, use of visuals, class discussion, role play, and positive reinforcement.
- The classroom should be organized and structured in a developmentally appropriate manner that is not over stimulating for children. Staff will make physical adaptations to the environment and utilize resources in classroom such as visual prompts, visual schedule and scaffolding techniques to support children.
- Positive Guidance Strategies are used to promote self-regulation skills: reflective statements, "I" statements", modeling specific language and offering limited choices.



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- Staff will consistently use the CSEFEL based descriptive feedback, validation, and positive descriptive acknowledgement (PDA) to encourage appropriate and respectful behavior.
- Teaching Staff will use a child's challenging behavior as an learning moment to model appropriate responses and/or redirect a child away from a conflict or negative event to a more positive experience and help the child practice appropriate socialization skills.
- Children will be encouraged to make choices, solve problems, and use appropriate language to resolve conflict that are approved by parents.
- Staff will help a child learn about the logical or natural consequences of their actions and instill empathy by encouraging respect for the feelings and rights of others.
- Children encounter difficulties and frustrations as a normal part of growing up. In response, they may exhibit challenging behavior at times that should be discouraged or redirected. In these instances, teachers will attempt to identify what is "triggering" the child and actively engage in redirecting or guiding the child to a more appropriate choice. This type of positive reinforcement of a child's needs can decrease misbehavior

### INTERVENTION FOR CHALLENGING BEHAVIOR

During each step, all concerns, behaviors contacts, interventions, and progress must be documented by staff.

- Challenging behaviors will be documented using the Behavior Incident Form
- Staff will share behavior concerns with families in a timely manner and will work with families to develop strategies and interventions.
- Staff will access Instructional Coach or RTI facilitator as needed for behavior observations in the classroom and classroom-wide behavior support strategies.



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- When challenging behaviors persist or are dangerous to self, others, or property, staff will work with family to refer child for Behavior Support
- Behavior Support may include a Behavior Plan. A Behavior Plan is an individualized, intensive intervention based on information collected by the family and teaching staff.

Behavior Plan will be developed by the family, teaching team, Family Services staff, and EDC Leadership with support from partnering agencies as needed.

Behavior Plan will include:

- Description of behavior of concern including triggering events and maintaining consequences.
- Prevention Strategies
- Replacement Skills that will be taught
- Strategies for when the challenging behavior occurs

Staff will implement behavior plan and meet with team regularly to discuss progress and modify plan as needed.

Behavior Plan will be documented in the "3rd Section - Child Development Documents" in the student's file.

- Rarely, a child may need use of physical restraint if there is imminent danger to self or others. Physical restraint is not to be used as a routine procedure nor without an approved behavior plan specifying its use (signed by parent).
- The use of corporal punishment or seclusion is strictly forbidden. Use of such methods will result in disciplinary action.
- Withholding of food, access to the bathroom, or name calling or any other form of demeaning treatment is strictly forbidden. Use of such methods will result in disciplinary action.



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- Continual communication with parents and guardians must be maintained concerning the child's behavior and ongoing documentation and progress reports are required. Staff will be sensitive to different cultural beliefs and values.
- Occasionally, staff may be unaware of a child's potential for dangerous behavior, which may occur very quickly and with little warning. Each classroom will develop a Dangerous Behavior Plan before children return to school in the fall. The Dangerous Behavior Plan will include the following:
  - A designated safe and appropriate place in the classroom and outside the classroom where an adult can take a child to be away from peers for the purpose of assisting the child to calm and self-regulate.
  - A procedure for quickly exiting the children from the classroom away from the dangerous behavior. A staff member will remain with the child at all times; children will not be placed in seclusion (involuntary confinement of a student alone in a room from which the student is physically prevented from leaving).
  - Ways of quickly communicating to the rest of the team (including regular parent and community volunteers) with a signal word so that the plan can be quickly implemented without a lot of discussion.
  - For the safety of the child and staff, the crisis intervention for the child will not exceed gentle but firm physical guidance/direction, holding a child only long enough to get them to a safe space to calm down.

When dangerous behaviors occur, staff will contact the child's parent to debrief the incident. Team (teachers, family, Family Service staff, Director) will meet to discuss potential referrals for additional services.

## **5. Parent Involvement through Home Visits**

Home visits provide opportunities for families to receive parenting education, develop goals for their child and family, and identify community resources to help meet their



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family's needs. Planned in partnership with the parents, home visits take place to enhance the parent's role in the growth and development of their child, build healthy, nurturing parent/child relationships, improve parenting skills, and support the family's home setting as the child's primary learning environment. LACC ECAP believes that a partnership between parents and staff best supports children in their ECAP experience. Home Visits create a natural link between the two most powerful influences in a child's life, home and school. Home Visits also support the development and achievement of personal and family goals.

Teaching staff and Family Service staff will go on every home visit and teachers will conduct every parent- teacher conference together, with assistance from FSW if translation is needed, except under extraordinary circumstances. This requirement is intended to ensure that the two regularly and consistently communicate essential information and together form a working, supportive relationship with the family

Teaching staff and Family Service staff will perform two home visits and three parent-teacher conferences for each child enrolled in the ECAP program. The first home visit should be completed by October 15 and the second by May 15. The parent-teacher conferences are to be conducted in November, March and June of each school year.

### Procedure

At the beginning of the year, parents will be asked to schedule upcoming home visits. At the same time, the importance of the home visit will be explained. Home Visits must be completed in the home unless the family situation is not conducive to doing it in the home; i.e. the safety of the staff is a worry, or if parents expressly voices that they do not want a home visit. In such cases, staff will continue to work on building a trusting relationship, which over time, may provide opportunities for meeting families in their homes. Under these circumstances, visits may be conducted outside the home, either



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at the center or another location where the parent feels comfortable; however, every effort will be made to conduct the visit in the home.

Student Growth Conferences provide an opportunity for staff and parents to discuss each child's growth and development, and plan an individualized education program to meet the child's needs. The conferences will take place during November and April and they will be with the child's teacher and the parent.

The teacher will provide the parent with a Child Progress Report from the Teaching Strategies Gold and a written Student Growth Conference Narrative. Teaching staff will answer questions or concerns the parent might have. Also, this time can be used for the teacher to express any developmental and/or behavioral concerns he/she may have regarding the child and whether or not referrals should be made, etc. The conference ends with the parent and teacher creating goals for the child together for the upcoming school year.





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## **1304.22 Child health and safety**

1. Classroom Safety
  - Reporting Suspected Child Abuse
2. Short-Term Exclusion and Admittance
3. Medication Administration
4. Injury Prevention
5. Hygiene
6. First Aid Kits



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### **1. Classroom Safety**

Teaching staff will maintain a safe environment for children and staff. EDC Leadership will ensure safety procedures are clearly explained and implemented consistently by all those employed by LACC ECAP.

#### Procedure

All Teaching staff working with children will have a current First Aid and Pediatric C.P.R. certification.

Backpacks with First Aid kits will be stored in each classroom in a highly visible location - and kept out of reach of children. Inside of the backpack there should always be a sealed bag that contains inventoried First Aid Items. Teaching staff are encouraged to store additional non-inventoried first aid supplies (particularly gloves, Kleenex, Band-Aids) at their discretion.

If teaching staff use materials within the Backpack with the First Aid kit - they are required to get replacement from the EDC office on the same day as it is their responsibility to maintain inventoried kit list.

Emergency Contact forms for each student should be stored in the First Aid backpack in a manner to assure that the information on the forms is not available to anyone other than employees.

If medications are required for a child in the classroom, the medication should be stored in the Medication Box in the First Aid backpack along with paperwork.

The First Aid backpack (along with emergency contact forms) will be taken on all field trips or any trip away from the classroom site.



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A diagrammed evacuation plan will be posted near the exits in each classroom and office.

A fire drill/building evacuation shall be practiced once each month. The drills will be documented the Fire Drill Log located in the EDC office.

Facility exits are clearly marked with visible, approved EXIT signs. Aisle, hallways and other exits are kept free of obstacles.

All electrical outlets accessible to children will have protective caps in place when outlets are not in use.

All stairways, hallways, and corridors must have three feet of free walk through access at all times. Storage of supplies or equipment is not permitted in these areas.

Items of potential danger to children or any other cleaning agents (i.e. flammable liquids, toxic materials, aerosols, detergents, etc.) must

- Be kept in the original containers with original label intact, indicating contents and be stored in an area not used by children, be stored separately from food and food service equipment
- Be secured by a child-proof lock
- Be accompanied by material safety data sheet that tells about potential hazards of the product and be located in the M.S.D.S. binder in the classroom, kitchen or office in which product is located.
- Not be purchased unless our agency has approved it as an acceptable/safe cleaning agent

### **Reporting suspected Child Abuse**

All Staff are considered mandatory reports of any suspected child abuse or neglect which means they must immediately report suspected abuse or neglect.



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### Definitions

Child Abuse is the non-accidental commission of any act by a caretaker that causes or creates a substantial risk of harm to a child's physical and emotional well-being, including sexual abuse.

Child Neglect is the failure by a caretaker, either deliberately or through negligence, to take those actions necessary to provide a child with minimally adequate food, safety, clothing, shelter, medical care, supervision, or other essential care.

Teachers will call 1-800-292-9582, the 24 hour report line.

When making a report some information that will be beneficial to know:

- Demographics
- Description of the abuse or neglect or why the child is at risk of child abuse or neglect
- known information about the parents or siblings
- known information about the alleged child victim's physical health, mental health, educational issues or parents or siblings
- is the alleged child victim in need of medical attention for injuries
- known information that could put the child's or worker's safety in peril such as the presence of alcohol, drugs, weapons, dangerous animals, or criminal behavior

There must be immediate action taken to protect children from harm. Within 72 hours of a verbal phone report being made a teacher needs to fill out the "Child Abuse/Neglect Mandatory Reporting Form" and submit that to the State of Delaware as well



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### **Short-Term Exclusion and Admittance**

Upon arrival every morning, each child will be observed for common signs of communicable disease, physical injury or other evidences of ill health.

Children shall be excluded from care if they have symptoms of illness specified below, unless written documentation from a licensed physician, or verbal with written follow-up, states the child has been diagnosed and poses no serious health risk to the child or to other children. The symptoms of illness for possible exclusion shall include, but not be limited to any of the following:

- Temperature: infants four months old and younger, equivalent to 100 degrees or greater even if there has not been a change in behavior;
- Temperature: children older than four months, equivalent to 101 degrees or greater; accompanied by behavior changes or other signs or symptoms of illness - until medical evaluation indicates inclusion in the facility.
- Digital thermometer under the arm – in the armpit area - are used. Rectal temperature shall be taken only by a licensed health care professional;
- Symptoms and signs of possible severe illness (such as unusual lethargy, uncontrolled coughing, inexplicable irritability, persistent crying, difficult breathing, wheezing, or other unusual signs) - until medical evaluation allows inclusion;
- Uncontrolled diarrhea, that is, increased number of stools, increased stool water, and/or decreased form that is not contained by the diaper - (three (3) or more episodes of vomiting in the previous twenty-four (24) hours) until diarrhea stops;
- Blood in stools not explainable by dietary change, medication, or hard stools;
- Vomiting illness (two (2) or more episodes of vomiting in the previous twenty-four (24) hours) until vomiting resolves or until a health care provider determines the cause of the vomiting is not contagious and the child is not in danger of dehydration;



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- Persistent abdominal pain (continues more than two (2) hours) or intermittent pain associated with fever or other signs or symptoms;
- Mouth sores with drooling, unless a health care provider determines that condition is noninfectious;
- Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease;
- Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until after twenty-four (24) hours after antibiotic treatment has been initiated;
- Scabies, until twenty-four (24) hours after treatment has been initiated;
- Pediculosis (head lice), until twenty-four (24) hours after treatment has been initiated;
- Tuberculosis, until a health care provider states that the child is on appropriate therapy and can attend care;
- Impetigo, until twenty-four (24) hours after treatment has been initiated;
- Strep throat or other streptococcal infection, until twenty-four (24) hours after initial antibiotic treatment and cessation of fever;
- Varicella-Zoster (Chicken pox), until all sores have dried and crusted (usually six (6) days);
- Shingles, only if sores cannot be covered by clothing or a dressing; if not exclude until sores have crusted and are dry;
- Pertussis, until five (5) days of antibiotic treatment;
- Mumps, until nine (9) days after onset of parotid gland swelling;
- Hepatitis A virus, until one (1) week after onset of illness, jaundice or as directed by the health department when passive immunoprophylaxis (currently, immune serum globulin) has been administered to appropriate children and staff;
- Measles, until five (5) days after onset of rash;
- Rubella, until six (6) days after onset of rash;



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- Herpetic gingivostomatitis (cold sores), if the child is too young to have control of oral secretions; or
- Unspecified illness if it limits the child's comfortable participation in activities or if it results in a need for greater care than can be provided without compromising the health and safety of other children.

A child may return to the Center when the symptoms are no longer present for 24 hours or a licensed physician indicates the child poses no serious health risk to the child or to other children. The EDC reserves the right to request a doctor's note to have the child return to care.

The Center will not permit a child with a reportable communicable disease, as specified by the Delaware Division of Public Health to be admitted to or remain at the Center, unless written documentation from the child's licensed physician states the child has been evaluated and presents no risk to the child or to others; or the Center has reported the illness to the County Health Officer of the Division of Public Health and has been advised the child presents no health risk to others. If there is conflict in the opinions of the physician and the County Health Officer regarding the exclusion of a child, the Center shall follow the instructions of the County Health Officer. Please refer to the Division of Public Health's web site for a list of communicable diseases at <http://dhss.delaware.gov/dhss/dph/dpc/rptdisease.html>

When a child has been diagnosed as having a reportable vaccine-preventable communicable disease, all children who have not been immunized against the disease will be excluded from the Center in accordance with Division of Public Health procedures.

If a child who has already been admitted to the ECAP manifests any of the illnesses or symptoms of a vaccine-preventable communicable disease, the Center will remove the child from the group of well children to a separate area until the child can be picked up



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by a parent/guardian or authorized pick up person; or a licensed physician indicates verbally or in writing that the illness/symptoms pose(s) no serious health risk to the child or to other children.

While a child is cared for in the separate room/area, ECAP staff will ensure that the child is supervised and the child's individual needs for rest, comfort, food, drink and appropriate activity are met.





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### Medication Administration

No LACC ECAP employee will administer any medication or perform any medical procedure to any child in the ECAP environment without a properly completed Medication Authorization form. In-service training by a qualified health care practitioner may be required.

Whenever possible, medication will be administered, and medical procedures will be performed at the child's home, by the child's parent, before or after school. Medication will be given at school only when the student's health would be compromised by not getting the medication during school hours or medical procedures being performed during school hours.

No staff member will be responsible for administering the first dose of any medication. The child must have already experienced taking the medication at home.

### Definition

The term "medication" is a general term and includes both prescription and nonprescription medication, including eye, ear and nose drops, inhalants, ointments, and cough drops.

### Preliminary Procedure

Secure the physician's written order for medication. Instructions must include:

- Name of medication,
- Dosage,
- Time interval, and
- Method of administration.



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These instructions must be included on a prescription label and will be noted on the Medication Authorization form. In the event that an over the counter drug is to be administered, the drug must be in its original case and must be labeled with the child's information. In certain cases, verbal instructions from the physician may be followed, but must be followed up by the completed Medication Authorization form signed by the physician. If a student must carry medication on his/her person during the school day, or if a student is to be allowed to self-medicate (as in the case of an inhaler), a statement to this effect must be signed by the physician and the parent or guardian.

Secure written parental permission to administer medication at school (Medication Authorization). Secure actual medication. All medications are to be supplied to the school in the original childproof prescription bottle (or container in the case of nonprescription medications). The prescription label will include:

- o The child's name
- o The physician's name
- o The name of the medication
- o The dosage, and
- o Instructions for administering the medication.

For short-term use, a sufficient amount of medication should be provided to cover the period for which the medication is to be given.

### Medication Administration Procedure

n ECAP Teacher will notify the Program Coordinator and Family Service Worker whenever an ECAP student is required to take a prescription (or nonprescription) medication at school. A Teacher or other staff member will be designated to administer the medication. The Health Consultant may be called in to do an in-service training for the classroom staff involved.



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Know the five "R's" of medication administration:

1. The Right student.
2. The Right medication.
3. The Right dose.
4. The Right time.
5. The Right method.

Get instructions from the parent on how the child takes medication at home, perhaps mixed with a small amount of applesauce. If tablet, give a drink of water first to moisten mouth.

Do not give medication with essential foods such as milk or orange juice. The child may associate the food with the medication and refuse to drink milk or juice in the future.

Always check the allergy list to make sure the child is not allergic to the medication.

Read the medication label three times before administering to the child:

1. When removed from the cabinet
2. When pouring into measuring device
3. When returning to the cupboard.

Make sure your dose is accurate. Measured medication dispensers are preferred. Once medication has been poured, DO NOT PUT IT DOWN UNTIL IT HAS BEEN

ADMINISTERED TO THE CHILD. The person who pours the medication is the person who should give the medication. DO NOT ADMINISTER MEDICATION TO A CHILD WHO IS CRYING OR FIGHTING THE MEDICATION. This increases chances of choking. Check with the physician to determine when to try again.



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Equipment used to dispense medication must be washed thoroughly, dried, and placed in the medication storage unit clearly marked with the child's name. Put the child's name on equipment, if possible, and use only for that child. Be sure to lock the medicine cabinet.

After giving the medication, document administration of the dose on the Medication Log. If unable to administer the medicine, write "not given" and the reason on the Log and notify the parents. Observe the child daily. Document on the Medication Log any possible side effects. If side effects are noticed, contact the parents and document on the Medication Log and in the child's file.

#### What to do if the Wrong Medication is Given

1. Notify the child's physician and follow his/her instructions.
2. Know the name of the medication and the dose given.
3. Notify the child's parents and explain what happened.
4. Notify the Program Coordinator.
5. Remain with the child and watch for reaction until the parents arrive or the child goes to the hospital.
6. Document using the Incident Report: the time doctor and parents were called, the time the child left the center with the parent and the child's condition at the time he/she left; (alert, talking, no apparent effects of medication) or (drowsy, slurred speech, recognized parent, taken by EMT to hospital at 3:20P.M., etc.). Document any parental instruction or physician's instruction and time received. Document anything and everything you did to follow instructions.

#### Choking



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If the student begins to choke, medication administration must be stopped immediately. When the student begins to breathe normally, and has completely recovered, resume medication administration.

If the student does not recover (continues choking, skin color turns blue) open mouth, inspect to see if tablet, capsule, or medication in food is visible, use finger to sweep mouth and remove object. If unable to see, use Heimlich Maneuver (abdominal thrust) to get medication out. If Heimlich Maneuver is not effective, delegate someone to call for an emergency ambulance and remain with the child. If respiration stops, use mouth-to-mouth resuscitation. If heart stops, use CPR until help arrives.

### Allergic Reactions

If child has an allergic reaction to medication, such as skin rash, hives, itching, nausea or vomiting, do not give medication again. Contact parent and doctor explaining reaction. Add this medication to the classroom list of allergies.

### Cautionary Notes

1. Wash hands thoroughly before and after giving medications.
2. Wear gloves when you are apt to come in contact with saliva.
3. All medications must be kept in a locked cupboard.
4. Each child should have a separate box or bag for medications.
5. Each child should have a separate Medication Log and for recurring medications, these Medication Logs must be completed monthly.
6. Each child should have a medical folder containing the following documentation:
  - o Medication in-service o Physician's order
  - o Parental permission



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- o Medication information sheet. (Note: This information is confidential)
- 7. All items should be kept in the classroom for teacher reference.
- 8. Other staff members and substitutes should be informed where the medical information is kept.

### Injury Prevention

Head Start will "ensure that staff and volunteers can demonstrate appropriate safety practices; and foster safety awareness among children and parents by incorporating it into child and parent activities."- Head Start Performance Standard 1304.22(d) (1) & (2)

Injuries often are the result of a mismatch between a child's abilities and activities, unsafe conditions in the environment, or lack of adult supervision. ECAP staff will seek to prevent injuries by providing a safe environment, reduce or eliminate hazards, practice consistent adult supervision, and teach children, parents, and staff members about safety.

### Procedure

ECAP will provide safe indoor and outdoor environments. Appropriate indoor environments include:

- o Floor coverings and soft elements, such as rugs and cushions;
- o An open area on the floor for the safe movement of children;
- o Identifiable areas for different activities and materials, such as blocks, art, books, and dramatic play. These areas allow children to be alone, although supervised, and to engage in individual or group activities; and
- o Low, open shelves to allow children to see and to select their own materials.



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Appropriate outdoor environments include:

- o A variety of surfaces
- o Areas of sunlight as well as shade or portable shade equipment;
- o A variety of equipment for riding, climbing, balancing, and digging; and o Areas for individual and small group play.

Appropriate and sufficient space will be provided for all program activities and support functions, including office work, the storage of staff belonging, food preparation, janitorial services, the storage of children's belongings, and child and parent activities.

Children will be carefully supervised at all times by qualified staff, with a ratio of at least 1 adult to 12 children.

Families, staff, and children will be made aware of injury prevention principles and practices, including the importance of:

- o Pedestrian safety;
- o Using proper restraints in motor vehicles;
- o Use of protective gear, such as bicycle helmets; and
- o Keeping firearms, medication, and other hazardous equipment and materials locked and away from children.

Staff will promote safety messages to children by:

- o Involving children in making and enforcing safety rules in order to increase their safety awareness and help them feel involved;
- o Using "teachable moments" to discuss safety, such as when a child gets a minor bump or bruise, and talking to children about ways to prevent similar injuries;

and



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- o Teaching children what to do in an emergency, and where to go for help.

Additional information on injury prevention can be found:

- o SAFE KIDS coalitions
- o Local health departments
- o American Red Cross chapters o Children's Safety Network
- o US Consumer Product Safety Commission
- o American Academy of Pediatrics
- o National Highway Traffic Safety Administration.

### Blood-born Pathogens

LACC ECAP recognizes that staff and students incur some risk of infection and illness each time they are exposed to blood or other potentially infectious materials. While the risk to

staff and students of exposure to body fluids due to casual contact with individuals in the school environment is very low, LACC ECAP regards any such risk as serious.

Consequently, LACC ECAP directs adherence to universally recognized precautions. Universally recognized precautions require that staff and students approach infection

· control as if all direct contact with human blood and body fluids is known to be infectious for

HIV, HBV, and/or other blood borne pathogens.





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All first aid providers who render assistance in any situation involving the presence of blood or other potentially infectious materials, regardless of whether or not a specific exposure incident occurs, will be offered the full immunization series as soon as possible, but in no event later than 24 hours. If an exposure incident has taken place, other post-exposure follow-up procedures will be initiated immediately. Gloves must be worn at all times when dealing with any type of bodily fluids.

### Definitions

Bloodborne Pathogens are pathogenic microorganisms that are present in human blood and can cause disease in humans by direct contact with blood or other body fluids from an infected individual. These pathogens include, but are not limited to, the Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

Occupational Exposure means reasonably anticipated skin, eye, mucus membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

### Procedure for Handling and Disposing of Contaminated Materials

Whenever possible, a student should be directed to care for his/her own minor bleeding injury. This includes encouraging students to apply their own band-aids.

Gloves are required for all tasks in which an individual may come in contact with blood or other potentially infectious materials. Such tasks include cleaning body fluid spills, emptying trash cans, handling sharp objects or contaminated broken glass, cleaning contaminated equipment and handling contaminated laundry/clothing. This also includes assisting with



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any minor wound care, treating bloody noses, handling clothes soiled by incontinence, diaper changing, wiping a runny nose and cleaning up vomit.

Complete and effective hand washing of at least 20 to 30 seconds duration should follow any first aid or health care given a student, or contact with potentially infectious materials.

If exposure to blood or other potentially infectious materials occurs through coughing, any first aid procedure, or through an open sore or break in the skin, a thorough washing, preferably with germicidal soap, is necessary.

In the event that hand washing facilities are not available, thorough cleaning using an antiseptic cleanser and clean cloth/paper towel or antiseptic towelettes is necessary. If alternate methods of cleansing are used, hands must be washed with soap and running water as soon as possible.

Any surface contaminated with blood or other potentially infectious materials must be cleaned after each use and at the end of the day with soap and water and then rinsed with an EPA approved disinfectant. These surfaces include equipment, counters, mats (including those used for physical education) and changing tables or surfaces.

Disinfectants which can be used include Lysol, Purex, Clorox, Tough Act bathroom cleanser, Real Pine liquid cleanser, Pine Sol; Spic and Span, Tackle liquid, Comet, and other products with EPA numbers.

An EPA approved disinfectant must be used when cleaning fluids such as blood or vomit from the floor or other such contaminated surfaces.

Contaminated laundry such as clothing and towels must be placed and transported in bags and containers in accordance with universally recognized precautions. All such items must be laundered in soap and water and placed in a dryer.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Needles, syringes, broken glassware and other sharp objects found on school property must not be picked up by students at any time, or by staff without appropriate puncture-proof gloves or mechanical device such as a broom, brush and dust pan. Any such items found must be disposed of in closable, puncture resistant, leak proof containers that are appropriately labeled.

All wastebaskets used to dispose of potentially infectious materials must be lined with a plastic bag liner that is changed daily.

Gloves and repellant gowns or aprons are required for tasks in which exposure to blood or other potentially infectious materials can be reasonably anticipated to contaminate street clothing. Type and characteristics of such protective clothing will depend on the task. Such tasks may include diapering/toileting with gross contamination, assisting with wound care, sorting or bagging contaminated laundry/clothing, and disposing of regulated waste with gross contamination.

Maximum protection with gloves, face and/or eye protection and gowns are required whenever splashes, spray, spatter or droplets of blood or other potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated. Such tasks may include feeding a child with a history of spotting or forcefully vomiting and assisting with severe injury and wounds with spurting blood.

"Regulated waste" (liquid or semi-liquid blood and other potentially infectious materials, items caked with such materials, items that would release blood or other potentially infectious materials if compressed, and contaminated sharps) must be handled with extreme care, be placed in labeled or red color-coded bags, and is subject to regulated disposal.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Hand washing

ECAP staff, parents and volunteers working in the classroom will teach and model excellent preventative hygiene practices in order to lower the risk of spreading communicable diseases.

### Procedure

Children, staff members, parent helpers and volunteers will wash their hands in the following situations:

- o At the beginning of the school day.
- o After using the bathroom or helping a child to use the bathroom.
- o Before putting on disposable gloves and after removing the gloves.
- o Before handling food or cooking utensils (Includes preparing and serving food.)
- o Before and after eating. NOTE: Children should go to the eating table immediately after they wash their hands. Do not let them sit on the floor in a circle activity or play with toys again.
- o Before and after giving medication (see Administration of Medicine policy). o Before and after a diaper change.
- o After handling items that may be soiled with body fluids or waste, such as blood, drool, vomit, urine, feces, open sores, or discharge from the eyes or nose.
- o After handling pets or other animals.
- o After inspecting hair for lice.
- o After cleaning activities.
- o At the end of the school day.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Staff will teach and assist children as needed concerning hand washing in the situations listed above.

Procedures for proper hand washing will be posted by the sinks in each center.

1. Turn on water to a warm temperature.
2. Wet hands.
3. Using liquid soap from a dispenser, rub hands together vigorously for 20 seconds. If hands are very dirty, rub hands together for at least 40 seconds.
4. Wash all surfaces including: palms and backs of hands; wrists; between fingers; and under fingernails.
5. Rinse hands well under warm running water.
6. Dry hands with paper towels.
7. Turn off water with the used paper towel before throwing towel in the wastebasket.

### Dental Hygiene

LACC ECAP encourages dental health and the development of health skills that will last a lifetime. Tooth brushing is one way to promote basic dental hygiene. Teachers regularly supervise children's tooth brushing, provide demonstrations and dental health education and model good tooth brushing techniques and dental hygiene in association with meals.

### Procedure

Each child enrolled in ECAP will have his or her own toothbrush. The toothbrush will be clearly marked and easily identifiable as belonging to a specific child.



## The Latin American Community Center

### Early Childhood Assistance Program (ECAP)

Following tooth brushing, each child's toothbrush will be stored in a clean, individual, well-marked holder where it will be allowed to air dry.

Toothbrush storage will consist of clear plastic drawer units with enough space around each drawer to allow toothbrushes to air-dry. Individual drawers will be marked with the child's picture and/or name. This system allows children to independently access their own toothbrush, and decreases the possibility of cross contamination through contact.

Individual toothbrush holders will be cleaned weekly with soap and water, rinsed with clear water and then rinsed with a program-approved disinfectant solution (household bleach and water in a 1:10 dilution.)

Children's toothbrushes will be replaced every three months, or immediately when the child has been ill, the toothbrush has been contaminated in some way, or if the toothbrush shows evidence of wears. Contaminated toothbrushes will not be disinfected, they will be replaced.

toothbrush storage units will be inspected monthly by supervisory staff. Toothbrush storage units will be replaced at least every two years, sooner if replacement appears to be advisable.

Source: Department of Health and Human Services, Center for Disease Control

#### Diapering

Diapering will be implemented in a manner that is safe, secure, respectful of the child, and that enables the child to learn self help skills.

#### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Never leave the child unattended. Establish a designated area specifically for diapering that is not located in or near any food handling areas and is not easily visible to other children.

Note: A child of 4 years old may feel uncomfortable with other children watching and careful planning should be done to ensure that diapering occurs in a respectful and comfortable way.

Gather all needed supplies (Baby wipes, plastic bag for soiled diaper/clothes, disposable gloves, disinfectant) and place near, not on, the changing mat before beginning to diaper. Keep all supplies used in diapering out of the reach of children.

Place a piece of changing paper or disposable pad on mat where child will be changed if the child is not able to him/herself help in a bathroom stall while standing up.

Wash your hands and put on disposable gloves. Avoid any contact with child's soiled clothing except with gloved hands.

Use safe transferring and lifting procedures to avoid dropping the child or injuring your back.

Help the child to remove his/her own clothing, wipe (with Baby Wipes only) his/her own genitalia and assist in putting on a fresh diaper, underwear and clean clothing. Be careful when removing soiled diaper/clothing to avoid contamination of other objects and surfaces.

Place soiled diaper into proper receptacle as follows: Fold disposable diaper inward, reseal with tapes, and place in plastic bag, tie off the top of the bag and place in a trashcan.

Empty the trash with soiled materials in the outdoor trashcan as soon as diapering is completed.



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### Early Childhood Assistance Program (ECAP)

Cloth diapers and or clothing must be placed in a plastic bag. Tie off the top of the bag, place inside another sealed bag and label outside with "Body Fluids"; put child's name on bag and store in a secure location, away from food service areas and out of reach from children. Give soiled diapers and/or clothing to the parent to take home and wash.

When the child cannot assist you, gently clean the child's bottom and genitalia with a moist disposable Baby Wipe, front to back, only once per wipe, repeating with another wipe when necessary. Place soiled wipes and wax paper into the same plastic bag with diaper/clothes. Put clean diaper and clothing on child.

Remove and discard gloves using the glove removal process that is needed for handling blood borne pathogens to prevent any possible exposure to disease.

Have the child wash his/her hands with soap and warm water. (Hand washing Policy 7)  
With newly gloved hands, remove any visible soil on mat with EPA approved disinfectant. Remove and discard gloves using the same glove removal process.

Wash your hands thoroughly.

Ensure that surfaces or mats are kept clean, waterproof, and free of cracks, tears and crevices. All diapers and wipes that are provided by the parent must be labeled with each child's name and special instructions and stored off the diapering surface, out of reach of children.

Only paid ECAP staff and/or the child's parent will engage in the diapering of an enrolled child. When possible a second staff person or adult should be present or be able to observe during the diapering process.

### Cleaning and Disinfecting





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### Early Childhood Assistance Program (ECAP)

Regular cleaning and disinfecting will occur to reduce germs and the spread of disease in the classroom. The Facilities Department is responsible for the daily maintenance and cleaning of the ECAP building. ECAP staff must provide support in the event that the

Facilities staff cannot attend to a problem immediately and the ECAP staff is also responsible for weekly disinfection of toys, materials and equipment.

#### Definitions

Clean means to remove surface dirt using a product suitable for the surface being cleaned. Disinfect means to kill surface germs using a disinfecting cleaner, chlorine bleach solution, or other disinfectant.

#### Procedure

Keep labels on all cleaning products and solutions and read directions before use. All cleaning solutions are poisonous and must be stored away from foods and kept out of children's reach or locked up. Do not mix cleaners such as bleach and ammonia; doing so will release harmful fumes.

routine Disinfecting will be done using a chlorine bleach solution (Approximately 1 Tbsp. Bleach in 1 gallon water).

#### Post Guidelines for Cleaning and Disinfecting Surfaces in the Kitchen and Classroom.

- o Washable toys will be selected for the classroom whenever possible.
- o Small toys that go into a child's mouth will be gathered up and cleaned and disinfected at least daily.
- o Larger toys will be cleaned weekly. If obviously dirty they will be cleaned immediately.
- o Dress-up clothes will be washed and dried by machine weekly. Hats will be washed and/or disinfected weekly (daily if necessary).



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- o Cloth or stuffed toys will be washed twice a year or as needed by machine, using hot water and laundry detergent. Toys may be dried in a hot dryer or air-dried. Do not return toys to the play area until they are completely dry. Cloth or stuffed toys may require occasional surface cleaning between washings.

#### Other Surfaces

- o Clean Toothbrush Storage Units regularly in accordance with Dental Hygiene Policy 8.
- o Counter tops, shelves and toy storage areas will be cleaned when soiled, at least weekly.
- o Garbage cans will be cleaned and disinfected at least weekly.
- o Other surfaces will be cleaned and/or disinfected as indicated in the following chart.

#### Guidelines for Cleaning and Disinfecting Surfaces

##### Dishes and Kitchen Area

	Clean	Disinfect	Frequency	Comments
Dishes and Kitchenware	X	X	After every meal	Wash in hot, soapy water, rinse in hot water, rinse in chlorine solution.

##### Toothbrush

Storage Units	X		Weekly	Allow toothbrushes to air dry in individual storage
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## The Latin American Community Center

### Early Childhood Assistance Program (ECAP)

drawers.

#### Food Preparation

Areas X X Before and after food preparation Use chlorine solution.

#### Food Storage

Areas X Weekly Dispose of spoiled food.

Refrigerator X X Weekly, at least Inside and outside; dispose of spoiled food.

Range Top X X Before and after use Clean as needed during use.

Oven and

Overhead Hood X Weekly, at least

Filters X Quarterly Replace as needed.

#### Tables and

Eating Surfaces X X Before and after each meal Use chlorine solution.

#### Toys and Dramatic Play Props

Small toys that go in to the mouth X X Daily or as soiled Use chlorine bleach solution. Rinse and air dry.

Larger toys X Weekly

Dramatic play clothes X Weekly Machine wash and dry. Can harbor eggs from head lice.

Hats X X Weekly or as needed Use plastic or washable hats. Wipe with chlorine bleach solution or machine wash and dry.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Cloth or stuffed

toys    X                      2 x a year or as

needed              May require surface cleaning between washing. Wash in machine, air dry or dry in dryer.

Other Surfaces {Custodial Duties}

Counter tops, toy shelves & storage              X                      Weekly

Hand washing

sinks    X              X              Daily

Faucets and

handles              X              X              Daily    Clean then disinfect or use disinfectant cleaner.

Surrounding

counters              X              X              Daily

Toilet bowls    X              X              Daily    Use disinfectant toilet bowl cleaner.

Toilet seats    X              X              Daily, if soiled, immediately              Clean, then disinfect or use a disinfectant cleaner.

Flushing handle              X              X

Door knobs    X              X

Bathroom floors              X

Changing table              X              X              After each use

Garbage cans              X                      Weekly or when soiled

floors    X                      Daily and when soiled              Wash.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Carpets	X	Daily Vacuum, wipe up spills and clean with appropriate carpet cleaner
Small rugs	X	Daily/weekly Vacuum or launder.

### 12 First Aid Kits

Every ECAP classroom will have a well-supplied first aid kit readily available on site. First Aid Backpacks will be available for use on the playground and on outings away from the site and must be taken on fieldtrips and outdoors when children are on the playground. Each kit must be accessible to staff members at all times, but will be kept out of the reach of children. First aid kits will be restocked after use, and an inventory will be conducted at regular intervals. Beacon Safety Supplies come regularly to check the supplies and replenish when needed.

#### Procedure

All staff will be trained in first aid and cardio-pulmonary resuscitation (CPR). Staff with first aid/CPR certification will treat injured children and workers with supplies in the first aid kit, when appropriate.

Minor injuries will be documented using the Incident Report. The original will be filed in the child's file and a copy will be given to the parent at the end of the day.

Beacon Safety Supply will inventory and request materials to restock first aid supplies monthly.

Home visitors will discuss with families the importance of, and use of first aid kits, will help families determine what first aid supplies the family has available or may need in the home, and encourage families to maintain well-stocked home first aid kits or supplies.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Emergency Closure

The LACC will establish procedures for canceling class in an emergency situation and assign responsibility for notifying children's of parents or caregivers, and for notifying the Program Director.

The decision to cancel class and/or close the center may be made based on weather conditions, problems with the building that would make occupancy unsafe or uncomfortable, or other unforeseen circumstance.

### Emergency Closure Procedure

If the need for an emergency school closure is determined prior to the start of class;

- o Parents will be notified by using emergency numbers on the Child Release and Emergency Contact Form.

- o If the closure is weather relate, parents and staff should go through the following steps to determine if program will open:

- Visit [www.wdel.com](http://www.wdel.com) for local listings
- Visit the LACC's website, [www.thelatincenter.org](http://www.thelatincenter.org)
- Call the LACC's emergency notification line 302-655-7338 ext 7748

If the need for an emergency school closure is determined after the start of class;

- o Parents will be notified by using emergency numbers on the Child Release and Emergency Contact Form to pick-up the child at school. ECAP staff need to make sure that emergency contact numbers are kept current and that parents or an alternate responsible adult can be reached at all times.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Security of Agency Premises

LACC ECAP staff will ensure that the school premises are secured from unauthorized access. A key fob is needed to access the building and playground gates will be latched at all times. Parents and other authorized individuals may knock at the door and will be admitted to the classroom after being identified by a staff member.

Under extraordinary circumstances, the center and playground may be completely locked down, with children and adults kept inside the locked building. This would happen when local circumstances require extra precautions or if notified by local police departments of hazardous circumstances that could jeopardize the safety of children and adults during school hours.

### Lockdown Procedure

Contact local police officials and keep the school environment as safe and as normal as possible for children.

In the event that a school lockdown becomes necessary, lock all school doors during school hours and keep children inside until notified by officials that these precautions are no longer necessary.

Send a note home with every child, informing parents of the lockdown, explaining the reasons for the lockdown, the way it was explained to children, and the time period doors were locked. Inform parents of any adverse reactions their child may have had during the lockdown and provide parents with assistance in working with children's fears by providing access to the ECAP Mental Health Consultant.

### Emergency Evacuation

LACC ECAP has an Emergency Evacuation Plan that incorporates the following procedures:

*Policy Council Approval: 6/20/2016*  
*Governing Board Approval: 6/22/2016*



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Emergency Evacuation Procedure

In the case of a phone call threat, the person answering the call will signal another staff person to call 911 and the local phone company (dial 0).

If emergency personnel notify ECAP that the ECAP building must be evacuated, staff will immediately begin the evacuation process.

- o A designated staff member will notify all classes to evacuate the building.
- o A designated staff member will post a notice on the entrance door indicating the location where the children have been taken.
- o Teachers will take the class list and First Aid backpack with student emergency information with them when they leave the center.
- o Everyone will leave the building and assemble at a designated place where students, volunteers, and staff will be counted.
- o When everyone has been accounted for, teachers will lead the students to a predetermined safe location. This safe location will be within walking distance, but more than 300 yards from the center.
- o Teachers will keep students calm by involving them in a quiet activity such as reading or story-telling, coloring, or songs and finger play.
- o A designated staff member will lock all doors and remain at the school to assist the police or emergency personnel. They will rejoin students and staff as soon as possible after law enforcement or emergency personnel take charge of the building.
- o If the evacuation is to last longer than 30 minutes parents will be notified that they need to pick-up their child. (Refer to 13 Emergency Closure Policy)





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- o Students and staff will return to the ECAP building only after receiving permission from law enforcement or emergency personnel.
- o A letter will be sent home after class informing parents of the circumstances surrounding the evacuation, the way it was explained to children, and informing parents of any adverse reactions their child may have had during the evacuation. Parents will be offered assistance in working with children's fears by providing access to the ECAP Mental Health Consultant.

### Animals in the School Setting

ECAP will take every care to ensure the safety of children and adults when animals are used in the curriculum. Animal owners will accompany the animals at the center, assure the animals are in good health, and be responsible for the animals' behavior.

### Rationale

The benefits of using pets and/or farm animals in the preschool setting to supplement curriculum include: teaching children responsibility, teaching empathy for other living creatures, teaching about the life cycle, and more.

Due to the potential hazards to the health and safety of children, staff and parents, precautions must be in place to protect those who are around animals at ECAP.

Bacteria and parasites pose the highest risk for human disease from animals; even healthy animals can harbor human enteric (intestinal) diseases. Because animal fur, hair, skin and saliva can become contaminated with fecal organisms, transmission can occur when people pet, touch, feed or are licked by animals. Illness also has been associated with contaminated clothing and shoes.



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The risk for infections is increased by certain human behaviors, especially in children. These factors include lack of instruction on taking appropriate precautions, inadequate hand washing, lack of close supervision and hand-to-mouth/eyes/nose activities.

### Procedure

Due to the prevalence of asthma and allergies in adults and children, pets (with the exception of fish and contained non-venomous spiders and insects) will not be housed in ECAP. Parents will be informed of the benefits and potential risks associated with animals at school.

- o Any animals visiting the center will require a specific permission form signed by a parent or guardian.
- o Permission slips will ask parents to indicate special concerns for their child such as compromised immune system, allergies or asthma.
- o Animals will be allowed to temporarily visit in the classroom at staff discretion.
- o Animals must be free of apparent fleas, ticks, mites, lice or open sores. o Children will be carefully supervised when in contact with animals.
- o Specific areas in the classroom or on the playground or grounds will be designated for animal contact.
- o Animals will not be allowed in areas where food and/or drink are stored, prepared, served or consumed.
- o Animals will not be allowed to roam or fly free.
- o All areas where animals have been present will be cleaned and disinfected. o Staff and children will wash hands thoroughly immediately after contact with



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

animals, animal products or animal environments.

### Animal-Specific Guidelines:

Fish and crustaceans: These will not be touched by children. Adults will use disposable gloves when cleaning aquariums. Aquarium water will not be disposed of in sinks used for food preparation, tooth brushing, hand washing or obtaining drinking water.

Birds, rabbits and rodents (e.g., mice, rats, hamsters, gerbils, guinea pigs, squirrels and chinchillas): These must be caged and not touched by children.

Baby chicks, ducks, geese, turkeys, etc.: Children will not have physical contact with these birds to prevent Salmonella or Campylobacter infection.

Reptiles and amphibians (including turtles, lizards, and snakes): These must be caged and not touched by children. To prevent Salmonella infection, children will not have physical contact with reptiles and amphibians.

Animals Not Appropriate in School Settings: These animals will not be allowed in the center.

- Inherently dangerous animals, any non-domestic animals (e.g. lions, tigers, cougars, bears)
- Nonhuman primates (e.g. monkeys and apes)
- Mammals at high risk for rabies (e.g. ferrets, bats, raccoons, skunks, foxes and coyotes)
- Aggressive or unpredictable animals, wild or domestic
- Stray animals with unknown health and vaccination history
- Venomous or toxin-producing spiders, insects, reptiles and amphibians.



The Latin American Community Center  
Early Childhood Assistance Program (ECAP)

1304.23 Child Nutrition

- 1 Identification of Nutritional Needs
- 2 Nutritional Services
- 3 Meal Service
- 4 Family Assistance
- 5 Child and Adult Care Food Program
- 8 Non-Discrimination in Child and Adult Care Food Program Services
- 9 Family Assistance with Nutrition
- 10 Food Safety and Sanitation



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Identification of Nutritional Needs

The LACC ECAP works in collaboration with Nemours Health and Prevention Services and with a contracted Registered Dietician to ensure that all nutritional needs of the children are met through a varied, healthy, ethnic menu.

A Nutrition Questionnaire is completed upon enrollment into ECAP and reviewed by a Registered Dietitian after collection of heights and weights and calculation of BMI (Body Mass Index), which are collected by the Health Consultant and then shared with the Nutritionist.

### Procedure

At the initial meeting with the parent, the Family Service Worker will ask the parent to complete the Nutrition Questionnaire (please see attached Nutrition Questionnaire) and will explain the benefits of the nutritional program to the parents. If the parent checks that yes, he/she would like a meeting with the Nutritionist, the FSW will act as the liaison to set up the appointment once classes commence.

The Assessment asks questions' pertaining to the family's eating habits and specific questions regarding the child's eating patterns and any concerns the parent might have, such as allergies. This information is shared with the required staff and if needed, changes are made to the menu to accommodate children who cannot eat certain foods due to medical or religious reasons.

The Health Consultant collects information regarding the height, weight and BMI of the children while completing the All about Me health books with the children within the first month of class. This information is then shared with the Nutritionist so the Nutritionist can begin working with the families.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### 2 Nutrition Services

LACC ECAP's menus were created through collaboration with Nemours Health and Prevention Services (NHPS) and follow the latest in healthy eating. The Latin American Community Center recognizes the need for and importance of healthy lifestyle in children and strives to support and offer the healthiest, varied options to its children.

The menus also take into account the diverse population within LACC ECAP and make every effort to offer a variety of meals to accommodate families.

#### Procedure

The LACC participates in the Child and Adult Food Program (CACFP) and these funds are used as payment for nutrition services.

All children who participate in AM ECAP receive breakfast and lunch. All children who participate in PM ECAP receive lunch and snack. Each meal constitutes at least 1/3 of the child's daily nutritional needs. Meal patterns and serving sizes are followed carefully and are set by CACFP. Menus are posted on the Parent Communication board so parents can see daily what their children are eating. If alterations need to be made due to religious or health reasons, the teachers, FSW and kitchen staff will be notified so that proper accommodations can be made.

Meals are served family styles, where children and staff sit together, serve themselves the food and then engage in conversation. The staff must ensure that they are engaging all children in proper conversation and they must encourage, not force, children to sample the food that is being served. Children should be given adequate time to eat.

Parents are given opportunities for feedback regarding menus and nutrition services and their comments/suggestions are taken into consideration when menus are being



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

revised but Program Coordinator, Cook and Nutritionist. The Policy Council is given the opportunity to review and approve all menus.

Staff must engage children in teeth brushing after each meal. Children will be taught to brush their own teeth (teachers will assist those with disabilities who might be incapable of doing so) with a pea-size of fluoridated toothpaste. Each child will have his/her own, labeled toothbrush that is stored so it stays clean and can air dry. These toothbrushes should be replaced when the bristles are worn or at least every 3 months. If tooth brushing is not possible, i.e. on a field trip, children will be encouraged to rinse mouth with water.

### Meal Service

LACC ECAP will provide children with regular mealtimes, and nutritious foods that make up 1/3 of a child's daily nutritional requirements are offered to children at the table. Children and adults will eat together "family style" in a pleasant conversational environment.

Menus will be developed to meet specific cultural, ethnic and age-appropriate preferences while continually introducing new foods. Children will be allowed to serve themselves and determine which foods they will eat, and how much they will eat.

### Procedure

Children and adults will eat in small groups of 5 to 7 people to facilitate conversation and social interaction. Adults will encourage interesting and pleasant conversation around children's total experiences, not limiting discussion topics to food and nutrition.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Teachers and other adults will model good eating habits and table manners and will set a good example by their positive attitudes toward, and acceptance of food served. Talk about personal dislikes of food will be discouraged.

When children and adults have finished their meal, they will be expected to clear their own place. Children will then brush their teeth and find a quiet activity to do until everyone has finished eating.

The adult's role is to make sure that adequate amounts of nutritious foods are available (according to USDA/ICACFP regulations). The child's role is to serve him/herself and decide which foods he/she will eat, and how much he/she will eat. Staff should encourage, never force, a child to sample all foods. Food is to never be used as a form of punishment or reward.

Menus are altered if needed for children with medical or religious reasons for not consuming certain foods. They are altered with assistance from family, Nutritionist and kitchen staff.

### Family Assistance

Parent education activities must include opportunities to assist individual families with food preparation and nutritional skills.

### Procedure

With assistance from the Nutritionist, one yearly training on nutrition and healthy eating is offered to the families with ongoing support throughout the year. The Nutritionist must gather information on families to determine the most appropriate training to be offered.





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The Registered Dietician must make him/herself available throughout the year to meet with parents to discuss specific nutritional needs of families who are interested.

### 5 Child and Adult Care Food Program

LACC ECAP will abide by all the rules and regulations of the USDA Child and Adult Care Food Program in providing quality meals to Head Start enrolled children.

#### Procedure

Cooks will follow federally mandated meal patterns that meet the nutritional requirements of enrolled children.

- Breakfast will consist of three meal pattern components in the required amounts (one serving of fluid milk, one serving of grains or bread, and one serving of vegetable or fruit).
- Lunch will consist of four meal pattern components in the required amounts (one serving of fluid milk, one serving of grains or bread, one serving of meat or meat alternative, and two servings of different vegetables and/or fruits).



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### 1 1304.23 Child Nutrition

- Snack will consist of two of the four meal pattern components. Snacks must be made up of two different components and only one beverage.

All foods meeting meal pattern requirements must be creditable.

Combination foods may be used for no more than two different meal pattern components of the meal, and must have a recipe documenting the volume or weight of all ingredients used, and the number of servings the recipe makes.

The Program Coordinator will monitor meal service to ensure quality of service and compliance with USDA /CACFP requirements.

- Monitor menu records prior to service to assure all meals claimed for reimbursement meet requirements and have supporting documentation on file.
- Conduct unannounced site monitoring of meals served in the center three times during the year.

### 6 Food Safety and Sanitation



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The food preparation process will include strict observation of personal hygiene, continuous application of sanitary food-handling techniques, destroying harmful bacteria, thorough washing, and minimal handling of food throughout the process.

The LACC ECAP kitchen is inspected annually by the Department of Public Health and the Office of Childcare Licensing.

LACC ECAP requires that all kitchen staff participate in the annual CACFP training. Only employees will prepare food for breakfast, lunch, snacks, or cooking projects. Additional parents and volunteers may help with cooking and food-related classroom projects under the supervision of an employee.

### Procedure

Food must be prepared with a minimum of handling, with suitable utensils, and on surfaces that prior to use have been cleaned, rinsed, and sanitized to prevent cross-contamination.

Raw fruits and vegetables must be thoroughly washed with water before cooking or serving. Tops of cans are washed before opening.



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Potentially hazardous food containing milk, meat, poultry, eggs, and fish products are prepared from chilled products as quickly as possible and refrigerated in shallow containers or served immediately.

Potentially hazardous foods requiring cooking must be cooked to heat all parts of the food to a temperature of at least 140 o Fahrenheit, except:

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- Poultry and dressing must be cooked to heat all parts of the food to at least 165° Fahrenheit with no interruption of the cooking process.
- Pork and pork products must be cooked to heat all parts of the food to at least 155° Fahrenheit.
- Ground beef must be cooked to at least 155° Fahrenheit.
- Other beef, eggs, fish to at least 145° Fahrenheit.

Potentially hazardous foods that have been cooked and then refrigerated must be reheated rapidly and thoroughly to 165° Fahrenheit or more before being.

Potentially hazardous foods must be thawed:



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- Under refrigeration at a temperature below 40 degrees Fahrenheit;
- Under cold running water, no longer than 2 hours;
- As part of the conventional cooking, i.e.: hamburger patties or shrimp.

Potentially hazardous food must be kept at an internal temperature of 40 degrees Fahrenheit or below, or at an internal temperature of 140 degrees Fahrenheit or above during the holding period.

Two spoons are used for tasting. One spoon dips into the food and transfers it to the other spoon for tasting.

Each serving bowl on the table has a separate spoon or other utensil for serving food. Cover food in bowls to set on table before serving. Use plastic wrap for cold, aluminum foil for hot.

Place minimum quantities of every meal component (see USDA requirements for three to five year olds) on the table and add as amounts become depleted. This way less food will be wasted and food will be available in the case of an accident.

No leftovers from the table will be sent home with children, staff, or adults due to the hazards of bacterial growth. No leftovers from the table can be reused in the kitchen.



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Pour milk into clean pitchers for each meal.

1 1304.23 Child Nutrition

The Latin American Community Center

La Fiesta Child Nutritional Assessment

Name: \_\_\_\_\_ Date Completed: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Type of Milk Consumed:

☐\_2% Milk ☐\_1% Milk ☐\_Skim Milk ☐\_Lactose free ☐\_Whole Milk

Chocolate/ Strawberry milk

Eating Frequency: (times per day) \_\_\_\_\_

Does your child drink water? \_\_\_\_\_ How many ounces per day?

What else does your child drink (circle if your child has consumed in the last week)

Juice Soda Gatorade Vitamin water/ life water Iced tea

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*Governing Board Approval: 6/22/2016*



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Lemonade

Does your child drink from a bottle at bedtime? \_

How many days per week does your family eat out/ take out? \_ What concerns or questions do you have about feeding your child?

Does your child take vitamins? If yes, what kind?

Do they contain iron? Do they contain Fluoride? Were they prescribed?

Is there any food your child should not eat for medical, religious or personal reasons?



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Early Childhood Assistance Program (ECAP)

Dietary Habits: Favorite Foods:    \_       \_       \_ Least Favorite Foods: ----- - - - - -  
-----

! 1304.23 Child Nutrition

How often does your family eat together? (Circle how often)

Never or almost never      1-2 times per week   3-4 times per week

5-6times per week   Daily

How often does your child eat fruit? (Circle how often)

Never or almost never      1-3 times per week   4-6 times per week

Once a day   Many servings a day

How often does your child eat vegetables? (Circle how often)





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Never or almost never      1-3 times per week      4-6 times per week

Once a day      Many servings a day

Does your child have or has your child had any of the following:

Food allergies

Sudden change in appetite

Trouble chewing or swallowing food

\_\_\_ Frequent diarrhea      stomach pain      vomiting      constipation

Would you like to speak to a nutritionist?      yes      no



# The Latin American Community Center Early Childhood Assistance Program (ECAP)

Reviewed, edited and approved by Michell Fulmer, RD December 2010

## 1 1304.24 Child Mental Health

### Child Mental Health Table of Contents

- 1 Parental Involvement
- 2 Classroom Observation by a Mental Health Professional
- 3 Referral for Mental Health Services



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The Latin American Community Center  
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# The Latin American Community Center Early Childhood Assistance Program (ECAP)

Policy Council Approval:

Child Mental Health

1 1304.24 Child Mental Health

1 Parental Involvement

LACC ECAP recognizes the importance of working with parents so that children can reach their maximum potential and development. In the area of Mental Health, ECAP staff must communicate with parents to draw upon parents' knowledge of their

*Policy Council Approval: 6/20/2016*  
*Governing Board Approval: 6/22/2016*



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

children's development. ECAP staff must perform this communication in a way that is sensitive, culturally appropriate and respectful, especially since mental health conversations can

be difficult and very personal for some families. Once a proper relationship is established between parents and staff, communication will be more comfortable and both parties will be able to gain more insight into the child.

### Procedure

Through informal and formal encounters, ECAP staff must establish a relationship with parents where certain topics are discussed: developmental and cognitive phases and concerns parents or staff may have; child's special interests, strengths or needs; changes in child's behavior, mood or appearance, and any information pertaining to medical history. This information is then used to individualize services for the child.

In addition to parents sharing their thoughts on the child, staff must share their observations of the child with the parents. Developmental milestones, individual development, attachment and separation issues and recognizing needs and strengths should all be addressed with the parents if needed.

Staff will support parents and empower them to understand their child's individual development and mental health status and assist them with appropriate responses in these areas. Parents will be guided on how to strengthen nurturing, supportive



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environments and relationships by the staff and the Mental Health Consultant through individual meetings or larger trainings.

### 2 Classroom Observation by a Mental Health Professional

Based on the belief that anticipating and understanding a child's behavior and development helps parents and staff respond to that behavior in a manner more likely to enhance the child's development, LACC ECAP schedules ongoing classroom observations by a qualified Mental Health Professional each year.

The focus of these observations is on teacher-adult interaction, adult-child interaction, child-child interaction and general classroom atmosphere. The consultant meets with the classroom team following observations to make recommendations with regard to the development of emotionally supportive classrooms, curricula and relationships.

The Mental Health Professional will also make a note of the general social-emotional development and behavior of children, and may make recommendations as to

1304.24 Child Mental Health



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appropriate behavioral interventions to better integrate all children in classroom activities. Parents of children with behavioral difficulties will have an opportunity to confer with the Mental Health Professional and/or classroom staff and will participate fully in any behavioral planning for that child.

### Procedure

The contracted Mental Health Professional will observe children in the classroom environment each month, and as requested for individual children.

Mental Health Professionals are available for consultation with staff and parents with regard to identification of children with emotional adjustment problems, classroom environment, and interventions for children with behavioral difficulties as identified in the semi-annual classroom observation.

Mental Health Professionals may be called upon to observe an individual child with written parental approval, and to work with classroom staff, the child's parent, and other relevant parties to develop a behavior plan.

The Mental Health Professional will provide consultation and technical assistance for teachers on implementation and evaluation of therapeutic programs for children with emotional adjustment problems, and adaptation of the classroom environment, schedule and activities to better meet the needs of individual children.





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### 3 Referral for Mental Health Services

Mental health services at LACC ECAP are based on the belief that child and adult needs should be addressed in a manner that alleviates unnecessary stress and creates avenues for learning to successfully manage life's inevitable challenges. Interactions at LACC ECAP seek to instill a sense of confidence. Adults and children are encouraged to participate in experiences that increase their self-awareness and afford them opportunities to relate to others in a safe and supportive environment.

The mental health services at LACC ECAP reflect a collaborative continuum of services that includes prevention, identification, referral and treatment. When a referral for mental health treatment is indicated, families are fully involved in the process. LACC ECAP collaborates with agencies and individuals in an effort to enrich the services available to families and staff.

#### Procedure

When the family and/or staff have a mental health concern regarding a child, permission is obtained from the family for the contracted mental health professional to



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conduct an individual assessment. This can be completed in class and/or on a home visit. The

### 1 1304.24 Child Mental Health

mental health professional will meet with the family upon request to provide information and consultation around mental health concerns for children and other family members.

Results from the assessment are shared with parents and staff, and a plan is made based on the information gained. If a referral to a mental health provider is recommended, parents will be assisted in locating facilities for services. Classroom teachers are involved in mental health services by helping parents develop plans that identify participation in mental health services as a desired outcome for their family.

The Consultant will be available to orient ECAP parents to the mental health services to be provided by ECAP. Two parent group meetings will be scheduled to advise parents on how to secure assistance for individual problems, to answer questions regarding their child's behavior and development, and to advise in developing a program of mental health education for parents.

The Consultant will assist in the utilization of community mental health resources and advise as to appropriate referrals.



# The Latin American Community Center Early Childhood Assistance Program (ECAP)

## 1 1304.40 Family Partnerships

### Family Partnerships Table of Contents

1. Parent Involvement
2. Family Partnerships
3. Resource and Referral
4. Advocacy
5. Parents and Transitions
6. Emergency and Crisis Intervention
7. Home Visits

## 11304.40 Family Partnerships

### 1 Parent Involvement

Research indicates that to sustain the gains made by the child in ECAP, they must be understood and built upon by the family and the community. To achieve this goal, ECAP



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

will provide for the involvement of the child's parents and family members in the child's ECAP experience. Parents of enrolled children will be encouraged to participate in the full range of program and decision-making activities.

### Procedure

Parents will be encouraged to serve in the ECAP classroom as volunteers, taking an active part in the daily schedule of activities with children, helping with facilities or taking part in other projects. When appropriate, parents will be used as volunteer or paid substitutes in the classroom, or in the kitchen.

All parents of currently enrolled children will be considered members of the Parent Committee. As a member of one of these groups, parents will participate in making decisions about the program's curriculum and will provide staff and Policy Council with input for developing local program policies, activities and services. Parent Committees may organize social events, community projects, classes, workshops, guest speakers, support groups or fund-raising activities.

Parents elected to Policy Council will participate in the process of making decisions about the nature and operation of the ECAP program, will participate in the annual program self-assessment, and will serve as a link between the Policy Council and the Parent Committee.



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As the primary educators of their children, and in cooperation with the teaching staff, parents will be encouraged to reinforce skills their children have learned at school, and encourage the development of new skills in the home environment.

### 2 Family Partnerships

ECAP staff will engage in a process of collaborative partnership building with parents to establish mutual trust and to identify family goals, strengths and supports. Staff will be sensitive to individual family strengths and abilities as well as family needs. Contact will be ongoing throughout the year with teachers providing regular support and reinforcement of goals and strategies.

The partnership process will involve family goal setting, coordination with pre-existing plans, and support and encouragement for parental involvement and participation in program activities. Linkage to appropriate resources as well as crisis intervention services will be offered relevant to expressed needs. Parents will have ongoing opportunities to be involved in a wide range of activities designed to support families through provision of health, nutrition, child development, and mental health educational services.

### 1304.40 Family Partnerships



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Procedure for Family Goal Setting and Family Partnership Agreement:

The overall goal of the Family Partnership Agreement process is to teach parents about problem solving, planning and goal setting.

1. The process begins with the relationship established with the family from initial contact. During the application and enrollment process, Family Service Workers and parents will begin to know each other and information will be collected about the family. The FSW should review this information immediately prior to meeting with the family to complete the Family Partnership Agreement.
2. The FSW and teachers will discuss the planning process with the family. The FSW will help the family identify their strengths as individuals and as a family, and may note resources currently being used on Part I. Future goal-setting will be based on the family strengths and existing family supports that are identified early in this process.
3. The next step is to assist the family in determining what they want to work on at this time. This can be done through a discussion of family needs, desires or dreams. Families may wish to work with existing family plans, with ECAP providing additional support and resources to achieve desired goals or outcomes.
4. Develop reasonable and practical goals and objectives with the family. Identify resources that can be used to accomplish goals and objectives using the Community Resource Directory and family or teacher knowledge of the community. Discuss



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

possible barriers or anticipated problems in accomplishing the desired outcome, assign responsibility for accomplishing each step (parent, teacher, etc.), and determine an estimated date or timeframe for completing each step. Note referrals and information requested from ECAP on the Family Partnership Agreement form and ETO.

5. Document plans and progress on ETO. FSW will check back regularly by phone or in person to check on progress, provide additional assistance, or make adjustments to the overall plan. Make sure that celebration of success is built into the plan and acknowledged by FSW and parents.

The role of the ECAP FSW in this process will be to:

- Help the family assess their own strengths and needs;
- Work with the family to develop family goals and objectives using the Family Partnership Agreement form;
- Provide information about available family resources and link the child, parent and family to services appropriate to meet expressed needs;
- Monitor and evaluate the delivery of support and services to the family or individual family members to ensure that services are received and appropriate;
- Advocate on behalf of the child and family; and
- Teach the parents how to advocate for themselves and their family members and effectively communicate their needs, ideas and concerns to service providers.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### 1 1304.40 Family Partnership

### 3 Resource and Referral

Parents will be actively involved in the identification and use of family and community resources to meet the basic life support needs of their family. Each family will be given access to the Community Resource Directory and will be shown how to access listed resources by the program's FSW.

On home visits, or as requested, the FSW will suggest additional resources or make referrals based on needs identified as part of the Family Partnership Agreement process, or as other issues arise. Additional information about community or program resources may be sent home in newsletters or flyers, or may be posted on the Parent Information Board in the classroom or center.

All referrals will be documented in Child and Family Files. The FSW will follow up with the family on all referrals to determine if the services received met the family's expectations and circumstances. ECAP Teachers or Managers may further advocate for





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

families with community agencies to make sure that ECAP families receive needed services.

### Procedure for Referrals Outside of the Family Partnership Agreement Process:

All staff concerns will be discussed with the parent and the parent will sign the Informed Consent for Referral prior to making the referral to allow ECAP to share relevant information with the specialist or service provider.

Parents will be expected to make appointments and accompany their child to the scheduled appointment. Staff may provide support and help the family develop a plan to ensure completion of services. Staff will maintain ongoing communication with the family, and the provider if appropriate, in order to ascertain whether or not services have been received to the satisfaction of the family, and if further services are required.

All referrals will be documented when they are made; successive conversations with the family or the service provider as to the status of the referral will be noted on the Referral Tracking Form, Family Partnership Agreement Form and ETO.

- Developmental/Educational Concerns: Children who fail two Developmental Screenings, including vision and hearing, will be referred to a specialist for further assessment and/or treatment. Children who are suspected of needing Early Childhood Special Education Services will be referred to Red Clay Consolidated School District Special Services for evaluation with parental approval.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Mental Health Concerns: Children with suspected emotional or behavioral problems will be observed in the classroom by the mental health consultant with parental approval using the Informed Consent for Referral. Following the observation, the Mental Health Consultant may meet with the child's parent and

1304.40 Family Partnerships

ECAP staff and may make recommendations which could include: changes in classroom routine, further testing, counseling referrals and/or developing a Behavior Plan.

- Health Concerns: The child's primary health care provider will refer children with detected health problems or concerns to appropriate professionals for evaluation and/or treatment. Families may request help with finding insurance coverage or other source of payment.
- Dental Concerns: Children with extensive dental caries will be referred to appropriate dental practitioners by the examining dentist, the child's primary health care provider, or ECAP personnel.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Nutritional Concerns: Children may be referred to a registered dietician through the child's primary health care provider. These concerns may result from evaluation of the Child Nutrition Assessment or staff or parent observation.
- Social Service Concerns: Families requiring social services will be referred to the appropriate agency by ECAP personnel. Social Service referrals may originate with a direct request for services by the family, or by staff observation and the family intake and assessment process.

### 4 Advocacy

Advocacy is a part of the Latin American Community Center's mission. ECAP staff will advocate for ECAP children and families. Staff may intervene with community agencies when appropriate to assist families who express inability to use services successfully without assistance. Staff members will attend local community meetings to advocate for needs of the families in the program and low-income families in general, and will promote the access of children and families to community services that are responsive to their needs.

### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

ECAP staff will ensure to provide opportunities for families to advocate for themselves and their children by informing them of community events and activities and by teaching them their rights.

The Parent Information Board will be updated regularly with pertinent information for parents and parents will be encouraged to work side by side with other families on different community projects.

All staff interactions with families will be supportive and will provide parents with the skills and confidence to advocate for themselves and their families within the program and the community. Parents will be supported in their efforts to advocate for their children in areas such as but not limited to: disability services, mental health services, kindergarten transition, etc. Any opportunities offered within the LACC or the community, will be made available to parents.

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5 Parents and Transitions



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

In order for children to be successful after they leave a Head Start program, parents need to remain involved in their children's lives. ECAP staff will assist the parents in becoming advocates for their children once they enter elementary school and will assist them with becoming knowledgeable with the school system and what they can expect.

### Procedure

The ECAP FSW will find each child's feeder school and inform the parents. Once registration begins, the FSW will work with parents to assist them with kindergarten registrations and Choice applications if needed.

Every year, ECAP will host a "Kindergarten Information" session and invite representatives from local school districts as well as private and charter school. Staff will use this opportunity to assist parents by providing information they may need to know regarding kindergarten. ECAP staff will also work with local organizations, such as the Parent Information Center, to provide families with trainings and information regarding what to expect once their children enter the school system and how they can communicate with schools and be advocates for their children.

### 6 Emergency and Crisis Intervention

ECAP staff will be able to identify signs of family crisis, and make appropriate referrals for families in need of emergency assistance.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The act of intervening in the crisis experience of a family requires a relationship of mutual trust and respect. Each family is ultimately responsible for itself. Staff will be supportive and endeavor to facilitate the family's own problem-solving ability.

In crisis, the families own ability to care for themselves may be weakened. Staff should be prepared to take direct action, while at the same time helping to build on family strengths and re-establishing the family's ability to be self-sufficient.

Following enrollment, center staff will schedule a meeting with appropriate supervisory and support personnel to identify high risk parents or families enrolled in the program and to review plan of action developed with the family for emergency/crisis situations in the center or in the family's home.

All emergency and crisis situations will be carefully documented. Appropriate program staff will examine the handling of each situation and evaluate the effectiveness of the intervention.

Procedures Should Assistance or Intervention be Required:

1. Facilitate the family's own problem-solving ability.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

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2. Be prepared to take action for the protection and welfare of the family or individuals within the family by:

- Helping the family to identify their needs and define their situation.
- Assisting the family in locating and accessing appropriate resources.
- Maintaining a focus on the welfare of the children and parent(s).
- Making appropriate referrals when the health, welfare or safety of any family member is questioned.
- Keeping accurate and confidential records.

### 6 Home Visits

While Home Visits are encouraged, they are not required and ECAP staff cannot force parents to make them. All efforts will be made to make parents understand the benefits of home visits.

#### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Upon enrollment, the Family Service Worker will explain the program to the family and with this explain the home visits that take place. The FSW will work closely with parents on the first week of school to set up appointments during times that are convenient for parents and will be accompanied on the home visit by the child's teacher or ECAP Coordinator if the appointment is made during a time that the teacher is in the classroom.

If the parent appears hesitant about having the home visit conducted, the FSW will restate the purpose of the home visit but will also give other options, such as holding the visit at another location where the parent may feel more comfortable or holding in the ECAP building.

Home visits will be conducted at least twice a year (the first to be held in September or October, the second in April and May) with other home visits occurring on an as needed basis throughout the year. At the initial home visit, the teacher will explain the plans for the year and what the parent can expect the child to learn. The teacher will end by asking the parent what it is that he/she would like for their child to accomplish throughout the year and what their educational goals are for the child.

The FSW will go over the services that will be provided to the parent and services provided within the community. The FSW will get to know the parent and establish individual or family goals that can be achieved or worked on throughout the year. The FSW will complete the Family Partnership Agreement with the parent and will develop a plan of action for the school year. Together, the parent and FSW will work on





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

accomplishing the goals within the time frame created. The FSW will be responsible for providing the information and resources needed for the goals to be achieved. If a parent does not seem interested in working towards the goals, and all efforts have been exhausted, the goals can be considered abandoned.

### 1 1304.40 Family Partnerships

The final home visit of the year will be used as a follow up to meetings with parents by the FSW and a follow up to the two parent-teacher conferences that took place throughout the year. The teacher will review child assessments with the parent and give a brief description of the child's involvement in the classroom that year. The FSW will update the family on the goals that were established and whether they were achieved, close to be achieved or abandoned. The FSW will then work with the family to develop a continuation plan for those goals that have not been achieved yet but progress was made.

All parent goals will be input and tracked in ETO. They are measured using the following measuring tools: identified as a goal, making some progress, making significant

progress, achieved and abandoned. Goals will be classified as Education Goal, Personal Goal, Income Goal, Housing Goal, or Employment Goal.



# The Latin American Community Center

## Early Childhood Assistance Program (ECAP)

### 1 1304.41 Community Partnerships

#### Community Involvement Table of Contents

- 1 Volunteer Opportunities
- 2 Community Outreach
- 3 Transition Services



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1 1304.41 Community Partnership

1 Volunteer Opportunities

Volunteers provide the extra attention that helps children thrive as learners and grow to be strong healthy individuals. Volunteers provide the energy to make things run

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## The Latin American Community Center Early Childhood Assistance Program (ECAP)

smoothly throughout the program. Volunteers can make a huge contribution to the success of ECAP in both human terms and financial terms.

LACC ECAP will encourage family and community members to participate in program planning and decision making activities as well as in activities for ECAP children and families.

ALL volunteers MUST complete an agency volunteer application and must abide by the State of Delaware's Office of Child Care Licensing rules and regulations for volunteers.

Volunteers will not be left alone with children at any time, both for the protection of the volunteer, and of the program. Anyone who volunteers more than 25 hours per week will be considered a "regular volunteer" and will be required to show documentation of an Delaware Criminal History Registry and documentation of a clear TB screen. The exception to this requirement is employees of the School Districts who serve children and are covered by their agency's criminal history checks.

Due to grantee liability issues, children volunteering in ECAP must be at least 16 years of age, unless their volunteer efforts are part of an organized school program and the sponsoring school provides liability coverage.

Classroom and Management Staff will track volunteer hours.



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### Classroom Volunteers:

- Parents, family members and community members will be encouraged to participate in the classroom as volunteers, taking an active part in the daily schedule of activities with children.
- Professional community members will be asked to visit classrooms to talk to children about their job, or to participate in other program activities. This may include, police, fire department, medical and dental personnel, carpenters, mechanics, cowboys- anyone with something to share.

### Program Volunteers:

- Parents, family members and community members will be encouraged to participate in program efforts to maintain facilities and playgrounds. This may include painting, carpentry, repair work, landscaping and general cleanup.
- Volunteer opportunities will be offered to individuals interested in helping in the office, preparing educational materials for the classroom, editing and publishing newsletters, and other activities that would benefit the program.

### 1304.41 Community Partnership

### Advisory Groups and Committees:

- Parents, family members and community members will be encouraged to participate on ECAP committees and advisory groups.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- o The Northern Delaware Health Advisory Committee consists of parent representatives elected by their respective Parent Center Committees, program staff and professional members of the health and social service community. This committee will meet two times each year, in the fall and in the spring, and will address program issues in the areas of medical, dental, mental health, nutrition and human services.
- Parents, families and community members will be enlisted to participate on program committees involved in program self-assessment, and planning.

### Governing Bodies:

- Parents and community members will be elected or selected to serve on the Policy Council, the volunteer body charged with oversight of the program as outlined in 45 CFR 1304 Appendix {1998}. At least 51% of the members will be parents of currently enrolled children. Policy Council will meet on a regular schedule and decide on program budgets, staffing, planning, program self- assessment and program policies.

## 2 Community Outreach

ECAP will be actively involved in community partnerships, both to advocate for low-income families and to help create a community environment that shares responsibility for the healthy development of all its families and children.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Procedure:

ECAP staff members will serve on community boards and committees with the goal of collaborative community planning and sharing of information and resources promote improved service delivery and support networks that promote family self-sufficiency. Representation from agencies and professions that impact ECAP families will be asked to serve on advisory committees.

ECAP parents will be encouraged to participate on local community committees and boards whenever possible to benefit parents, the community and the program.

Community agencies and groups will be notified about upcoming training opportunities sponsored by ECAP and will be invited to attend.

Memorandums of Understanding will be established with local organizations, including other ECAPs and Head Starts in the area.

1 1304.41 Community Partnerships

3 Transition Services





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

ECAP will do everything possible to ensure a smooth transition for children and families into and out of the program.

### Procedure

When a child enters ECAP, the Outcome Specialist will contact the previous child care center or Head Start to acquire the necessary information (IFSP or IEP's, medical information, concerns, etc). This information will then be reviewed by PC, OS, and teacher to ensure that the incoming child is receiving the appropriate services. IEPs will be implemented as soon as the child begins the program.



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# The Latin American Community Center Early Childhood Assistance Program (ECAP)

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1 1304.50 Program Governance

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1. Shared Governance

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2. Board
3. Policy Council
4. Internal Dispute Resolution
5. Community Grievance
6. Parent Center Committee
7. Reimbursement



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## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Policy Council Approval: Board Approval:

11304.50 Program Governance

### 1 Shared Governance

Latin American Community Center's Early Childhood Assistance Program (LACC ECAP) will maintain a formal structure of shared governance through which parents can participate with program staff, community members and the LACC Board in policy making or in other program decisions. LACC, as the Grantee Agency, will have ultimate legal responsibility and authority for managing ECAP grants and for ensuring the provision of Head Start services within the LACC ECAP service area. Responsibility and



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

authority for program direction and policy development will be shared between a volunteer Board and the Policy Council.

### Procedure

Parents of enrolled children will be offered the opportunity to participate in the ECAP governance and decision-making process through participation in Policy Council at the grantee level, and through participation in Parent Committees/Policy Council at the center level.

Program staff will support shared decision-making by providing policy groups with regular and accurate information regarding program planning, policy development and program operations. Open channels of communication will be maintained through regular reports from the program, exchange of minutes between groups and opportunities for joint meetings and shared discussions on specific topics as requested.

The Board and the Policy Council will share decision-making responsibility for the LACC ECAP program as outlined in Appendix A [45CFR 1304.50] of the Head Start Performance Standards. The process of shared governance and decision-making will be implemented through joint 1) identification and clarification of specific issues; 2) collection of facts and consideration of program and individual values surrounding the issue; 3) development of alternative solutions; 4) identification of consequences of each alternative; 5) selecting an alternative (making a decision); and 6) evaluating the outcome of that decision.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The Board and the Policy Council will be committed to making a good faith effort to resolve any differences in an amicable manner in order to avoid impasse. Should the Board and the Policy Council fail to reach agreement on a course of action, and arbitration becomes necessary, both parties will resort to procedures outlined in the LACC ECAP Internal Dispute Resolution Policy.

### 2 Board

LACC, as the Grantee Agency, has delegated certain responsibilities to a Board under the Executive Director. The Board will consist of volunteer members drawn from the community, with at least one member of the Board to serve as liaison between the two groups. The Board will assume general responsibility for fiscal, legal and logistical operations, And will approve or disapprove program activities as detailed in Appendix A [45CFR 1304.50] of the Head Start Performance Standards.

### 1304.50 Program Governance

#### Procedure: Major Duties of the Board





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The general responsibility of the Board will be to establish the direction of the program in accordance with the needs of the targeted population as identified in the Community Assessment, to regularly monitor fiscal operations, and to regularly examine program services to ensure that the mission and objectives of the program are realized. Operating responsibility will be delegated to the ECAP Coordinator.

The LACC will implement a system for the annual performance review of the ECAP staff. This may be done by the Board as a whole, or delegated to a representative member of the Board.

Oversight and approval responsibilities of the Board include:

- Procedures for program planning, including program philosophy and long and short-term program goals and objectives;
- Selection of service areas and criteria for defining recruitment, selection, and enrollment priorities;
- Funding applications and amendments to funding applications;
- Annual self-assessment of the Head Start program;
- Procedures for shared decision-making with policy groups, including composition of policy groups, procedures by which members are selected, and policies that define management functions and the roles and responsibilities of the governing body;
- Internal dispute resolution procedures, including impasse procedures and the resolution of complaints about the program;
- Assure that internal controls are in place to safeguard federal funds;



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Program Personnel Policies including Standards of Conduct; and
- Decisions to hire or terminate the ECAP Director and/or any person who works primarily for the ECAP program.

### 3 Policy Council

The Policy Council will be established at the grantee level and will assume general responsibility for interpreting the needs of the community. At least 51% of Policy Council members must be parents of currently enrolled children. Membership on Policy Council will be limited to a total of three one-year terms. In order to avoid conflict of interest, no staff member of LACC ECAP, or members of their immediate family, may serve on Policy Council in a voting capacity. Parents who occasionally serve as substitutes may continue to serve on Policy Council. [45CFR 1304.50(b)(6)]

#### Procedure

Parent members of the Policy Council will be elected annually and will continue to serve on the

Council until the next Council has been elected and seated the following year. Parent



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### ! 1304.50 Program Governance

representation on the Policy Council will be determined in accordance with Policy Council By- Laws; Article V; Membership.

Volunteer members from the local business, civic and professional community, or individuals who are familiar with resources and services for low-income children and families, including parents of formerly enrolled ECAP children, will be selected annually to serve on the Policy Council. Policy Council members, Board members, or Program Staff may recommend individuals to serve as Community Representatives. Community representation on the Policy Council will be determined in accordance with Policy Council By-Laws; Article V; Membership.

Policy Council will work in partnership with key management staff and the Board to develop, review and approve or disapprove policies and procedures. Policy Council will serve in a leadership capacity with direct links to the Parent Committees, the Board and the communities they serve. Policy Council, in collaboration with the Board, will have direct responsibility for establishing and maintaining procedures for working with the Board to resolve community complaints about the program.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Policy Council Bylaws will cover purpose, responsibilities, meeting format, membership and duties of officers. Bylaws will be reviewed annually and updated as necessary to ensure accuracy. Specific responsibilities of the Policy Council are detailed in Appendix A [45CFR 1304.50] of the Head Start Performance Standards.

### 4 Internal Dispute Resolution

Please refer to the Latin American Community Center's Personnel Policy Manual for more information on this matter.

### 5 Community Grievance

Please refer to the Latin American Community Center's Personnel Policy Manual for more information on this matter.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### 6 Parent Committee

A Parent Committee will be established to provide all parents of children enrolled in ECAP with a broad range of opportunities to participate in the shared decision-making process. Only parents of children currently enrolled in an ECAP classroom will have voting privileges in that Committee.

### 1304.50 Program Governance

#### Procedure

Parent Committees will contribute to the development of the program's curriculum and approach to child development and education, and will advise staff in developing and implementing local program policies, activities and services. The staff advisor will relay recommendations for classroom curriculum and activities to the teaching team.

Recommendations for program-wide policy and procedure will be relayed to the Policy Council through the center representative to Policy Council. Minutes from Policy Council and Board Meetings will be available in all centers and will be shared between the



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Board and Policy Council. The Policy Council Representative to the Board will relay center recommendations

and input to the Board.

Parents, through involvement in the Parent Center Committee, will have the opportunity to participate in the identification and location of local resources, in the recruitment of children and families into the program, and in the recruitment and screening of program staff. The Parent Committee format will also provide parents with the opportunity to meet with other parents and community members who share a common interest, and to develop program activities such as educational experiences and social events specifically designed to meet the needs of local children and families.

### 7 Reimbursement

In order to enable low-income parents to participate fully in their group responsibilities, reimbursement will be provided, if necessary, for reasonable expenses incurred by members of policy and parent groups in the performance of their official Head Start duties.

### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Childcare reimbursement will be provided for the following activities: Policy Council Meetings; Policy Council or Program Committee Meetings; State Head Start Meetings; and other activities as approved by Policy Council. Rates for childcare reimbursement will be reevaluated annually by the Policy Council and adjusted as necessary.

Transportation to Policy Council meetings will be reimbursed at the rate set by the LACC. Reimbursement may be provided for the following activities: Policy Council Meetings; Policy Council or Program Planning Committee Meetings; Self-Assessment Activities; and Delaware Head Start Association Meetings. Only one car per center will be reimbursed for each meeting, or one car for each 4 people. Any exception to this limitation must have prior Policy Council approval.

It is the responsibility of the driver to carry documentation of valid liability insurance as required by Delaware law and to ensure that seat belts are available and used by all passengers.

! 1304.50 Program Governance

The LACC ECAP program will cover the costs of parents who attend the Delaware Head Start Association Meetings. Registration fees and lodging will be paid by purchase order prior to the meetings. Parents will be advanced money to cover the costs of food at the rate set by the LACC.

*Policy Council Approval: 6/20/2016*  
*Governing Board Approval: 6/22/2016*



# The Latin American Community Center Early Childhood Assistance Program (ECAP)

## 1 1308 Disabilities Services

### Disabilities Services Table of Contents

- 1 Referral for Evaluation
- 2 ECAP as the Least Restrictive Environment
- 3 Initial Individual Education Plan (IEP) Meeting
- 4 Implementation and Documentation of IEP Services

## 1 1308 Disabilities Services

All policies and procedures are based on The Delaware Code for students, IDEA and the AMSES manual and Head Start Performance Standards.





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

**PHILOSOPHY:** The Latin American Community Center supports the needs of all children through inclusive education. Students are supported in a classroom environment that embraces all learners. Services for students with diagnosed disabilities are provided by Red Clay Consolidated School District specialists which include special education teachers, speech and language therapists, occupational therapists and physical therapists. Services are coordinated with the Program Coordinator and Family Services Coordinator. The procedures for evaluation and services are outlined and are the responsibility of the educational diagnostician, school psychologist and special education teacher. All ECAP students receive a Child Find screening within the first 45 days of school. Students that score below average are recalled and may require further evaluation. This is a decision that is determined in collaboration with the parent/guardian. Refer to District procedures.

### Referral for Evaluation

Children who show a delay in any of the areas of vision, hearing, cognitive development, motor development, language, speech and articulation, behavior, self-help, and social development will be referred to a specialist for further evaluation, assessment and/or treatment. Assessments will be completed within 45 school days of parental consent. Staff may provide support and follow up to ensure completion of the referral.

### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

1. Teacher will complete a Request for Consultation or Parent will contact ECAP
2. Parent is notified of referral and Permission to Evaluate is given to parent along with Family Information Form and Procedural Safeguards
3. Parent signs and returns forms
4. If the Permission to Evaluate is not returned, the Program Coordinator will schedule a meeting with parent to discuss the need for evaluation
5. Upon receipt of the signed Permission to Evaluate, the Educational Diagnostician will determine the date the eligibility meeting must be held (45 school days or 90 calendar days, whichever comes first)
6. The Educational Diagnostician completes a Referral for Special Services for evaluations needed in addition to achievement testing. Referrals are forwarded to the appropriate specialist
7. After testing is completed, an eligibility meeting is held within time lines stated in #4

The Family Services Coordinator will document referrals when they are made, and note any additional conversations with the family or the service provider as to the status of the referral.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### ECAP as the Least Restrictive Environment

At least ten percent (10%) of program enrollment slots will be filled by children with disabilities as defined in 1305.2(a) and 1308.3(b). ECAP will work closely with the families of children with a disability who wish to enroll in ECAP to ensure that the child will benefit from the services ECAP can offer. Consideration will include, but not be limited to, the available adult to child ratio; the size of the classroom group; the amount of stimulation that the child can tolerate; and the overall safety of the child in the classroom environment.

ECAP is a place of safety for all children and adults, therefore every effort will be made to ensure that all eligible individuals will have access to the full range of program services and activities. ECAP will make every reasonable effort to assure full accessibility of facilities, including appropriate special furniture, equipment and materials if needed.

If there is some question as to the appropriateness of the placement of a specific child in the ECAP classroom, ECAP staff will confer with the child's parent(s). A visit or trial placement may be scheduled to see if the child can benefit from, and be successful in the ECAP placement. To ensure that ECAP continues to be an educational environment



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

where a child with disabilities can interact with typically-developing peers, ECAP may choose to limit the number of children with disabilities assigned to any particular classroom.

The child may be referred for further evaluation based on their Child Find Screening, teacher or parent referral. The process is as follows:

- 1) Child is referred for evaluation
- 2) Program Coordinator will discuss referral
- 3) The child will be observed in the classroom setting
- 4) Program Coordinator will contact parents to discuss referral
- 5) Permission to evaluate will be given to parent
- 6) When permission has been received, educational diagnostician and school psychologist will schedule evaluation(s)
- 7) When evaluation(s) are completed, parent will be contacted to schedule a time to discuss results and recommended plan

### Initial Individualized Education Plan (IEP) Meeting

An Individualized Education Plan will be developed for each child that is found to be in need of special education services. The meeting to develop the IEP will be held within 45 calendar days of determination of eligibility.



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### 1 1308 Disabilities Services

If the child does not qualify for services, staff will contact the parent(s) and to notify the family know that the child did not qualify for services, and to share the testing results.

#### Procedure

District staff will evaluate each child referred for services within 45 school days from the signed Permission to Evaluate. A Multi-Disciplinary Team will determine the eligibility of children referred for Special Education. Refer to AMSES.

The IEP will be completed within 45 days following determination of eligibility. Ten days prior written notice of a scheduled IEP and placement meeting will be provided. At a minimum, the child's parent or guardian, classroom teacher, appropriate specialists, and a member of the evaluation team will participate in the development of the IEP.

The attending school's case manager or education specialist will facilitate the IEP meeting and complete the designated sections of the IEP document that address



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

strategies for achieving long-term goals. The IEP document will identify the frequency, intensity, location and methods of service delivery. The team will discuss how the team will work together, how information will be shared, and who will be included in meetings. Transition planning will be discussed and scheduled at the initial IEP meeting.

ECAP staff will make every effort to assure that parents understand the purpose of the process, explain the proceedings and encourage them to ask questions and provide information about their child and their desires for their child's program. The parent or guardian will also be encouraged to identify family strengths, interests, and desired outcomes as part of the IEP.

A copy of the completed IEP will be given to the parent or guardian and to the ECAP program for the child's file.

### Implementation of Individualized Education Plan (IEP) Services

Services will begin immediately after the beginning date listed on the IEP. For children coming into ECAP on an existing IEP, services will begin immediately upon receipt of IEP records by the referring program/organization.

### Procedure



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Required documentation for student files includes:

1. Referral form
2. Statement of Eligibility;
3. Evaluation Report
4. Notice of Placement Meeting to Parent and ECAP Program;
5. Individual Education Plan

1 1308 Disabilities Services

6. Consultation Notes
7. Specialist updates and reports as appropriate

! child Abuse and Neglect Reporting



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Child Abuse and Neglect Table of Contents

1. Identification of Child Abuse and Neglect
2. Response to a Child's Injury
3. Reporting
4. Child Abuse and Neglect Training
5. On-Site Interview
6. Removal of Child from the Head Start Site
7. Protected Child





The Latin American Community Center  
Early Childhood Assistance Program (ECAP)



# The Latin American Community Center Early Childhood Assistance Program (ECAP)

Policy Council Approval:

j child Abuse and Neglect Reporting

1 Identification of Child Abuse and/or Neglect

All ECAP employees who are working directly with children will be aware of the following indicators, remembering that these are indicators of possible abuse and/or neglect.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Indicators of Physical Abuse

#### PHYSICAL INDICATORS:

- Unexplained or repeated injuries (welts, bruises, burns).
- Injuries that seem to take the shape of an object (bruises looking like the shape of a belt buckle, electric cord, wooden spoon, cigarette burns).
- Injuries that don't make sense for the child's age (such as bruises on the legs or bottom of a child too young to walk or climb).
- Unlikely or different explanations of an injury given by parents and child.

#### INDICATORS OF NEGLECT:

- Child is dirty.
- Child is inappropriately dressed for the weather.
- Child is hungry or poorly fed.
- Child has health problems and is not getting medical or dental care.
- Child is consistently unsupervised.

#### BEHAVIORAL INDICATORS:

- Behavior problems such as verbal or physical aggression (hitting, bullying), social withdrawal (shy, quiet), non-compliance, impulsiveness, stubbornness.
- Child appears depressed, sad, lonely, cries easily.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Delinquent behavior, cruelty to others or to animals, destructive to own or another's property; child is teased or teases others, steals.
- Child seems confused or nervous, clings or is overly dependant on adults.
- Child seems afraid of physical contact from parents or other adults, is afraid to go home at the end of the day.

### Indicators of Sexual Abuse and/or Sexual Exploitation

#### AT SCHOOL:

- Insists on going to school, even if ill.
- Shows sudden change in behavior.
- Shows difficulty concentrating.

#### IN PEER RELATIONS:

- Initiates "sexual games" with peers.
- Shows an unusual interest in private parts.
- Is easily led or influenced by peers.
- Shows unusual anger or aggressiveness with peers.

### Child Abuse and Neglect Reporting



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IN ADULT RELATIONSHIPS:

- Avoids or shows an unusual fear of adults.
- Touches adults inappropriately.
- Clings excessively to adults (physically).
- Makes inappropriate sexual comments.

PERSONAL HYGIENE:

- Exhibits excessive modesty related to toileting functions.
- Is overly demonstrative about toileting functions.
- Tries to "spy" on others during toileting functions.

BEHAVIORAL/EMOTIONAL INDICATORS:

- Appears unusually nervous or anxious.
- Shows sudden regression in behavior (e.g. thumb sucking, enuresis).
- Shows unusual changes in appetite.
- Demonstrates sexual motions.
- Masturbates excessively for age level.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Verbalizes sexual content inappropriate for age.

### MEDICAL/PHYSICAL INDICATORS:

- Complains of pain during urination.
- Swelling or discharge from genitals.
- Shows bruises or scratches unexplained by normal behavior.
- Have bloodstains on underwear.
- Has pain in anal, gastrointestinal, genital or urinary areas.
- Reacts inappropriately to medical exams.

### OTHER INDICATORS:

- Dresses inappropriately, seductively (make-up, jewelry)
- Displays extreme fear of certain place or person.
- Is overly interested in genital areas of dolls during play.

### Indicators of Mental Injury or Emotional Abuse

### PHYSICAL INDICATORS:

- Speech disorders or developmental delays.
- History of failure-to-thrive, or lag in physical development.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### BEHAVIORAL INDICATORS:

- Behavioral extremes or mood swings (compliant and passive or aggressive and demanding).
- Poor peer relationships, lack of trust, social withdrawal.
- Antisocial, destructive, aggressive behavior.
- Child has nightmares, difficulty sleeping.
- Obsessive, compulsive traits, overeating, excessive physical complaints or

### j child Abuse and Neglect Reporting

illness.

- Child lacks vocabulary to express feelings, may be unaware of feelings.
- Depression, suicidal ideation, runaway.

### Family Signs of Abuse

Families with the following kinds of problems or characteristics are at greater risk of child abuse, especially if there is change or crisis within the family, such as pregnancy



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and the birth of another child, separation and divorce, or the death of a family member. Child abuse can also occur in families without these characteristics.

- Families who are isolated; have no friends, relatives, church or other support systems.
- Parents who tell you that they were abused as children.
- Families who are often in crisis (moving a lot, money problems).
- Parents who seem very critical of their child for his/her age.
- Parents who are very rigid in how they discipline their child.
- Parents who have trouble with drugs or alcohol.
- Parents showing either too much or too little concern for their child.
- Parents who have a child they see as difficult (such as mentally or developmentally delayed, handicapped, or a premature infant) may be under a lot of stress, which can lead to abusive behavior.
- Families that have a lot of "secrets" that can't be talked about.

### 2 Response to a Child's Injury

Staff response to a child who reports victimization is very important. Give the child reassurance that she/he is okay and safe. Respect the privacy of the child. The child will need to tell his/her story in detail later to the investigators so do not press the child for details. Avoid display of horror, shock, or disapproval of the parent(s), the child or





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the situation. Avoid placing blame or making judgments about the parent(s) or the child. Tell the child that he/she will be talking to people who will help.

Any investigation will be done by/or through the Delaware Department of Child, Youth and Family Services (DCYFS), therefore, ECAP employees will not do any investigation, and will be careful not to do anything to contaminate or interfere with any investigation that will be conducted by DCFS staff. If the child requests your presence during the interview, and it is acceptable to the interviewers, it may be helpful.

### Physical Abuse

In the presence of an observable injury, an ECAP staff person will first question the child as to what happened. If the injury appears to be at variance with the explanation given

for the injury, or if for any other reason abuse is suspected, then the reporting procedures described below will be followed.

### j child Abuse and Neglect Reporting

#### Neglect

In the case of possible neglect (i.e., poor hygiene, inappropriate clothing, consistent hunger, lack of supervision, emotional problems, constant fatigue, etc.) an ECAP staff person will first question the child. Follow-up will include talking to the parents, home



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

visits if necessary, providing emergency assistance, and careful documentation. If the situation does not improve or if the neglect is serious enough to cause actual harm or substantial risk to the child's health, welfare or safety, then the reporting procedures described below will be followed.

### Mental Injury or Emotional Abuse

If it is suspected that a child's emotional problems are the result of parental behavior (i.e., scapegoating, ridicule, degradation, threats to health and safety, confinement, etc.) an ECAP staff person will first question the child. Follow-up may include talking to the parents, a classroom observation by a mental health consultant, referral to mental health agencies, staffing with teachers, parents and other professionals, etc. If the situation does not improve or if the mental injury is serious enough to constitute a handicap to the child's ability to function (to think, to learn, to feel) then the reporting procedures

described below will be followed.

### Sexual Abuse or Exploitation

If a child should demonstrate any of the sexual abuse indicators listed in this document, or if for any other reason sexual abuse is suspected, the reporting procedures described below will be followed.

## 3 Reporting



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

As mandated reporters, any employee of LACC ECAP, having reasonable cause to believe that any child with whom that employee comes in contact in an official capacity has suffered abuse, shall report or cause a report to be made to the Child Abuse Hotline 1-800-292-9582.

Reporting should be considered an expression of concern or a request for an investigation into a suspected incident of abuse or neglect. A report is a request for investigation into the condition of a child; it is the beginning of a helping process for children and families. It is not up to ECAP employees to decide whether or not abuse has actually occurred.

### Procedure

It is the legal responsibility of any employee of LACC ECAP who suspects abuse and/or neglect to adhere to the following procedures:

1. An oral report will be made immediately by telephone to the Child Abuse Hotline.

It is preferable that the person who has witnessed the suspected abuse or neglect (or indicators thereof) makes the report.

2. Any report made to DCYFS must be recorded in the child's file and in ETO. A copy of this report will then be reviewed by the Program Coordinator.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### ! child Abuse and Neglect Reporting

3. ECAP staff will not contact the family involved, as this may interfere with the DCYFS investigation.
4. If follow-up is necessary, meetings will be scheduled with the appropriate people.
5. The staff person who initiated the report will keep the Program Manager informed as to the status of the case. Follow-up documentation regarding the disposition of the case will be sent to the PC and will be included as part of the record.

### 4 Child Abuse and Neglect Training

LACC ECAP will provide orientation and training on Child Abuse and Neglect for staff, parents and children.

### Staff Training



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Training will be provided for all staff on the identification and reporting of child abuse and neglect. Training will be provided in September utilizing personnel and training materials from DCYFS. Additional workshops and classes will be accessed as available.

### Parent Orientation and Training

During the enrollment process, the parent(s) or guardian(s) of enrolled children will receive verbal and written information on the program mandate to report suspected cases of abuse and neglect. This information is included in the Parent Handbook

At this time, an orientation will be provided for parents and family members of enrolled children on the need to prevent abuse and neglect, and the need to provide protection for abused and neglected children. Families will be informed that ECAP strives to keep families together, to identify family strengths and to build on those strengths to assist families in crisis. Staff will assist the family in its own efforts to improve the condition and quality of family life through the Family Partnership process, and individual problem solving.

### 5 On-Site Interview of Alleged Victims of Child Abuse



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ECAP staff must recognize that in sensitive interviews, depending on the age of the child and nature of the child/abuse neglect referral (such as child sexual abuse), the involvement of a staff member may interfere with the investigation and the staff member may not be asked to participate in the interview.

A DCYFS caseworker and/or law enforcement officer will conduct the interview.

It is the responsibility of the DCYFS caseworker and/or law enforcement officer to inform the child's parents/guardian in a timely manner that a site interview has occurred, and inform the parent of the final disposition of the investigation. A "timely manner" shall in

! child Abuse and Neglect Reporting

most cases, be considered immediately after the child's interview, and/or by the end of that same day, whenever possible. All other questions and inquiries will be referred to the assigned DCYFS caseworker.

Procedure



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The following guidelines will be observed when an alleged victim of child abuse or neglect is to be interviewed by a DCYFS caseworker and/or law enforcement officer at the ECAP site.

1. The DCYFS caseworker or law enforcement officer must contact the appropriate ECAP staff person, present proper identification, and make known the name of the child to be interviewed.
2. ECAP will provide a non-threatening setting for the interview.
3. An ECAP staff person may be invited to attend the interview as a neutral observer, or to provide emotional support for the child.

### 6 Removal of Child from the Head Start Site

Any alleged victim of child abuse and neglect may be removed from the ECAP site and placed in protective custody by a Child Protective caseworker and/or a law enforcement officer for the child's protection.

ECAP will make no attempt to notify the parents. If the child's parents contact ECAP prior to being located by the investigative team, LACC ECAP will refer them to DCYFS and will provide no further information.

### Procedure



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If the investigative team finds reasonable cause to believe that abuse has occurred, the team shall take necessary action to prevent further abuse of the child and to safeguard the child's welfare.

If a child is placed in protective custody by DCYFS, an investigative team member and law enforcement officer shall notify the parent or guardian that the child is in protective custody. Parental notification that the child was placed in protective custody will be made as soon as possible.

The DCYFS caseworker may share appropriate information and facts concerning the alleged abuse with the ECAP employee who made the report. The ECAP employee and/or program agree to maintain all such information as confidential.

The DCYFS caseworker shall present appropriate identification to ECAP staff.

j child Abuse and Neglect Reporting

7 Protected Child





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Definition: A child who is legally in the care of State of Delaware Department of Children, Youth and Family Services as a Foster Child and/or a child who has a Restraining Order (RO) in their files.

ECAP staff will make every possible effort to prevent the removal of a child from the premises by an unauthorized person. However, an ECAP employee cannot be expected to put his or her own life or the life of the child at risk by interfering with the forcible removal of that child from the ECAP site. In the event of a forcible removal of a child, the police will be notified immediately, followed by DCYFS, the ECAP Coordinator and the child's Legal Guardian.

### Procedure

Any child who is enrolled in LACC ECAP as a PROTECTED CHILD will be required to have the following information in the Child File:

1. Parent Name(s) and Legal Guardian Name(s).
2. If a Restraining Order is in effect, a copy will be in the file. If the status of the RO changes at any time, the Legal Guardian must notify the LACC immediately in writing.
3. If the designated pick-up and delivery person changes at any time, the Legal Guardian will be responsible for delivering, in person, to LACC ECAP any change in



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writing. Copies of the change will be placed in the file and the FSW and Program Coordinator will be notified. The child will be released only to authorized individuals as listed on the Child Release and Emergency Contact Form.

4. If the child is in a "Reunification Plan" with DCYFS, LACC ECAP must be notified in writing by DCYFS. LACC ECAP will be represented in any staffing if the plan includes the parent's involvement in the ECAP classroom. LACC ECAP will prepare the parent for the classroom to assure a positive experience for both the parent and the child.

The staffing with DCYFS and LACC ECAP will include the child's teacher, the DCYFS caseworker, the FSW and the parent or individual designated by DCYFS as the person to be involved in the reunification. Minutes from this meeting will be reviewed by the Program Coordinator, and then placed in the Child File.

! student Education and Health Records

### Student Education and Health Records Table of Contents

1. The Rights of Parents
2. Parent's Rights of Access to Student Records
3. Rights of Inspection and Review of Education and Health Records
4. Prior Consent



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

5. Challenges and Hearings
6. Record Keeping and Record Retention Requirements

### Student Education and Health Records

#### The Rights of Parents

LACC ECAP will give full rights to either parent, unless the program has been provided with evidence that there is a court order, state statute, or legally binding document relating to such matters as divorce, separation, or custody that specifically revokes these rights.

Parents have the right to access the records of their minor children; when the child reaches the age of 18, only the child can access their record.

#### 2 Parent's Right of Access to Student Records

A "parent" of a student is defined as a natural parent, a guardian, an individual authorized in writing to act as a parent in the absence of a parent or guardian, or a



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surrogate parent appointed to represent a student with disabilities. The term "parent" does not apply to the state if the child is a ward of the state and the student is eligible for special education services, or is suspected of being eligible for special education services under state and federal law.

Parents of enrolled students will be provided with annual written notification of their rights regarding their child's education and health records.

### Procedure

The Notice of Privacy Practices is included in Enrollment packet. The parent has the right to:

1. Inspect and review the student's education record and any health records in the child's file;
2. Request the amendment of the student's education record to ensure that they are not inaccurate, misleading, or otherwise in violation of the student's privacy or other rights;
3. Consent to disclosure of personally identifiable information;
4. File a complaint under 34 CFR 99.64 with the United States Department of Education concerning alleged failures by this program to comply with the requirements of the Family Educational Rights and Privacy Act
5. File a complaint with the U.S. Department of Health and Human Services under



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

the Health Insurance Portability and Accountability Act of 1996 (HIPAA) for improper disclosure of health records; and

6. Obtain a copy of this policy from Center Staff.

The following information will be available to parents in the LACC ECAP center:

1. Copies of this policy;
2. Information on how to file a health information privacy complaint with the office for civil rights (HIPAA) in English and Spanish;

### Student Education and Health Records

3. A list of the types and locations of education and health records maintained by the LACC ECAP and the titles of the staff members responsible for maintaining those records;
4. A current listing of the names and positions of those individuals who have access to personally identifiable information with respect to students with disabilities.

For parents of students who have a primary or home language other than English every effort will be made to provide notification of parent's rights in their native language.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### 3 Rights of Inspection and Review of Education Records

Head Start will permit the parent, or a representative of the parent if authorized in writing by the parent, to inspect and review the education record of the student, unless the education record contains information on more than one student. In that case, the parent may inspect, review, or be informed of only the specific information about his or her own child.

#### Procedure

Written, dated requests may be made to the child's teacher, FSC or PC. The written request will be added to the student's education record.

Access to records will be granted within a reasonable amount of time, but in no case more than 45 days after receipt of the request.

ECAP staff will be available to respond to reasonable requests for explanation and interpretation of the record.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

If a parent so requests, the parent will be given a single copy of the student's education record at no cost to the parent.

No records will be destroyed if there is an outstanding request to inspect and review records under this rule.

#### 4 Prior Consent to Disclose Information

ECAP will not disclose any personally identifiable information without the parent's prior signed and dated written consent, except as specified in this policy.

##### Procedure

"Personally identifiable information" includes, but is not limited to:

1. The name of the student, parents or family members;
2. The address and telephone number of the student's family;
3. A photograph of the student;

! student Education and Health Records



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

4. A personal identifier such as the student's social security number;
5. Any other personal characteristic or information that would make the student's identity easily traceable.

Written consent must:

1. Specify the records that may be disclosed;
2. State the purpose of the disclosure; and
3. Identify the party or agency to which the disclosure may be made.

A copy of any information that is disclosed will be provided to the parent on request, without cost to the parent.

### 5 Challenges and Hearings

If a parent believes the education record relating to their child contains information that is inaccurate, misleading, or in violation of the student's rights of privacy or other rights, he/she may ask that the record be amended.





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### Procedure

The ECAP PC, in consultation with relevant staff, will decide within ten working days whether or not to amend the record as requested.

If the team decides not to amend the record, the parent will be notified of their right to an impartial hearing, and the parent will be given notice of the date, time, and place, in advance of the hearing.

The parent will be given fair opportunity to present evidence, and may, at his or her own expense, be represented by one or more individuals, including an attorney.

If, as a result of the hearing, the program decides that the information is inaccurate, misleading, or otherwise in violation of the rights or privacy of the student, the program will:

1. Amend the record accordingly; and
2. Inform the parent of the amendment in writing.

If, as a result of the hearing, the program decides that the information is not inaccurate, misleading, or in violation of the rights or privacy of the student, the program will inform the parent in writing of the right to place a statement in the record



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

commenting on the contested information and/or stating why he/she disagrees with the decision of the program.

1. This statement will be kept with the record for as long as the record is maintained; and
2. The statement will be disclosed whenever the portion of the record to which it relates is disclosed.

!student Education and Health Records

The parent may submit a written grievance within 30 days of the hearing as per Latin American Community Center Grievance Policy (1.6).

### 6 Record Keeping and Record Retention Requirements

The collection and use of information on children and families will be limited to that required to provide educational and family services. Any information obtained in the performance of official duties is to be considered confidential. This includes, but is not



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

limited to, information gained as a result of conversations, conferences, or staff meetings, as well as written documentation.

### Procedure

**Anecdotal Records:** Information obtained from direct observation will be noted in objective, clear, concise language; language that is vague or open to misinterpretation will be avoided. Information that is received from a source other than direct observation will be clearly identified as to the source. If it is important to note subjective information, clearly identify the statement as personal opinion.

If student records are maintained by another agency, or in another place, the location of these records will be noted in the student's file.

LACC ECAP will protect all files, notes and specific references to children and families from access by unauthorized persons.

1. Personally identifiable information, apart from directory information, will be kept in locked file cabinets when not in use; files will be secured at all times.
2. Computer files will be protected with a password system and/or by securing disks in locked cabinets.

LACC ECAP will record each request for access to, and disclosure of, personally identifiable information from the education record of each student on the Permanent Record Form.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

1. This documentation will remain as part of the permanent record.
2. For each request or disclosure the record must include:
  - a. The parties who have requested or received information;
  - b. The date access was given;
  - c. The legitimate educational interests of parties requesting or obtaining information, and, if applicable, the terms of re-disclosure.

A permanent record will be maintained for each child and will include:

1. Full legal name of the student, aka if applicable;
2. Student's birthdate and place of birth;
3. Name of parent(s)/guardian(s);
4. Date of entry into program;
5. Name of school previously attended;
6. Attendance;

! student Education and Health Records

7. Date of withdrawal, or transition to public school;
8. Social security number, if provided with consent of the parent;
9. Additional information as deemed necessary.



# The Latin American Community Center

## Early Childhood Assistance Program (ECAP)

### Early Childhood Assistance Program

### Management Systems

### Management Systems Table of Contents

- 1 Agency Planning
- 2 Communication
- 3 Program Meeting and Documentation Guidelines
- 4 Record-Keeping
- 5 Reporting
- 6 Supervision and Monitoring



The Latin American Community Center  
Early Childhood Assistance Program (ECAP)



The Latin American Community Center  
Early Childhood Assistance Program (ECAP)

Policy Council Approval:

*Policy Council Approval: 6/20/2016*  
*Governing Board Approval: 6/22/2016*



# The Latin American Community Center

## Early Childhood Assistance Program (ECAP)

### Early Childhood Assistance Program

#### I Management Systems

##### 1 Agency Planning

Latin American Community Center ECAP will implement a systematic, ongoing process of agency planning that involves agency staff, Board of Directors and the community. Information will be gathered from a variety of sources, analyzed and used to inform the direction of program services. Program planning efforts will focus on providing quality services in the most cost-effective manner.

#### Procedure

A full Community Assessment will be completed every three years. The Community Assessment process will be used to identify resources available to low-income families, identify gaps in availability or accessibility of services, locate likely numbers of low-income children within the service area, define the catchment area and develop the annual Eligibility and Recruitment Plan. Annual updates will reflect any changes in resources, services and/or demographics.

Program Self-Assessment will be conducted annually. All staff and participating parents, board, council and community members will attend training on the self-





## The Latin American Community Center Early Childhood Assistance Program (ECAP)

assessment instrument and plan. Assessment teams will collect data that will then be summarized by team leaders and reviewed by management staff. The Self-Assessment Summary will reflect program strengths and areas for improvement.

The Program Coordinator will review the Self-Assessment Summary and develop a plan of action. Corrective action will be taken immediately and will be reflected in the next year's program operations and training plan. Policy Council will review and approve the Self-Assessment Plan, the Self-Assessment Summary, the Program Improvement Plan, and will monitor completion of required corrective action.

The planning process culminates in the compilation and submission of the annual state grant applications. Implementation of the year's plan, as driven by program planning efforts, consists of development of and implementation of written program plans, policies and procedures, and purchase of materials, equipment and facilities.

### Early Childhood Assistance Program

#### I Management Systems

#### 2 Communication



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

LACC ECAP will ensure that timely and accurate information is provided to parents, staff, Policy Council, Board and relevant community partners, and that effective, comprehensive two-way communication is carried on between program staff and parents on a regular basis. Whenever possible, communication with families will be carried out

in the parent's primary language, and every attempt will be made to provide

communication assistance to individuals with sensory impairments. Procedure

Two-way communication with families will be ongoing throughout the program year.

This may include:

- Regularly scheduled home visits, parent-teacher conferences and trainings
- Participation in additional scheduled meetings (e.g. IEP, Behavior Plan)
- One-on-one conversations in the center or in the parent's home
- Telephone calls

Program staff members will also communicate with families in writing, including but not limited to:

- Notes home, including handouts and informational flyers
- Program Newsletters
- Letters

Communication with Policy Council and Board will include:

- Information shared orally during regularly scheduled meetings



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

- Shared meeting minutes between Policy Council and Board
- Policy Council representation on the Board
- Program progress reports, policies, planning schedules, financial reports

Regularly scheduled meetings between and among direct service and management staff will be utilized to facilitate communication among program staff. Further sharing of oral and written information will be done through:

- Meeting Minutes, Monthly Reports, tracking forms and other documents sent by mail, e-mail and/or fax
- Provision of Staff Handbooks, Program Performance Standards, Policies and Procedures, Forms Books, and written guidance
- Telephone calls and/or voice mail messages
- Personal communication, conferences, and performance evaluations

### Early Childhood Assistance Program

#### I Management Systems

#### 3 Program Meeting and Documentation Guidelines



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

MEETING	OBJECTIVE	ATTENDANCE	SCHEDULE	DOCUMENTATION
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Center Staff

Meeting	Center Business	All Center Staff	Monthly	Minutes
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Center Staffing      Supervision &

Support      Staff and Manager      As Scheduled Staffing Report

Individual Meeting      Staff Development      Staff Members as

Approved      As Scheduled Agenda, Minutes

Health Advisory

Committee Meeting	Community Input: Health Services	Staff, Parents, Community
Partners	Fall and Spring	Agenda, Meeting

Minutes

Parent Committee

Meeting	Parent Input: Program Operations	All Parents of Currently Enrolled
Children	Monthly or as	

Scheduled      Agenda, Meeting Minutes, Attendance Log

Policy Council

Meeting      Shared

Governance      Elected Parents & Community Reps, Director, Family

Services      Monthly or as

Scheduled      Agenda, Meeting

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## The Latin American Community Center Early Childhood Assistance Program (ECAP)

Minutes

Board Meeting	Shared Governance, Supervision & Monitoring	Board Members,
Monthly	Agenda, Meeting	

Minutes

### 4 Record-Keeping

LACC ECAP will maintain a record-keeping system that will document the status of all program activities and direct staff action in accordance with Performance Standards. LACC ECAP will maintain permanent personnel records and fiscal records in the Accounting Office.

Personally identifiable information about enrolled children and families will be limited to data that is essential to the assessment, planning, service provision, and evaluation of progress made by children and families toward achievement of identified goals or developmental milestones. Information will be documented and accessed in a manner that will provide appropriate program staff with accurate and timely information to facilitate and ensure the provision of quality services and to demonstrate program accountability to state and federal regulatory agencies.

Statistical data will be collected to meet the requirements of regulatory agencies, but this data will be collected in a way that does not permit personal identification of parents or students. All information will be kept in confidence. LACC ECAP will not



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

disclose any personally identifiable information without the parent's prior signed and dated written consent.

Efforts to Outcomes (ETO) is an online database where client's information is logged and tracked. Student record keeping is done so on Teaching Strategies Gold website.

### Early Childhood Assistance Program

#### I Management Systems

#### 5 Reporting

LACC ECAP will maintain a data collection and reporting system to ensure that regular, periodic reports are generated in order to ensure fiscal accountability, control program quality, maintain program accountability, and inform governing bodies and program staff of program status and progress. .



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

### Procedure

Clear guidelines for reporting responsibility and schedule for submission of reports and documentation will be provided to program staff at the beginning of the year. Monthly Report forms will specify documentation and information to be sent to managers.

- Center staff will complete Monthly Reports and submit them to the Program

Coordinator by the 51

of each month.

- Managers will analyze data from reports and submitted documents, and provide feedback to direct service staff as to the status and/or quality of required activities to ensure timely completion of services for children and families. Managers will forward summarized data in the form of tracking to the Director for review.
- Quarterly reports are completed and submitted to the Delaware Department of Education with pertinent information.

### 6 Supervision and Monitoring



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

LACC ECAP will implement a system of supervision and monitoring throughout all levels of program operation.

### Procedure

Program Coordinator and Lead Teacher will provide ongoing monitoring and supervision of direct service staff within their assigned area of responsibility. Monitoring will be carried out through the use of regularly scheduled on-site center observations, review of center monthly reports, tracking forms, reports generated by web-based or software programs, fiscal reports, meeting minutes, review of child and family files, and center records. PC and LT will participate in comprehensive staffing with every classroom team once a year with follow -up, and will evaluate the job performance of each direct service staff member annually or as needed.

### I Staff Training and Development

- 5 Staff Training and Development Table of Contents
- 1 Staff Qualifications
- 2 Staff Development Approach





# The Latin American Community Center

## Early Childhood Assistance Program (ECAP)

### I Staff Training and Development

#### 1 Staff Qualifications

LACC ECAP will recruit and select dynamic, well-qualified individuals that demonstrate the knowledge, skills and experience needed to provide high quality, comprehensive, and culturally sensitive services to enrolled children and families. All teaching staff must have an Associate's Degree or Bachelor's Degree by September of 2007. By September 2013, all teachers must have a Bachelor's Degree.

#### 2

#### Staff Development Approach

Program staff will be provided with continuous learning opportunities that meet the changing needs of the children and families served, and that ensure the existence of a well-trained, qualified staff in the classroom, in support positions, and on a management level.

Annual training priorities will be determined as follows:

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## The Latin American Community Center Early Childhood Assistance Program (ECAP)

1. First priority will be to correct program or individual weaknesses or deficiencies as

indicated by:

- o Program Self-Assessment;
- o In-depth state and/or federal monitoring reviews; and
- o Individual training based on the results of performance appraisal.

2. Second priority will be given to identified changes in service area or program requirements:

- o Changes in Head Start/Early Learning Foundations focus or requirements;
- o Observed changes in families and children requiring additional or increased skills and knowledge on the part of staff, volunteers and consultants; and

3. Third priority will be to provide employees with individual training based on:

- o Individual requests for training to increase skill and knowledge in a particular area; and
- o Program requests that individuals attend specific training sessions to bring back information, or to help meet long-term program goals.

Training Plans will be developed in committee with participation from management staff, and direct service staff, and will include:

1. For all Direct Service staff: methods for identifying and reporting child abuse and neglect; blood-borne pathogen training; and Oregon Food Handler training;



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

2. For all Direct Service Staff: first aid/CPR training;
3. For all Food Service Staff: USDA, food service and nutrition training;
4. Specific training topics as identified;
5. Training and coursework necessary for obtaining certification, degree, or coursework needed to meet Head Start/OPK teacher qualifications; and
6. Participation in conferences and workshops as available, and as funding allows.

### I Staff Training and Development

Staff will have the opportunity to request additional training to meet individual goals, to strengthen skills or to enhance areas of specialization.

Financial assistance will be provided as available on a limited basis for staff members working on their Professional Development Plans or working toward an approved degree from an accredited College or University. Employees seeking financial assistance from ECAP must first try to get financial assistance through the College or University, and must agree to the following conditions:

- Three years of continued employment upon the completion of each funded course.



## The Latin American Community Center Early Childhood Assistance Program (ECAP)

The required time period will begin the week following completion of each course.

- Provide the Staff Development Supervisor with an official grade report within 30 days of completion of each funded course.
- Return all textbooks and course materials purchased by program at the completion of all funded courses.
- Repay (via payroll deduction) all fees for courses where a grade of C or above is not attained.

Trainings will be conducted through the Delaware Institute for Excellence in Early Childhood, the state TA system and the Head Start TA system.