



2020-2021

L.B.J. & C. Head Start

Parent Handbook



AN EQUAL OPPORTUNITY AGENCY

Funded by the U.S. Department of Health and Human Services, Administration for Children and Families

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The 504/ADA/Title VI Contact Person: Barbara Pendergrass (931) 528-3361

A Message From The Director

L.B.J. & C. Head Start

Dear Head Start Parent:

The L.B.J. & C. Head Start Program welcomes you to an exciting year of opportunities and adventures. A day in Head Start will be most rewarding to you.

We appreciate the time you will be able to spend in the Head Start Center. The competent staff at the center are there for your source of information and support to you in any way we may be able to help you.

As Interim Head Start Director, I operate with an open door policy to staff, parents, and volunteers. Also, I can be reached by phone at (931) 528-3361. Please contact me at any time that I may be of help to you during your time with Head Start.

Respectfully,



*Penny Meadows
Head Start Director*

I agree to adhere by the Procedures and Policies found in the Parent Handbook. I have read and reviewed the following with a L.B.J. & C. staff person:

Table of Contents

A Message from the Director	2
Table of Contents	2-3
Policy Statement for Parents	4
Supervision of Children Procedure	5
Emergency Evacuation Place, Contact Person, and Phone Number	5
Volunteer Job Description	6
How IDEA Protects You and Your Child	6
Central Office Contact Information	7
Transition Services	7
Head Start Policy Council	8
Tobacco-Free Environment Policy	8
Monthly Highlights	starting on 8
Lice Policy	8
Attendance and Unexpected Absences	8
Monthly Calendar	starting on 9
Monthly Parent Meeting/Topics	starting on 10
1st Parent Meeting/Family Meal/County Policy Council Elections	10
Open House Schedule	12
Disabilities Services	12
Emergency Preparedness Plan and Drills	12
Letter from Child Nutrition Specialist	14
Parenting Curriculum	14
Children's Leftover Medication	14
Advisory Committees	14

Table of Contents (continued...)

Health Services and Screenings	14
Code of Conduct Policy	16
Parent Involvement/Volunteer	18
Family Style Meal Service	18
Center and Center Supervisor Information	20
Education Services	20
Healthy Recipe	20
Outdoor Play Procedure	22
Corporal Punishment Policy	22
Parental Rights Concerning the Protection for the Privacy of Child Records	24
Child Abuse Facts and Laws	24
Why Head Start Home Visits and Parent Conferences?	26
Transfer of Children Policy	26
Your Rights Under Section 504/ADA	26
Confidentiality Policy	28
The Flu: A Guide for Parents	30
Department of Human Services Meal Guidelines	31
Child Health Checks/Identified Illness or Injury	31
Vaccine Information Statement [Influenza (Flu) Vaccine: What you need to know]	32
Your Child and Her / His Home Learning Environment	32
When Do Children and Teens Need Vaccinations?	33
Learning Opportunities for Head Start Families	34
Imagination Library and how you can enroll your child	34
Training and Development Services	35

HIPAA	35
Family Emergency Preparedness Disaster Plan	36
TN DHS Summary of Licensing Requirements for Child Care Centers	38
Your Rights under Title VI of the Civil Rights Act of 1964	41
WIC	42
Building for the Future (CACFP)	42
Tennessee DHS CACFP Civil Rights Grievance Procedures	43
Tennessee DHS CACFP Civil Rights Grievance Report Procedures	43
L.B.J. & C. Head Start Facts	44
L.B.J. & C. Head Start Motto	44
L.B.J. & C. Head Start Mission Statement	44
L.B.J. & C. Head Start Service Area Map	44



Listed below are the policies which will be followed during the 2020-2021 Head Start Program year for children. Please read carefully.

1. Head Start centers will be operated Full Day-Monday - Friday from August 17, 2020. Children are required to attend five (5) days a week. Head Start's core hours are 7:00 a.m. - 3:00 p.m. with extended hours offered in centers where needed. HAFH/Pinewood offer Full Day/Full Year services. Center Staff will work individually with families needing extended hours. Head Start does not have Fall Break. However, Head Start does have Spring Break in conjunction with the local county school system's Spring Break schedule. (Please note on actual calendar.)
2. The child must be delivered to the Head Start staff and signed in upon arrival to the Head Start center. A parent/authorized release person must sign out the child prior to departing. The parent/authorized release person signing the child out becomes responsible for the child at the time the book is signed. An authorized release person is one who the parent or legal guardian has listed on the child's application as "authorized release" persons. **Changes or additions to authorized release persons may only be made in person.** Change may not be made over the phone or through notes.
3. If a child has not been picked up by closing time, emergency procedures will be implemented which will include attempts to contact the parent/guardian/caregiver and the emergency contact/release persons at all phone numbers accessible. After all attempts to contact a authorized release person has been unsuccessful the Program Services Manager will be contacted, along with the local law enforcement and/or Department of Children Service's (DCS).
4. Attendance is very important to the child and to the Head Start Program. The child will be expected to attend every day that the center is open. Parents are encouraged to contact Head Start by 8 a.m. if their child will be absent, if not, your child will be considered Unexpectedly Absent. Individual attendance is monitored closely. Head Start staff helps families in identifying barriers to poor attendance and initiate support services to make every effort to increase and improve individual attendance.
5. Head Start Centers will use the following guidelines for inclement weather:
 - a. If the local school is one or two hours late, Head Start will be open on time. Regular meal times will be followed.
 - b. If the local school is closed due to inclement weather, Head Start will be closed.
 - c. If the local public school system closes early due to inclement weather, the Head Start center will close at the same time as the public school system.

* Home Away From Home center will remain open unless extreme conditions occur in which parents will be notified.
6. If a child becomes ill during the day, the parent will be called to pick up the child and to take the child home. A sick child cannot be cared for at the center.
7. Children do NOT have to be potty trained to attend Head Start. Staff work with families to achieve this skill and provide the pull-ups or diapers.
8. Please send an extra change of clothes for your child; please write the child's name on the inside. This clothing will be left at the center for emergencies.
9. Children's medication will only be administered while at Head Start as guided by a medical provider. Doctor's orders, parental consent, and possible side effects must be submitted to the Center Supervisor in order to receive approval to administer the medication from the Program Services Manager. Once staff training is determined and approval has been obtained, medication must be delivered to the center by the parent/guardian/caregiver in the original labeled container.
10. Parents will be promptly notified of the occurrence of communicable disease outbreaks among the children at the Head Start Center.
11. No outside food will be brought into the Head Start Centers. This includes any "treats" for special days. Parents can work with the teaching staff to plan nutrition activities, which will be provided by the Head Start Program. Please do not send money, toys, pillows, blankets, or backpacks to the center with the child.
12. Once a child has been found to be income eligible and is participating in the program, that child remains income eligible for the current year and the following year.
13. Immunizations must be kept up-to-date for the child to remain in the program. Only a child with a documented medical or religious reason will be excused from the required documentation. Immunizations must be documented using the Tennessee Department of Health Immunization Form prior to a child's entry into the Program.
14. Each child must have a health physical prior to entering into the Head Start Program following the EPSD&T standards.

*The Health Physical Form is available at each Head Start Center.
15. Allergies and/or Special diets must be documented by an appropriate professional (physician, clergy, etc.) with an emergency action plan.
16. Volunteers who choose to volunteer in the kitchen must obtain a negative TB test before he/she begins. This evaluation may include a chest x-ray and, if necessary, other specific test. Any individual born in a country other than the United States, Canada, Western Europe, Australia, New Zealand, and Japan must have a TB screening prior to on-going contact with children.
17. Corporal punishment (spanking, slapping, pinching, etc.) is not allowed on any child, including your own, while on Head Start premises or at any Head Start function.
18. The Tennessee Department of Human Services requires anyone knowing or suspecting child neglect and/or abuse must report it to the proper authorities. Please refer to Child Abuse Facts and Laws.
19. Firearms, weapons, drugs, and alcohol are prohibited on the L.B.J. & C. Head Start operational sites. (A child will not be released to any person suspected of being under the influence of drugs or alcohol.)
20. The Head Start has a Tobacco-Free Environment Policy prohibiting tobacco use at all times in all space utilized by the Head Start Program.
21. Outdoor play is an important part of the Head Start Program. Please refer to the Outdoor Play Procedure.
22. All Head Start services are provided at no cost to children/families enrolled in the Head Start program, and volunteering is not a requirement for your child's enrollment.
23. Staff, children, and volunteers must wash their hands upon arrival at center/classroom and according to the Handwashing Procedure.

**L.B.J. & C. Head Start
Supervision of Children Procedure**

With the belief that the health and safety of the children is our primary concern, and in compliance with federal, state and local laws including Tennessee Department of Human Services (DHS) Licensing Requirements and National Association for the Education of Young Children (NAEYC) Standards, L.B.J. & C. Head Start is implementing the following procedure to ensure **adequate supervision** of children occurs throughout the day in each Head Start Classroom.

Adequate supervision means the observation, oversight, and guidance of the individual child or groups of children by the staff member taking responsibility for the ongoing activity of each child so that the staff member is close enough to intervene, if necessary, to protect the child from harm. Adequate supervision requires the staff member's physical presence, knowledge of the child's program of activities, individual needs, habits, interests and special problems, if any, and the acceptance of accountability for the child's or group of children's care.

- Children's locations will be accounted for at all times utilizing the child sign-in/sign-out books.
- The adult/child ratio must be maintained at all times (requirement will be posted in each classroom).
- Head Start Staff will supervise children by visual sight at all times possible (staff must be able to see each child with a quick glance, and must be able to physically respond immediately).
- In the event that a child is out of sight for a **short interval of time**, (those who can use the toilet independently). Sound may be used as a tool of supervision, as long as staff check frequently on the child who is out of sight.
- However, L.B.J.&C. maintains that sight supervision at all times is the appropriate and acceptable form of supervision of Head Start children.
- Staff must pay extra attention to children in more hazardous/high risk situations such as when children are eating, doing certain cooking activities, playing around water, climbing on high equipment, or using carpentry tools or sharp objects.
- To assure that children are safe during mealtime and snack time, staff is required to sit at the table with children anytime there is food of any kind on the table. If an emergency event occurs, requiring one of the staff to leave the table, the other staff member will immediately stand between the tables and constantly scan all children until the other staff person returns and sets down with his/her children.
- Failure to comply with this procedure will result in disciplinary actions and possible termination of employment.

**L.B.J. & C. Head Start Center
Emergency Evacuation Place, Contact Person, and Phone Number**

Center Name	Evacuation Place	Contact Person	Contact Phone Number
Bondcroft	Derrossett Church of Christ	Alisha Gomez	931-510-0046
Byrdstown	Ashley's Classy Cut*	Ashley Elmore	931-864-7376
	Byrdstown Medical Center**	Janie Todd Dr. Andrew Todd	931-864-3187
Algood/ Cookeville	Algood/Cookeville Community Center*	Brenda Dishman	931-537-3447
	L.B.J. & C. Central Office**	Penny Meadows	931-528-3361
Crossville	AC Services	Alaine Carletti	931-787-2557
Clarkrange	South Fentress Community Park	Junior England	931-403-8005
Jamestown	York Institute	Coach Derwin Wright	931-879-8101
Livingston	Livingston City Police Department	Greg Ethridge	931-823-6496
Monterey	Monterey Library	Doylene Farley	931-839-2103
Sparta	NHC Home Health Care	Lora Swift	931-836-2713
Brookside	Bonner Church of Christ	Tim Long	931-668-4527
Midway	Mike/Cindy Cooper's Home	Mike/Cindy Cooper	931-686-2178
Smithville	Webb House	Lora Webb	615-597-8888
Home Away From Home	Cumberland Fellowship*	Bob Tinch	931-707-1883
	HAFH-Pinewood Head Start**	Kathy Wilson	931-787-1012
Celina	Clay Board of Education Central Office	Ashley White	931-243-3141
Gainesboro	USDA Jackson/Clay County Farm Service	Lisa King	931-268-0201
Shiloh	Shiloh Church of Christ	Matt Hargis	931-239-1361
Smith County	Smith County Wellness Center	Kristen Oldham	615-735-2735
Lafayette	Macon One Stop	Van Presley	615-688-7867
	StoneCrest Assisted Living	Paula Driver	615-666-6400
RBS	Anderson Funeral Home	Leeann/Wayne Anderson	615-699-2191
HAFH-Pinewood	Cumberland Housing Apt # 223*	Tiffany Davis	931-200-9814
	Home Away From Home Head Start**	Lori Hedgecoth	931-484-3238
South Cookeville	NHC Home Care	Darlene Rickles	931-528-2722

*Primary Evacuation Place

**Secondary Evacuation Place if first location is unavailable

**L.B.J.& C. Development Corporation
Head Start Program**

5/19

The Rights of the Volunteer

1. The right of being offered the opportunity to become a volunteer regardless of race, financial status, sex or age.
2. The right to be interviewed and appropriately assigned to a meaningful job.
3. The right to expect training and supervision to enable them to perform the job well.
4. The right to be involved in planning and evaluating the program.
5. The right to receive recognition in a way that is meaningful to them.
6. The right to be regarded as a person, with individuality, uniqueness, and value.

Volunteer Responsibilities

1. To accept Head Start as an opportunity through which I can improve my life and my child's life.
2. To guide my child with firmness which is both loving and protective.
3. Abide by the Program's Code of Conduct, Confidentiality Policy, and Corporal Punishment Policy.
4. Report Child Abuse and/or Neglect.

Suggested Ways to Volunteer

1. Volunteer time in the classroom, such as at mealtime; read to the children in my home language; creative arts: make crafts with the children; share a talent, interest or hobby; do a make and take workshop; or donate art supplies.
2. Attend and/or prepare for parent meetings and workshops.
3. Serve on Advisory and/or Functional Committees.
4. Serve as a Self-Assessment Team Member.
5. Assist with recruitment (Distribute flyers and Head Start business cards; hang posters in the community; and/or assist with a "Recruitment Kick-off Event.").
6. Assist with Open House (Set up tables, decorate, post flyers, call members of the community).
7. Invite someone into the Head Start Center to conduct parent meetings and/or workshops.
8. Donate dramatic play items and/or multicultural items.
9. Bring in Show & Tell items that are aligned directly with the lesson plan to share with the children (ex: multicultural items; transportation-trucks, cars, 4-wheelers, tractors, motorcycles; community helpers).
10. Run errands: to the post office, pick up donated items, etc.
11. Take pictures to be used in the classroom, cubbies, and portfolios.
12. Donate children's necessities to be used while at Head Start (Minimal Supplies PLEASE, such as extra coats, hats, scarves, gloves, toothbrushes, etc.)
13. Parent and Child Time (PACT).
14. Work with your local groups: make items such as children's aprons, small blankets, or throws.
15. Volunteer to do yard maintenance, mow and weed eat, mulch, trim bushes and trees, haul trash, plant flowers, sow grass seed, spread hay, donate the seed or hay, decorate for seasons, paint or repair items.
16. Help with playground clean-up days.
17. Kitchen helpers (must have TB test).
18. Assist with on-site field trips.
19. Get field trip items donated for the children or get a reduced rate.
20. Invite community agencies to set up at Open House.
21. Assist to increase volunteer involvement at the Head Start Center.

Advantages of Being a Volunteer

1. Have an opportunity to increase your job skills.
2. Help Head Start meet the 20% in kind the agency must raise.
3. Have lots of fun as you interact with parents, staff and the children.

How IDEA Protects You and Your Child

At a Glance:

- **The Individuals with Disabilities Education Act (IDEA) is a federal law that requires schools to serve the educational needs of eligible students with disabilities.**
- **Schools must evaluate students suspected of having disabilities, including learning disabilities.**
- **Not every child with learning and attention issues qualifies for special education services under IDEA.**

If you think your child needs special education services, you have to follow a legal process to make it happen. This process can be confusing. It can involve several laws. The Individuals with Disabilities Education Act (IDEA) is the most important one to understand.

As the nation's special education law, IDEA provides rights and protections to children with disabilities and to their parents. Learning your rights under IDEA can make it easier for your child to get the help he needs (and is legally entitled to) at school.

The Purpose of IDEA

IDEA has been amended several times since Congress first passed it in 1975. (At that time it was called the Education for All Handicapped Children Act.) The essential purpose of IDEA hasn't changed, though. Its primary goals are:

- **To protect the rights of children with disabilities.** IDEA ensures students with disabilities have access to a free and appropriate public education (FAPE), just like all other children. Schools are required to provide special education in the least restrictive environment. That means schools must teach students with disabilities in general education classroom whenever possible.
- **To give parents a voice in their child's education.** Under IDEA, you have a say in the educational decisions the school makes about your child. At every point of the process, the law gives you specific rights and protections. These are called procedural safeguards.

IDEA covers kids from infancy through high school graduation or age 21 (whichever comes first).

Services Under IDEA: Who's Eligible

Not every child with learning and attention issues is eligible for special education services under IDEA. First, a child must be found to have one of the 13 kinds of disabilities that IDEA covers.

The First Step to Access Services Under IDEA: An Evaluation

The school should conduct a thorough evaluation if it suspects a child has a disability. The evaluation not only determines if a student has a disability. It also sheds light on what services and support that student might need. Find out how the evaluation process works.

The Next Step: Getting an IEP

If an evaluation shows that a student is eligible for special education, parents work with a school team to develop an Individualized Education Program (IEP). An IEP is a legal document that spells out a child's educational goals, disabilities, and the services and support that the school will provide.

The Role of Parents

You're your child's most important advocate. IDEA gives you an equal say in decisions about your child's education. A number of procedural safeguards protect your rights.

Try not to get discouraged if the process seems complex. Little by little, you can learn more about your child's rights. Consider talking to other parents in our community. Their experience can help guide you. You can also talk to one of our live experts.

Key Takeaways

- *If your child qualifies for special education services, you'll work with a school team to develop an Individualized Education Program (IEP).*
- *An IEP is like a formal contract that outlines how the school will support your child.*
- *The law gives you an equal say in decisions about your child's education.*

Source: www.understood.org

L.B.J.& C. Head Start Program
1150 Chocolate Drive
Cookeville, TN 38501-2206
Tel: (931) 528-3361
Fax: (931) 528-2409

E-mail: information@lbjc.org
Webpage: www.lbjc.org

Computer Services: ComputerSupport@lbjc.org

All E-mail is first initial, last name @lbjc.org
(ex. pmeadows@lbjc.org)

Head Start Director.....ext. 221

ERSEA/Transition Specialist.....	ext. 222
Information Technology Specialist.....	ext. 223
Disability Specialist.....	ext. 224
Child Nutrition Specialist.....	ext. 225
Assistant Head Start Director.....	ext. 226
Data Entry Assistant.....	ext. 227
Human Resource Manager.....	ext. 228
Program Services Manager.....	ext. 229
Early Literacy Mentor-Coach.....	ext. 230
Chief Financial Officer.....	ext. 231
Behavioral Specialist.....	ext. 232
Program Operations Manager.....	ext. 233
Early Literacy Mentor-Coach.....	ext. 234
Child Health Specialist.....	ext. 235
Fiscal Assistant.....	ext. 236
Fiscal Assistant.....	ext. 237
Fiscal Assistant.....	ext. 238
Parent/Family/Community Engagement Specialist.....	ext. 239
Maintenance Supervisor.....	ext. 240
Education Specialist.....	ext. 242
Education Assistant.....	ext. 248
Assessment, Counseling, & Training Services.....	931-528-9399



Transition Services

The main goal of the transition unit is to provide a smooth transition process into, through, and out of the L.B.J.& C. Head Start Program for the child, the parents, and teachers. Transition moving from one environment to another, can be very difficult and stressful for young children and their families. Some of the services offered include:

Parent/Child Orientation

Parents learn about the services offered, their rights and responsibilities; and are welcomed to the Program and encouraged to volunteer in many areas. Children meet the staff and become familiar with the center.

Teacher's First Home Visit

The child's teacher visits the parents and child to further explain the services offered, gather information about the child and family, and offer at-home transition activities for the parent and child to do together to prepare for the Head Start experience.

Kindergarten Registration Visits

The child, parents, and Head Start staff visit the public school the child plans to attend for Kindergarten registration and tours the school. Kindergarten teachers also visit the Head Start center to meet with parents and explain the kindergarten program and answer questions.

Transition Booklet

Each family whose child will be entering kindergarten receives an informative booklet to assist in preparation for the transition into kindergarten in their county's public school system.

Forwarding of Records

Upon parental consent, children's transition information/ records, including health summary reports, educational summary reports, mental health professional individual observation, portfolio, IEPs, and Eligibility Reports, will be forwarded to school personnel.

Additional individual transition services are available to both the children and families who exhibit the need or request these services.

Head Start Policy Council

The Head Start Policy Council is made of parents and representatives of the community. All parents serving must be elected by Head Start parents at their center meeting in September after the center opens.

The functions of the Policy Council is to meet once a month and make decisions affecting the L.B.J. & C. Head Start Program. A few of the responsibilities are:

(1) Hear and resolve complaints about the Head Start Program, (2) Approve or Disapprove the established goals of the program within OHS guidelines, (3) Establish the criteria for selection of the children within OHS guidelines, (4) Initiate ideas for program improvements, and (5) Approve hiring and termination of Head Start staff.

There are many additional functions of the Policy Council. All persons elected and approved to serve on the Policy Council will receive a thorough training in the Program Governance and Management Policy Council regulations.

Tobacco-Free Environment Policy

The Head Start has a Tobacco-Free Environment Policy prohibiting tobacco use at all times in all space utilized by the Head Start Program. Staff, volunteers, service providers, parents, and guests will be advised of the Tobacco-Free Environment Policy. "Tobacco-Free Signs" are posted at all Head Start facilities.

Under no circumstances will tobacco-use occur in the presence of children. If the Head Start facility is shared with other occupants, steps to reduce children's exposure to smoke from other sources in the building will be implemented, for example, by altering traffic patterns, modifying ventilation, and/or establishing a "Tobacco-Free Zone" around the Head Start site.



Monthly Highlights

August

Parents are invited to attend! Contact your local Center Supervisor for more information.

- § July 20-July 31 – Children's Orientation/Enrollment (scheduled by appointment)
- § July 27-31 - Education Staff Training
- § August 3-7 – Teacher First Home Visits (scheduled by appointment)
- § Week of August 10 – Pre-Service Training
- § August 17 – First day for children

Lice Policy

L.B.J. & C. staff will conduct early morning observations of all Head Start children during child health checks. As a child enters the Center, they will be observed for physical health and head lice by Head Start staff. If a child is found to have visible live lice or nits during the morning health check, the child will not be allowed to stay in the center. The parent will be informed immediately in a confidential manner of the problem and provided information on effectively treating head lice. Anyone can get head lice. It is not a sign of poor personal hygiene or being dirty.

Rev 6/19

L.B.J. & C. Head Start Attendance and Unexpected Absences

Parents and families are essential partners in promoting good attendance because they, ultimately, have the bottom-line responsibility for making sure their children get to school every day. Just as parents should focus on how their children are performing academically, they have a responsibility to set expectations for good attendance and to monitor their children's absences, so that missed days don't add up to academic trouble. At every level, parent and Head Start staff is a key component of effective, comprehensive approaches to reducing chronic absence.

L.B.J. & C. Head Start promotes tracking chronic absence data for each student beginning at the beginning of the year and partnering with families and community agencies to intervene when poor attendance is a problem for a student.

Early chronic absence can leave children unable to read well by the end of 3rd grade, and it can set a pattern of poor attendance and academic failure for your child.

If your child has to be absent, you as the parent are expected to call the Head Start center by 8 a.m., report the cause of absence and let staff know when you expect the child to return. If the parent does not contact Head Start by 8 am, your child will be considered unexpectedly absent. Head Start staff will contact the parent/guardian regarding your child's absence. Contact from the parent is encouraged so that Head Start Staff can be aware of the reason. A two-day absence without any communication will result in the Family Engagement staff making a home visit or other direct contact.

Once a child's attendance falls below 90%, their attendance will be closely monitored. If a child who have a pattern of unexcused absences that causes their attendance to fall below 85%, his/ her parent/guardian will be notified in writing from the Central Office that he/she has been placed on "Attendance Watch". Attendance letters will be sent (in the family's preferred language), along with a copy of the individual attendance, making the family aware that the child has been placed on attendance watch. If a child who has been placed on Attendance Watch continues to have unexcused absences, the child will be placed back on the Center's waiting list and another child will be enrolled into the Center to receive the Program's benefits when the center has an active waiting list. The Parent/Family Engagement Specialist, ERSEA/Transition Specialist, or other administrative staff will contact the family to assure the family is receiving reasonable assistance and to determine if they require additional services the program could provide.

August, 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<i>August is National Immunization Awareness Month and Children's Eye Health Safety Month</i>						1
2	3	4 Policy Council 6:00 p.m.	5	6	7	8
9	10	11 Board Meeting 6:00 p.m.	12	13	14	15
16	17 <i>Children's First Day</i>	18	19	20	21	22
23	24	25	26	27	28	29
30	31				<i>Welcome to the Head Start Village! ... "it takes a village to raise a child..."</i>	



Monthly Highlights September

Parents are invited to attend! Contact you local Center Supervisor for more information.

Parent Meeting/ Topics September

All About
Head Start

Head Start
Performance
Standards

Importance of
Oral Health
Home/Care

Transportation
Safety
Education

Election of
Officers/
Policy
Council
Members

Personal
Safety

- § September 1 – Home Away From Home Parent Meeting/Family Meal at Pinewood (mtg. starts at 8:30 a.m. at Pinewood)
- § September 1 – Home Away From Home-Pinewood Parent Meeting/Family Meal-(mtg. starts at 8:30 a.m. at center)
- § September 2 – Smith County Parent Meeting/Family Meal/Smith County Policy Council Election -(starts at 8:30 a.m. at center)
- § September 4– Bondecroft Parent Meeting/Family Meal-(starts at 8:30 a.m. at center)
- § September 8– Byrdstown Parent Meeting/Family Meal/Pickett County Policy Council Election -(starts at 8:30 a.m. at center)
- § September 9– Sparta Parent Meeting/Family Meal/White County Policy Council Election -(starts at 8:30 a.m. at center)
- § September 10– Livingston Parent Meeting/Family Meal/Overton County Policy Council Election -(meal at 11:30 and mtg. starts at 12:00 at center)
- § September 11– RBS Parent Meeting/Family Meal - (starts at 8:30 a.m. at center)
- § September 14 – Crossville Parent Meeting/Family Meal/Cumberland Co. Policy Council Election-(starts at 8:30 am at center)
- § September 15 – Midway Parent Meeting/Family Meal -(starts at 8:30 a.m. at center)
- § September 16 – Lafayette Parent Meeting/Family Meal/Macon County Policy Council Election-(starts at 8:30 a.m. at ctr)
- § September 17 – Gainesboro Parent Meeting/Family Meal -(starts at 8:30 a.m. at center)
- § September 18– Brookside Parent Meeting/Family Meal/Warren County Policy Council Election -(starts at 8:30 a.m. at center)
- § September 21– Clarkrange Parent Meeting/Family Meal -(starts at 8:30 a.m. at center)
- § September 22 – South Cookeville Parent Meeting/Family Meal -(starts at 8:30 a.m. at center)
- § September 23 – Shiloh Parent Meeting/Family Meal/Jackson County Policy Council Election - (starts at 8:30 a.m. at ctr)
- § September 24– Celina Parent Meeting/Family Meal/Clay County Policy Council Election -(starts at 8:30 a.m. at center)
- § September 25 – Monterey Parent Meeting/Family Meal -(starts at 8:30 a.m. at center)
- § September 28– Jamestown Parent Meeting/Family Meal/Fentress County Policy Council Election-(starts at 8:30 a.m. at center)
- § September 29– Smithville Parent Meeting/Family Meal/Dekalb County Policy Council Election-(starts at 8:30 a.m. at center)
- § September 30 – Algood/Cookeville Parent Meeting/Family Meal/Putnam County Policy Council Election - (starts at 8:30 a.m. at center)



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September, 2020

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
		1 Policy Council 6:00 p.m.	2	3	4	5
6	7 <i>Labor Day</i> HAFH Closed	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24 T/TA Mtg. 1:00 p.m.	25	26
27	28	29	30 <i>45 Days-All Health Screenings Completed</i>		<i>September is Head Lice Prevention Month & Cholesterol Awareness Month</i>	

Monthly Highlights October



***Open House is from
1:00 p.m. – 4:00 p.m.
Everyone Welcome!!***



- § October 1 – Home
Away From Home/HAFH-Pinewood Open House/
ACTS
- § October 2 – Bondecroft Open House/ACTS
- § October 5 – Clarkrange Open House/ACTS
- § October 6– Sparta Open House/ACTS
- § October 7– RBS Open House/ACTS
- § October 8– Jamestown Open House/ACTS
- § October 9 – Midway Open House/ACTS
- § October 12– Livingston Open House/ACTS
- § October 13 –Algood/Cookeville Open House/
ACTS
- § October 14– Crossville Open House/ACTS
- § October 15 –Monterey Open House/ACTS
- § October 16 –Lafayette Open House/ACTS
- § October 19– Byrdstown Open House/ACTS
- § October 20– Smithville Open House/ACTS
- § October 21 –Brookside Open House/ACTS
- § October 22– Celina Open House/ACTS
- § October 23– Smith County Open House/ACTS
- § October 26– Gainesboro Open House/ACTS
- § October 27 –Shiloh Open House/ACTS
- § October 28– South Cookeville Open House/ACTS

Disabilities Services

In Head Start, all children are special, including those with disabilities. Head Start considers each child a unique person with individual strengths and needs, and provides an individualized program for the child. Regardless of the severity, children with disabilities are welcome in Head Start, including:

- Health Impairment
- Emotional/Behavior Disorders
- Speech/Language Impairments
- Intellectual Disability
- Hearing Impairment, including Deafness
- Orthopedic Impairment
- Visual Impairment, including Blindness
- Learning Disabilities
- Autism
- Traumatic Brain Injury
- Other Impairments





Many children require special services such as speech therapy, physical therapy, special health services, or other related services. These special services are provided to the children with disabilities through collaboration with the Local Education Agencies (LEA) and other agencies.

Emergency Preparedness Plan and Drills

All Head Start Center Safety Drills will be practiced monthly with two occurring within the first thirty days. The Emergency Preparedness Plan and Evacuation Routes are posted in each classroom, center office, parent corner, and other frequently traveled areas. Staff review the plan on a monthly basis. Individual Evacuation Plans will be implemented for children with disabilities and/or children who require more assistance than other children to evacuate the facility. For additional information on your child's Head Start center shelter site, refer page 3 of this handbook for the emergency evacuation place, contact person, and phone number.

October, 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<i>Head Start does not have Fall Break. This is a great time for older youth to get involved.</i>						
Community booths will be set up at each Open House.				1 Health & Safety Mtg. 10:00 a.m.	2	3
4	5 Policy Council Training 11:00 a.m.	6 Policy Council 6:00 p.m.	7	8	9	10
11	12	13 Board Training 5:00 p.m. Annual Board Mtg- 6:00 p.m.	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30 <i>Fall Fun Day in All Centers</i>	31
 Open House 1:00 p.m. – 4:00 p.m. <i>Everyone Welcome!!</i> 						October is Domestic Violence Awareness Month & Breast Cancer Awareness Month

Dear Head Start Parent,

Head Start understands the importance of good nutrition and uses a pro-active approach in its implementation. Early childhood is the best time to instill healthy eating habits and to introduce children to new foods. Our nutrition program promotes lifelong wellbeing by assisting families in establishing good eating habits that meet your child's nutritional needs and nurture healthy development. Head Start meals and snacks are nutrient dense and low in fat, sugar, and salt.

New foods are introduced to your child through lesson plans or classroom activities in order to help children recognize and try various new foods and develop cultural awareness. Opportunities for parents/guardians to be involved include providing input for the menus, serving on Advisory committees, participating in parent meetings, and assisting with classroom nutrition activities. Head Start must contract only with food service vendors that are licensed in accordance with State, Tribal and local laws. To ensure the health and safety of each child, no outside food will be brought into the Head Start Center. This includes any "treats" for special days. If your child has special dietary needs, religious food exemptions, or food allergies, please contact your Family Engagement Staff as soon as possible to inquire about the necessary documentation needed.

As parents, please ensure that your child arrives prior to the morning meal, served at 8:00 a.m., to ensure the child is receiving all the services Head Start has to offer. The Department of Human Services, who licenses our Head Start Center's requires a caregiver to sit at the table with the children during high risk activities like eating. If your child arrives after the meal has started, and has not already eaten, we encourage you to stay with your child, if possible, while he/she eats so that the teaching staff can continue with the regular classroom activities. To ensure food safety, alternate menu items may be served if arrival time is later than 8:00 a.m. In the event of inclement weather and school runs late, breakfast will be served at the regular scheduled time, 8:00 a.m., and children who arrive late will be offered breakfast. If inclement weather develops during the day and children are dismissed early, the food service staff will alter the lunch menu accordingly.

I look forward to working with you and your family on your nutritional needs. If you have any questions or concerns, please call me at (931) 528-3361, ext. 225.

Thank you, Valerie Benton, Child Nutrition Specialist

Parenting Curriculum

Our Parenting Curriculum is training where vital parenting skills are discussed, including parenting issues, their experiences, and feelings. Being a parent is the most rewarding job you will ever have.

Children's Leftover Medication

Children's medication must be picked up on the last day of school. Staff will make attempts to remind the parents prior to the last day that the medication must be picked up. In the event the medication is left at the Head Start, staff will attempt to contact the parent and their emergency contact persons they have listed. If the medication is NOT picked up prior to the Head Start center closing for the summer, it will be stored at the L.B.J. & C. Central Office, 1150 Chocolate Drive, Cookeville, Tennessee for one month. After that month, the medication will be discarded. Contact Pam McPherson, Program Services Manager, for more information or to pick up medication at 931-528-3361, ext. 229.

Advisory Committees are made of community members, service providers, parents, and staff. The Advisory Committees are Health Services; Parent, Family, and Community Engagement (PFCE); and Education. The intent of these committees is to advise and offer input into the program. The Advisory Committees also review and revise Annual Unit Plans and offer solutions to any concerns. Please plan to attend these important functions.

Parents are invited and encouraged to attend Advisory Committees/Functional Committee Meetings. See Advisory/Functional Committee Meeting Dates throughout the Parent Handbook.

Health Services

The Head Start Program provides a comprehensive health service program which includes a broad range of medical, oral health, mental health, and nutrition services for the children. The Health Plan provides the child's family with the necessary skill and insight to link the family to an on-going health care system to ensure that the child continues to receive comprehensive health care even after leaving Head Start.

Why So Many Screenings?

Because a Child Must Be Healthy, in order to Learn!

Required Head Start Health Screenings:

Physical
Vision
Hearing
Blood Pressure
Lead
Hemoglobin/Hematocrit
Oral Health Exam
Cleaning and Fluoride
Health History
Speech
Developmental
Growth Assessment
Behavioral Screening



******All Identified Health Needs Will Require Follow-Up******

Head Start will provide assistance to families to obtain follow-up services

November, 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Parent Meeting/Topics Safe Food Handling and Storage Parent's Choice Workshop Parenting Curriculum Stress Management				<i>L.B.J. & C. Head Start recognizes the importance of Fathers being involved in children's lives. Father activities are planned to encourage Fathers to visit the center and be a part of their child's education.</i>		
1 <i>Daylight Savings Time End</i>	2	3 Policy Council 6:00 p.m.	4	5	6 Grandparent Breakfast at all centers – (starts at 8 a.m. at center)	7
8	9	10 Education Advisory Meeting 1:00 p.m.	11 <i>Veteran's Day</i> Centers Closed HAFH Open	12 Combined Health Services/Parent, Family, and Community Engagement (PFCE) Advisory Meeting 1:00 p.m.	13 <i>90 Days-All 90-Day Health Screenings Completed</i>	14
15	16	17	18	19 T/TA Mtg. 1:00 p.m.	20	21
22	23	24	25 Family Meal at all centers – (starts at 11:00 a.m. at center)	26 <i>Thanksgiving Day</i> Centers Closed HAFH Closed	27 Centers Closed HAFH Closed	28
29	30					

**L.B.J. & C. Development Corporation
Code of Conduct Policy**

It is the policy of the L.B.J. & C. Development Corporation that a Code of Conduct is in effect. All staff, consultants, contractors, and volunteers are required to abide by the program's standards of conduct that:

1. Ensure staff, consultants, contractors, and volunteers implement positive strategies to support children's well-being and prevent and address challenging behavior;
2. Ensure staff, consultants, contractors, and volunteers do not maltreat or endanger the health or safety of children, at a minimum, that staff must not:
 - a. Use corporal punishment;
 - b. Use isolation to discipline a child;
 - c. Bind or tie a child to restrict movement or tape a child's mouth;
 - d. Use or withhold food as a punishment or reward;
 - e. Use toilet learning/training methods that punish, demean, or humiliate a child;
 - f. Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;
 - g. Physically abuse a child;
 - h. Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,
 - i. Use physical activity or outdoor time as a punishment or reward;
3. Ensure staff, consultants, contractors, and volunteers respect and promote the unique identity of each child and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, or family composition;
4. Require staff, consultants, contractors, and volunteers to comply with program confidentiality policies concerning personally identifiable information about children, families, and other staff members in accordance with subpart C of part 1303 of the Head Start Performance Standards and applicable federal, state, local, and tribal laws; and,
5. Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care. (Ensure that children are supervised by staff only.)
6. Involve all of those with relevant knowledge (including staff and parents) in decisions concerning a child.
7. Be familiar with the symptoms of child abuse and neglect and know and follow community procedures and state laws that protect children against abuse and neglect.
8. When one becomes aware of a practice or situation that endangers the health or safety of children, but has not been previously known to do so, inform those who can remedy the situation to keep other children from being similarly endangered.
9. Attempt to develop relationships of mutual trust with the families we serve.
10. Inform families of our program's philosophy, policies, and personnel qualifications and explain and involve them in our curriculum.
11. Inform the family of accidents involving their child or risk such as exposures to contagious disease that may result in infection and of events that might result in psychological damage.
12. Initiate appropriate actions against responsible persons who take, threaten to take, or fail to take a personnel action with respect to any employee or applicant because of any protected disclosure of information, as required by the Whistleblower Protection Act.
13. Do not permit or participate in research that could in any way hinder the education or development of the children in our program. Families are fully informed of any proposed research projects involving their children and shall have the opportunity to give or withhold consent.
14. When having a concern about the professional behavior of a co-worker, first let that person know of our concern and attempt to resolve the matter collegially. If this fails, the program's Chain of Command will be followed.
15. Assist the program in providing the highest quality of service and maintain loyalty to the program and uphold its reputation.
16. When disagreement with program policies, attempt to effect change through constructive action within the organization.
17. Speak or act on behalf of an organization only when authorized. Be careful to know when speaking for the organization versus expressing a personal judgment.
18. Staff members will be provided with work conditions that permit them to carry out their responsibilities. Staff members will also be provided with timely and non-threatening evaluation procedures, written grievance procedures, constructive feedback, and opportunities for continuing professional development advancement.
19. Firearms, weapons, drugs, and alcohol are prohibited on the L.B.J. & C. operational sites.
20. No employee is authorized to remove any property belonging to the L.B.J. & C. Development Corporation without obtaining prior approval from the Program Director.

December, 2020

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
Parent Meeting/Topics Childhood Obesity-Healthy Snack Choices for Children Parent's Choice Workshop Parenting Curriculum (continued)						<i>December is National Handwashing Awareness Month</i>
		1 Health & Safety Mtg. 10:00 a.m. Policy Council 6:00 p.m.	2	3	4	5
6	7	8 Board Meeting 6:00 p.m.	9	10	11	12
13	14	15	16	17	18 Family Meal at all centers – (starts at 11:00 a.m. at center)	19
20	21	22	23	24	25	26
All Centers, except HAFH & Pinewood Closed – December 21, 2020 – January 1, 2021						
27	28	29	30	31		
HAFH & Pinewood Closed – December 23, 2020 – January 1, 2021						

Parent Involvement/Volunteer

Parents, Guardians, and Caregivers are needed in all areas of the Head Start Program. Participation in the program is voluntary and not a condition of a child's enrollment.

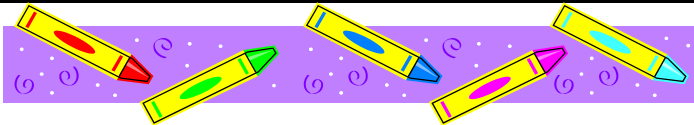
Custodial parents are asked to provide information concerning the non-custodial parent. Non-custodial parents are notified and invited to participate in their child's Head Start experiences.

Parents are encouraged to serve as officers of the Parent Committee, to serve as a Policy Council Representative or Alternate, and to share in the decision-making process about the nature and operation of the program. Parents/Guardians are invited to attend meetings and trainings. Suggestions are always welcome for consideration concerning the program. Parents are encouraged to observe in the classroom, volunteer in any area of the program operation, and apply for employment with Head Start when jobs become available.

Parents, Guardians, and Caregivers should help develop activities for the children's locally-designed curriculum and work as partners with the staff in the development and education of their child.

Every third person in the classroom should be a volunteer, so remember, L.B.J. & C. Head Start needs your assistance every day. Parents are welcome to visit the center anytime. Parents should visit the classroom of their choice and participate to the degree as desired. Parents should attend meetings and vote on decisions that are being made, and parents should attend parent workshops and learn more about current topics. L.B.J. & C. Head Start is committed to the development of compassionate partnerships in the parent and staff relationship, while providing the children with optimum growth and development.

L.B.J. & C. Head Start Program has a Fatherhood Initiative. Research has shown the importance of fathers/male role models in children's lives. For these reasons, extra efforts will be made to involve the father/male role model. There will be father/male role model meals, and we will ask father/male role models to read and play with the children at the center. We will also have family meals where the entire family is invited. We want you to know everyday is Parent's Day at Head Start. Please feel free to come and eat or spend the day.



*Parents and Volunteers are always needed
in the kitchen, in the classroom...in ALL Areas in
L.B.J. & C. Head Start!*

Rev. 6/17

L.B.J. & C. Head Start Family Style Meal Service

Family Style Meal Service will be used for breakfast, lunch and snack. Family Style Meal Service involves several steps, which all Head Start staff, volunteers and Foster Grandparents will comply with. To grow up healthy and strong and to ensure school readiness, children need to eat a balanced diet. L.B.J. & C. Head Start ensures that this nutritional Program contributes to the development and socialization of all enrolled preschool children by providing Family Style Meal Service for all children and staff, including volunteers and Foster Grandparents.

Family Style Meal Service Steps:

1. Staff will clean and disinfect tables then choose helpers to assist with setting the tables. Other Staff will provide transition activities and discuss health and safety issues for mealtime.
2. Helpers, volunteers and staff will then wash hands.
3. Children set the table - plates, bowls, napkins, forks/spoons.
4. Staff will wear food service gloves and place all food in smaller bowls to be placed on the tables. All other foods will be placed on the tables by the helpers. Helpers should place the milk on the tables. All food will be placed on the tables to ensure staff does not have to leave the table during mealtime. An adult will stay seated with children, even if it is just one child, until he/she has finished eating. No child will be left unattended during mealtime. To assure that children are safe during mealtime and snack time, staff is required to sit at the table with children anytime there is food of any kind on the table. If an emergency event occurs requiring one staff member to leave the table, the other staff member will immediately stand between the tables and constantly scan all children until the other staff person returns and sits down with his/her children.
5. Other Staff will finish with transition activities. Children will be called by groups to wash hands and go to the tables. Children are instructed to stand behind their chair until staff is ready to sit at the table with children.
6. Staff will serve themselves and then pass the food to the child. Children will be encouraged to fill their own plates, pass bowls and pour juice with staff supervision allowing that each child's developmental readiness may vary.
7. When the meal is finished, and all children at the table are finished eating, they will be directed to clear the table. Tubs should be set at a level the children can reach where they can rake the scraps into a tub. All children should assist in the cleaning up process.

Mealtime is an integral part of the child's experience in the Head Start Program. It is an excellent learning and socialization time, which includes interesting and pleasant table conversation centered on the children's interests, desires, and experiences. This is a good time to discuss nutrition and healthy eating habits. Instruction and examples of table manners and correct ways to serve and receive food will be directed to the children in a positive manner.

January, 2021

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
Parent Meeting/Topics Being Money Smart Parenting Curriculum (continued) Low-fat Nutrition on a Budget					1 <i>New Year's Day</i> <i>Centers Closed</i>	2
3	4 <i>Children Return</i>	5	6	7	8 Father/Male Role Breakfast at all centers – (starts at 8 a.m. at center)	9
10	11	12	13	14	15	16
17	18 <i>Martin Luther King Holiday</i> Centers Closed HAFH Open	19	20	21 Combined Health Services/Parent, Family, and Community Engagement (PFCE) Advisory Meeting 1:00 p.m.	22	23
24	25	26	27	28	29	30
31						

L. B. J. & C. Head Start Centers and Center Supervisors

Algood/Cookeville Head Start Center
180 West Church Street Algood, TN 38506
931-537-9057/**Bridget Murphy**

Bondcroft Head Start Center
9020 Crossville Hwy Sparta, TN 38583
931-935-8420/**Lisa Hernandez**

Brookside Head Start Center
87 John Locke Road McMinnville, TN 37110
931-668-7043/**Shannon Melton**

Byrdstown Head Start Center
1012 Beason Road Byrdstown, TN 38549
931-864-3575/**Pam Reagan**

Celina Head Start Center
306 Williamson Street Celina, TN 38551
931-243-2266/**Maggie Allen**

Clarkrange Head Start Center
1399 Franklin Loop Clarkrange, TN 38553
931-863-3255/**Debra Appel**

Crossville Head Start Center
1831 East First Street Crossville, TN 38555
931-484-4114/**Charlotte Potts**

Jamestown Head Start Center
629-A North Main Street Jamestown, TN 38556
931-879-7973/**Patricia Buck**

Home Away From Home Head Start
P.O. Box 425 Crossville, TN 38557
931-484-3238/**Lori Hedgecoth**

Red Boiling Springs Head Start Center
521 Lafayette Road RBS, TN 37150
615-699-2225/**Lavonda Hix**

Home Away From Home-Pinewood Head Start
P.O. Box 425 Crossville, TN 38557
931-787-1012/**Kathy Wilson**

Lafayette Head Start Center
2703 Hwy. 52E Lafayette, TN 37083
615-666-4392/**Kimberly Cox**

Livingston Head Start Center
480 Cross Avenue Livingston, TN 38570
931-823-1757/**Marietta Handy**

Midway Head Start Center
4764 Hennessee Bridge Road Rock Island, TN 38581
931-686-2098/**Amanda Talbert**

Monterey Head Start Center
705 East Commercial Avenue Monterey, TN 38574
931-839-3323/**Leslie Hill**

Gainesboro Head Start Center
745 S. Grundy Quarles Hwy. Gainesboro, TN 38562
931-268-3312/**Linda Cothorn**

Shiloh Head Start Center
839 P. Brewington Rd. Cookeville, TN 38501
931-268-2759/**Rhonda Hardy**

Smith County Head Start Center
201 Joy Alford Way Carthage, TN 37030
615-735-1868/**Angela West**

Smithville Head Start Center
118 Kimberly Lane Smithville, TN 37166
615-597-5168/**Cathy Shehane**

Sparta Head Start Center
430 North Spring Street Sparta, TN 38583
931-836-2615/**Melony Pryor**

South Cookeville Head Start
571 South Willow Ave. Cookeville, TN 38501
931-372-8021/**Amanda Ellis**

Education Services

All children need individualized, developmentally appropriate stimulation at every stage of growth if they are to have a chance of achieving their full educational potential. Children who fall significantly behind in language, and cognitive ability in early childhood are likely to remain behind for the rest of their lives.

The main goal of the education unit of the L.B.J. & C. Head Start Program is to provide a child development program that will help children gain the social competence, developmental skills, and confidence necessary to be prepared to succeed in their present environment and with later responsibilities in school and life. In order to accomplish this goal, our objectives are:

1. To provide children with a learning environment and the varied experiences, which will help them, develop socially, intellectually, physically, and emotionally in a manner appropriate to their age and stage of development towards the overall goal of social competence.
2. To provide a program of on-going assessment that will collect data, track the children's progress and accomplishments and assist in planning and implementing activities to meet their individual needs in the following areas: language development, literacy, mathematics, science, creative arts, social and emotional development, approaches toward learning and physical health and development.
3. To involve parents in the educational activities of the program to enhance their role as the principle influence on the child's education and development.
4. To assist parents to increase their knowledge, understanding, skills, and experience in child growth and development.
5. To partner with parents, assisting them in identifying and reinforcing experiences that occur in the home that can be utilized as educational activities and increase the child's skills in language development, literacy, mathematics, science, creative arts, social and emotional development, approaches toward learning and physical health and development.
6. To assist each child in improving his/her literacy, numeracy, language, cognitive, gross and fine motor skills, social behavior, emotional well being and positive attitudes towards learning.

Fancy Yogurt Parfaits

These parfaits are quick and simple to make, but feel very fancy! Kids will have fun layering together all of the ingredients. Parfaits are great for breakfast or snacks.

1 cup yogurt
1/2 cup fruit - fresh or frozen
1/8 cup crunchy cereal



Spoon half of the yogurt in a dish or glass and top with 1/2 of the fruit and 1/2 of the cereal. Repeat layers. Grab a spoon and enjoy this tasty treat!



February, 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
February is Heart Disease Awareness Month and Dental Awareness Month	1	2 Policy Council 6:00 p.m.	3	4	5	6
7	8	9 Board Meeting 6:00 p.m.	10	11	12 Sweetheart's Breakfast at all centers – (starts at 8 a.m. at center)	13
14	15 <i>Presidents' Day</i> Centers Closed HAFH Open	16	17	18 Education Advisory Meeting 1:00 p.m.	19	20
21	22	23	24	25	26	27
28				Parent Meeting/Topics National Oral Health Month Healthy Marriages Parenting Curriculum (continued)		

**L.B.J.& C. Head Start
Outdoor Play Procedure
(Licensure Requirements for Child Care Centers)**

An opportunity for outdoor play shall be extended to children of all ages who are in care more than three (3) daylight hours; provided, however, for agencies where outdoor play is prohibitive or dangerous, as determined in the discretion of the Department of Human Services, unoccupied indoor space providing fifty (50) square feet per child is acceptable.

Children shall be allowed to experience a variety of weather conditions:

1. Children shall be provided an opportunity for outdoor play when the temperature range, after adjustment for wind chill and heat index, is between thirty-two (32) degrees and ninety-five (95) degrees Fahrenheit and not raining;
2. Children shall be properly dressed and the length of time outside adjusted according to the conditions and the age of the children.
3. Children are not allowed to play on the playground while outside maintenance, such as lawn mowing or weed maintenance, is taking place.

The same adult:child ratio is applicable for the playground as in the Head Start classrooms. The adult:child ratio must be met at all times while the children are experiencing playtime on the playground.

Each classroom will have a Center and a Classroom Schedule posted in plain view showing times for arrival and departure times from the playground. Head counts of all children will be done prior to leaving the classroom, as they enter and exit the playground, and as they enter the classroom. The head counts must be matched to the daily child sign-in/sign-out logs.

Two-way radios will be used in centers that do not have playgrounds adjacent to the building in the event of an emergency, such as: Emergency Situation, Child Injury, Weather Evacuation, toileting or personal care needs of children or staff exist. Head Start Center support staff will immediately step in to meet the adult:child ratio guidelines. There will never be only one staff member outside with the children at any given time.

The traveling first aid kit will be accessible for each classroom of children as they go out onto the playground. The teaching staff will review the playground rules each day with the children before entering the playground.

The Head Start staff will:

1. Obtain the child sign-in/sign out book and conduct a roll call of the children prior to leaving the classroom.
2. Upon arrival at the playground another roll call of the children will be conducted.
3. One staff member (teacher) will constantly be moving around in an unpredictable pattern and continuously scan the entire playground.
4. The other staff member(s) (teacher assistant and support staff) will be moving around and engaging only in brief discussions with the children or other adults using brief eye contact.
5. Head Start Staff will regularly turn their body from side to side to ensure a full 360-degree range of vision.
6. Staff members will focus on playground rules, redirect play behavior, and note location of play on the playground.
7. Staff members will remain in the same interaction no longer than 10-15 seconds and move to a new location for continued surveillance.
8. Staff members will anticipate problems and hazards; continually scan equipment for hazards, scan the playground for trash and/or animal droppings and scan the wood/rubber mulch for kicked out areas of surfacing that does not allow for adequate surfacing depths.
9. Staff members will continually monitor the children's behavior and limit number of children on each piece of equipment.
10. Staff members will not engage in conversation with other staff members, parents or visitor while monitoring playground activities.
11. Head Start staff will refer back to the child sign-in/sign out book and conduct a roll call of the children, prior to leaving the playground.
12. Upon arrival in the classroom, another roll call of the children will be completed.
13. If a situation arises that warrants either staff member from their specific duties listed above, support staff members will be brought out to cover their duties until they can resume with their responsibilities.

L.B.J.& C. Head Start Corporal Punishment Policy

Corporal punishment

L.B.J.& C. staff are advised, trained and reminded on the use of corporal punishment, or isolation is prohibited in all Head Start facilities by staff, paid substitutes, volunteers/non-paid substitutes, or visitors.


Corporal Punishment is defined as the use of physical force as a disciplinary measure. This includes, but is not limited to spanking, slapping, pulling of hair, isolation, etc. Isolation refers to separating the child from normal association with classroom activities as a punishment measure. Isolation includes, but is not restricted to, confining the child in a small area, retaining the child in the classroom when other children go to play, or restricting the child from lunch with his/her classmates.

The Agency operates a Zero Tolerance of employee's inappropriate behavior toward the children we serve. Upon receipt of a report that an employee failed to follow the Supervision of Children procedure, used corporal punishment or a staff member has used isolation with a child, or inappropriate behavior on the part of the staff or if there are allegations or charges of inappropriate behavior by staff:

1. The Program Director will immediately place the employee on Administrative Leave with pay; until such time as an investigation suggests other action is appropriate or required.
2. The Program Director or designated staff member will, contact the Department of Children Services, State of Tennessee Head Start Collaboration Office and the Region IV Head Start Office.
3. The Program Director and the immediate supervisor will conduct an investigation including interviews, review of documentation, and other necessary action. This investigation will include notification to the employee of the suspicion and/or allegation with opportunity for explanation by the employee of circumstances and other appropriate information.
4. The suspension with pay will be converted to termination, if warranted due to official guilty charges, conviction, or incontrovertible evidence of misbehavior and/or violation of program policies established for the protection, safety, and welfare of children.

Should the Policy Council/NSSC Advisory Council not concur with the Program Director's recommendation, minutes of the proceedings shall be forwarded to the Regional Office for instruction and/or guidance.

March, 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<i>L.B.J. & C Head Start will observe the Spring Break Schedule of the county public school system. Please note dates as marked.</i>				Parent Meeting/Topics Transition to Kindergarten (Guest Speaker from Public School System) Head Start Awareness/Recruitment Event Parenting Curriculum (continued) Substance Abuse		
March is National Nutrition Month	1 Health & Safety Mtg. 10:00 a.m.	2 Policy Council 6:00 p.m.	3	4 T/TA Mtg. 1:00 p.m.	5	6
7	8	9	10	11 Combined Health Services/Parent, Family, and Community Engagement (PFCE) Advisory Meeting 1:00 p.m.	12 Father/Male Role Breakfast at all centers – (starts at 8 a.m. at center)	13
14 Daylight Savings Time	15	16	17	18	19	20
Overton, Putnam, Warren, & Jackson Counties Closed for Spring Break						
21	22	23	24	25	26	27
Cumberland, Fentress, & White Counties Closed for Spring Break						
28	29	30	31			
Clay, DeKalb, Smith, & Pickett Counties Closed for Spring Break						

§1303.23 Parental rights concerning the Protections for the Privacy of Child Records

(a) Inspect record.

- (1) A parent has the right to inspect child records.
- (2) If the parent requests to inspect child records, the program must make the child records available within a reasonable time, but no more than 45 days after receipt of request.
- (3) If a program maintains child records that contain information on more than one child, the program must ensure the parent only inspects information that pertains to the parent's child.
- (4) The program shall not destroy a child record with an outstanding request to inspect and review the record under this section.

(b) Amend record.

- (1) A parent has the right to ask the program to amend information in the child record that the parent believes is inaccurate, misleading, or violates the child's privacy.
- (2) The program must consider the parent's request and, if the request is denied, render a written decision to the parent within a reasonable time that informs the parent of the right to a hearing.

(c) Hearing.

- (1) If the parent requests a hearing to challenge information in the child record, the program must schedule a hearing within a reasonable time, notify the parent, in advance, about the hearing, and ensure the person who conducts the hearing does not have a direct interest in its outcome.
- (2) The program must ensure the hearing affords the parent a full and fair opportunity to present evidence relevant to the issues.
- (3) If the program determines from evidence presented at the hearing that the information in the child records is inaccurate, misleading, or violates the child's privacy, the program must either amend or remove the information and notify the parent in writing.
- (4) If the program determines from evidence presented at the hearing that information in the child records is accurate, does not mislead, or otherwise does not violate the child's privacy, the program must inform the parent of the right to place a statement in the child records that either comments on the contested information or that states why the parent disagrees with the program's decision, or both.

(d) Right to copy of record. The program must provide a parent, free of charge, an initial copy of child records disclosed to third parties with parental consent and, upon parent request, an initial copy of child records disclosed to third parties, unless the disclosure was for a court that ordered neither the subpoena, its contents, nor the information furnished in response be disclosed.

(e) Right to inspect written agreements. A parent has the right to review any written agreements with third parties.

L.B.J. & C. Head Start Child Abuse Facts and Laws

Child Abuse and Neglect Definition

Child abuse and neglect occurs when a child is mistreated, resulting in injury or risk of harm. Abuse can be physical, verbal, emotional or sexual.

Physical Abuse is defined as non-accidental physical trauma or injury inflicted by a parent or caretaker on a child. It also includes a parent's or a caretaker's failure to protect a child from another person who perpetrated physical abuse on a child. In its most severe form, physical abuse is likely to cause great bodily harm or death.

Physical Neglect is defined as the failure to provide for a child's physical survival needs to the extent that there is harm or risk of harm to the child's health or safety. This may include, but is not limited to abandonment, lack of supervision, life endangering physical hygiene, lack of adequate nutrition that places the child below the normal growth curve, lack of shelter, lack of medical or dental that results in health threatening conditions, and the inability to meet basic clothing needs of a child. In its most severe form, physical neglect may result in great bodily harm or death.

Sexual Abuse includes penetration or external touching of a child's intimate parts, oral sex with a child, indecent exposure or any other sexual act performed in a child's presence for sexual gratification, sexual use of a child for prostitution, and the manufacturing of child pornography. Child sexual abuse is also the willful failure of the parent or the child's caretaker to make a reasonable effort to stop child sexual abuse by another person.

Emotional Abuse includes verbal assaults, ignoring and indifference or constant family conflict. If a child is degraded enough, the child will begin to live up to the image communicated by the abusing parent or caretaker.

Child abuse can happen anywhere; in poor, middle-class or well-to-do homes, in rural or urban areas.

Reporting Laws

According to Tennessee law, all persons (including doctors, mental health professionals, child care providers, dentists, family members and friends) must report suspected cases of child abuse or neglect. Failure to report child abuse or neglect is a violation of the law. If you believe a child has been abused or neglected, call:

- Your local Children's Services office
- Your local Juvenile Court
- Local Sheriff's office or Police Department

Tennessee has 24-hour availability for reporting child abuse or neglect. The appropriate form will be filed at the Central Office when child abuse or neglect is reported.

Violations - Penalties

- a) Any person required to report known or suspected child abuse who knowingly and willfully fails to do so, or who knowingly and willfully prevents another person from doing so, is guilty of a misdemeanor.
- b) Any person who knowingly and willfully makes public or discloses any confidential information contained in the abuse registry or in the records of any child abuse case, is guilty of a misdemeanor.

April, 2021

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
Parent Meeting/Topics Child Abuse Awareness and Prevention Volunteer Recognition/Picnic Graduation (Last Day for Center)				1	2 <i>Good Friday</i> Centers Closed HAFH Closed	3
	Clay, DeKalb, Smith, & Pickett Counties Closed for Spring Break					
4	5	6 Policy Council 6:00 p.m.	7	8	9	10
	Macon County Closed for Spring Break					
11	12	13 Board Meeting 6:00 p.m.	14	15	16	17
18	19	20	21	22 Family Breakfast at all centers – (starts at 8 a.m. at center)	23	24
25	26	27	28	29	30	<i>April is Child Abuse Prevention Awareness Month</i>

Why Head Start Home Visits and Parent Conferences?

In addition to the two required home visits, teaching staff in all Head Start Centers conduct at least two required staff-parent conferences a year and more if needed to increase the knowledge and understanding of both staff and parents of the educational and developmental progress and activities of children in the program.

Home visits and parent conferences allow the teaching staff and parents to better understand the child's unique strengths and needs and provide an opportunity for parents and staff to discuss childcare and early education issues.

Home visits and parent conferences are scheduled by the teaching staff with the consent of the parent at a time that is convenient to both. They are vital to the success of the child's development.



Home Visits and Parent Conferences

- Give parents an opportunity to become involved in the development of the program's curriculum and approach to child development and education by assisting staff in writing individual child plans for their child, setting goals, and planning activities for home and the classroom to meet identified needs.
- Give parents opportunities to increase their child observation skills and share their knowledge of the child's strengths and needs through various assessments completed by staff and parents/guardians/caregivers.
- Help to ensure a smooth transition from home to a more structured environment for the child, as well as the whole family.
- Give the child and parents an opportunity to become familiar with the teaching staff that they will be in the classroom with prior to the child attending the program.
- Give the child an opportunity to observe the interactions between parents and teaching staff and to build on this visual and verbal display of trust for each other.

Your child's teacher and teacher assistant will be contacting you soon to set up a convenient time and location for your visit. Thank you so much for your cooperation and time.

YOUR CHILD'S SAFETY IS #1 WITH US.

Transfer of Children Policy

This procedure will be followed in transferring children between parents and classroom staff on dropping children off in the mornings and picking children up in the afternoons are:

1. The parent will deliver the child to the Head Start staff upon arrival in the morning.
2. The parent will sign the child in on the sign-in book provided by Head Start and denote their name and the time.
3. The parent will come to the classroom in the afternoon when picking-up their child.
4. The parent will sign the child out on the book that the child was signed-in on upon arrival in the morning denoting their name and the time.
5. The person signing the child out becomes responsible for the child at the time the book is signed.

This procedure is for your benefit as well as the children's.

*In order to help ensure the safety of the children, please inform staff in person **IMMEDIATELY** of any changes in phone numbers, authorized release persons, address, work location, phone numbers, etc.*

YOUR RIGHTS UNDER SECTION 504 AND THE AMERICANS WITH DISABILITIES ACT

The Office for Civil Rights (OCR) within the U.S. Department of Health and Human Services (DHHS) is responsible for enforcing the nondiscrimination requirements of Section 504 of the Rehabilitation Act of 1973, and Title II of the Americans with Disabilities Act (ADA) of 1990, involving health care and human service providers and institutions.

What is Prohibited Under Section 504 and the ADA?

Both Section 504 and the ADA prohibit covered entities from discriminating against persons with disabilities in the provision of benefits or services or the conduct of programs or activities on the basis of their disability. Section 504 applies to programs or activities that receive Federal financial assistance. Title II of the ADA covers all of the services, programs, and activities conducted by public entities (state and local governments, departments, agencies, etc.), including licensing.

Who is Protected Under Section 504 and the ADA?

Section 504 and the ADA protect **qualified individuals with disabilities**. An **individual with a disability** is a person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or is regarded as having such an impairment. **Major life activities** means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. Under Section 504 and the ADA, a person is a **qualified individual with a disability** if he or she meets the essential requirements for receipt of services or benefits, or participation in the programs or activities of a covered entity. The question of whether a particular condition is a disability within the meaning of Section 504 and the ADA is determined on a case-by-case basis.

May, 2021

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
	<i>May is Asthma & Allergy Awareness Month and Mental Health Month</i>					1
2	3 Education Advisory Meeting 1:00 p.m.	4 Policy Council 6:00 p.m.	5 <i>Cinco de Mayo</i>	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31 <i>Memorial Day</i> HAFH Closed					

L.B.J. & C. Development Corporation Confidentiality Policy

All Program files and records (i.e. financial, programmatic, personnel, children/families, and operations) are confidential and the property of L.B.J. & C.

Children and Family Information

In order to provide individual quality services to families, the staff must gather very personal, sensitive information concerning almost every facet of the family's lifestyle and habits. The information collected includes not only current information, but historical information as well.

L.B.J. & C. staff must maintain the confidentiality of all records and information pertaining to the children and/or family. The program will provide locked file cabinets in each center and classroom for child/family records. Only those staff designated will have access to the keys to the files, and all persons examining the records will sign and date the Review of Confidential Information section of each record. Parents/legal guardians have the right to examine any records concerning their child/family.

Maintaining confidentiality pertains not only to written information but also to verbal disclosure of any information concerning children/families. Shared information among staff regarding children/families will be disclosed on an as-needed basis only.

All records concerning children/families will be destroyed in accordance with funding source's regulations.

Staff Information

Confidentiality also includes staff information and staff records. Staff information and records are held confidential as requirements direct.

Staff information is not available as common knowledge and is held confidential, as policies require under the Program Director's authority.

Program procedures – applicable confidentiality provisions

Due to serving children who are referred to, or found eligible for services under, IDEA, the program will comply with the applicable confidentiality provisions in Part B or Part C of IDEA to protect the Personally Identifiable Information (PII) in records of those children, and, therefore, the provisions in this subpart do not apply to those children.

Disclosures With, and Without, Parental Consent

All outside requests for files and records will be forwarded immediately to the Program Director. The Program Director will act upon requests for children/family information only after receipt of written parental consent.

(a) Disclosure with parental consent. Subject to exceptions in paragraphs (b) and (c) of this section, the procedures to protect PII must require the program to obtain a parent's written consent before the program may disclose such PII from child records.

The parent's written consent will specify what records may be disclosed, explain why the records will be disclosed, and identify the party or class of parties to whom the records may be disclosed. The written consent must be signed and dated.

"Signed and dated written consent" under this part may include a record and signature in electronic form that:

- ◆ Identifies and authenticates a particular person as the source of the electronic consent; and,
- ◆ Indicates such person's approval of the information.

The program will explain to the parent that the granting of consent is voluntary on the part of the parent and may be revoked at any time. If a parent revokes consent, that revocation is not retroactive and therefore it does not apply to an action that occurred before the consent was revoked.

(b) Disclosure without parent consent but with parental notice and opportunity to refuse. The program may disclose such PII from child records without parent consent if the program notifies the parent about the disclosure, provides the parent, upon the parent's request, a copy of the PII from child records to be disclosed in advance, and gives the parent an opportunity to challenge and refuse disclosure of the information in the records, before the program forwards the records to officials at the program, school, or school district in which the child seeks or intends to enroll or where the child is already enrolled so long as the disclosure is related to the child's enrollment and transfer.

(c) Disclosure without parental consent. The program may disclose such PII from child records without parental consent to:

1. Officials within the program or acting for the program, such as contractors and subrecipients, if the official provides services for which the program would otherwise use employees, the program determines it is necessary for Head Start services, and the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement;

2. Officials within the program, acting for the program, or from a federal or state entity, in connection with an audit or evaluation of education or child development programs, or for enforcement of or compliance with federal legal requirements of the program; provided the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement, including the destruction of PII when no longer needed for the purpose of the disclosure, except the disclosure is specifically authorized by federal law or by the responsible HHS official;
3. Officials within the program, acting for the program, or from a federal or state entity, to conduct a study to improve child and family outcomes, including improving the quality of programs, for, or on behalf of, the program, provided the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement, including the destruction of the PII when no longer needed for the purpose of the disclosure;
4. Appropriate parties in order to address a disaster, health or safety emergency during the period of the emergency, or a serious health and safety risk such as a serious food allergy, if the program determines that disclosing the PII from child records is necessary to protect the health or safety of children or other persons;
5. Comply with a judicial order or lawfully issued subpoena, provided the program makes a reasonable effort to notify the parent about all such subpoenas and court orders in advance of the compliance therewith, unless:
 - a. A court has ordered that neither the subpoena, its contents, nor the information provided in response is disclosed;
 - b. The disclosure is in compliance with an ex parte court order obtained by the United States Attorney General (or designee not lower than an Assistant Attorney General) concerning investigations or prosecutions of an offense listed in 18 U.S.C. 2332b(g)(5)(B) or an act of domestic or international terrorism as defined in 18 U.S.C. 2331.
 - c. A parent is a party to a court proceeding directly involving child abuse and neglect (as defined in section 3 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101) or dependency matters, and the order is issued in the context of that proceeding, additional notice to the parent by the program is not required; or,
 - d. A program initiates legal action against a parent or a parent initiates legal action against a program, then a program may disclose to the court, also without a court order or subpoena, the child records relevant for the program to act as plaintiff or defendant.
6. The Secretary of Agriculture or an authorized representative from the Food and Nutrition Service to conduct program monitoring, evaluations, and performance measurements for the Child and Adult Care Food Program under the Richard B. Russell National School Lunch Act or the Child Nutrition Act of 1966, if the results will be reported in an aggregate form that does not identify any individual: provided, that any data collected must be protected in a manner that will not permit the personal identification of students and their parents by other than the authorized representatives of the Secretary of Agriculture and any PII must be destroyed when the data are no longer needed for program monitoring, evaluations, and performance measurements;
7. A caseworker or other representative from a state, local, or tribal child welfare agency, who has the right to access a case plan for a child who is in foster care placement, when such agency is legally responsible for the child's care and protections, under state or tribal law, if the agency agrees in writing to protect PII, to use information from the child's case plan for specific purposes intended of addressing the child's needs, and to destroy information that is no longer needed for those purposes; and,
8. Appropriate parties in order to address suspected or known child maltreatment and is consistent with applicable federal, state, local, and tribal laws on reporting child abuse and neglect.

(d) Written agreements. If the program establishes a written agreement with a third party, the program will annually review, and if necessary, update the agreement to protect PII. If the third party violates the agreement, then the program may:

1. Provide the third party an opportunity to self-correct; or,
2. Prohibit the third party from access to records for a set period of time as established by the Board of Directors and Policy Council.

(e) Annual notice. The program will notify parents of their rights in writing annually. The notice will include a description of the types of PII that may be disclosed, to whom the PII may be disclosed, and what may constitute a necessary reason for the disclosure without parental consent as described in paragraph (c) of this section.

(f) Limit on disclosing PII. The program will only disclose the information that is deemed necessary for the purpose of the disclosure.

Outside Requests

To ensure timely disposition of the request, the request should be provided in writing, and include the following information:

- ◆ name of the agency and its representative or the individual, making the request,
- ◆ telephone number of the agency representative or the individual making the request,
- ◆ brief detailed description of why the files or records are being requested, and
- ◆ dated and signed.

After evaluating the request, appropriate action will be taken. The Program Director or his/her designee is the only staff authorized to release files and records outside the agency.

Business affairs and the operation of the Agency should not be discussed with anyone outside the organization except when required in the normal course of business. Access to sensitive information and operating procedures will be handled on a need-to-know basis and given as directed by the Program Director, only.

Any employee dealing with confidential Agency information is responsible for its security. The cost of Agency products and services is considered sensitive information and should be handled as confidential information.

Flu Information



The Flu:

A Guide for Parents



Influenza (also known as flu) is a contagious respiratory illness caused by influenza viruses that infect the nose, throat and lungs. Flu is different from a cold, and usually comes on suddenly. Each year flu viruses cause millions of illnesses, hundreds of thousands of hospital stays and thousands or tens of thousands of deaths in the United States.

Flu can be very dangerous for children. CDC estimates that between 6,000 and 26,000 children younger than 5 years have been hospitalized each year in the United States because of influenza. The flu vaccine is safe and helps protect children from flu.

What parents should know

How serious is flu?

While flu illness can vary from mild to severe, children often need medical care because of flu. Children younger than 5 years and children of any age with certain long-term health problems are at high risk of flu complications like pneumonia, bronchitis, sinus and ear infections. Some health problems that are known to make children more vulnerable to flu include asthma, diabetes and disorders of the brain or nervous system.

How does flu spread?

Flu viruses are thought to spread mainly by droplets made when someone with flu coughs, sneezes or talks. These droplets can land in the mouths or noses of people nearby. A person also can get flu by touching something that has flu virus on it and then touching their mouth, eyes, or nose.

What are flu symptoms?

Flu symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, feeling tired and sometimes vomiting and diarrhea (more common in children than adults). Some people with the flu will not have a fever.



Protect your child

How can I protect my child from flu?

The first and best way to protect against flu is to get a yearly flu vaccine for yourself and your child.

- Flu vaccination is recommended for everyone 6 months and older every year. Flu shots and nasal spray flu vaccines are both options for vaccination.
- It's especially important that young children and children with certain long-term health problems get vaccinated.
- Caregivers of children at high risk of flu complications should get a flu vaccine. (Babies younger than 6 months are at high risk for serious flu complications, but too young to get a flu vaccine.)
- Pregnant women should get a flu vaccine to protect themselves and their baby from flu. Research shows that flu vaccination protects the baby from flu for several months after birth.
- Flu viruses are constantly changing and so flu vaccines are updated often to protect against the flu viruses that research indicates are most likely to cause illness during the upcoming flu season.

Is flu vaccine safe?

Flu vaccines are made using strict safety and production measures. Millions of people have safely received flu vaccines for decades. Flu shots and nasal spray flu vaccines are both options for vaccination. Different types of flu vaccines are licensed for different ages. Each person should get one that is appropriate for their age. CDC and the American Academy of Pediatrics recommend an annual flu vaccine for all children 6 months and older.

What are the benefits of getting a flu vaccine?

- A flu vaccine can keep you and your child from getting sick. When vaccine viruses and circulating viruses are matched, flu vaccination has been shown to reduce the risk of getting sick with flu by about half.
- Flu vaccines can keep your child from being hospitalized from flu. One recent study showed that flu vaccine reduced children's risk of flu-related pediatric intensive care unit admission by 74%.

- Flu vaccine can prevent your child from dying from flu. A study using data from recent flu seasons found that flu vaccine reduced the risk of flu-associated death by half among children with high risk medical conditions and by nearly two-thirds among children without medical conditions.
- Flu vaccination also may make your illness milder if you do get sick.
- Getting yourself and your child vaccinated also can protect others who may be more vulnerable to serious flu illness, like babies and young children, older people, and people with certain long-term health problems.

What are some other ways I can protect my child against flu?

In addition to getting a flu vaccine, you and your child should take everyday actions to help prevent the spread of germs.

Stay away from people who are sick as much as possible to keep from getting sick yourself. If you or your child are sick, avoid others as much as possible to keep from infecting them. Also, remember to regularly cover your coughs and sneezes, wash your hands often, avoid touching your eyes, nose and mouth, and clean surfaces that may be contaminated with flu viruses. These everyday actions can help reduce your chances of getting sick and prevent the spread of germs to others if you are sick. However, a yearly flu vaccine is the best way to prevent flu illness.

If your child is sick

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child's illness.

Make sure your child gets plenty of rest and drinks enough fluids.

If your child is 5 years or older and does not have a long-term health problem and gets flu symptoms, including a fever and/or cough, consult your doctor as needed.

Children younger than 5 years of age – especially those younger than 2 years – and children with certain long-term health problems (including asthma, diabetes and disorders of the brain or nervous system), are at high risk of serious flu complications. Call your doctor or take your child to the doctor right away if they develop flu symptoms.

What if my child seems very sick?

Even healthy children can get very sick from flu. If your child is experiencing the following emergency warning signs, you should go to the emergency room:

- Fast breathing or trouble breathing
- Bluish lips or face

- Ribs pulling in with each breath
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children less than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions



This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Is there a medicine to treat flu?

Yes. Antiviral drugs are prescription medicines that can be used to treat flu illness. They can shorten your illness and make it milder, and they can prevent serious complications that could result in a hospital stay. Antivirals work best when started during the first 2 days of illness. Antiviral drugs are recommended to treat flu in people who are very sick (for example, people who are in the hospital) or people who are at high risk of serious flu complications who get flu symptoms. Antivirals can be given to children and pregnant women.

How long can a sick person spread flu to others?

People with flu may be able to infect others from 1 day before getting sick to up to 5 to 7 days after. Severely ill people or young children may be able to spread the flu longer, especially if they still have symptoms.

Can my child go to school, day care, or camp if he or she is sick?

No. Your child should stay home to rest and to avoid spreading flu to other children or caregivers.

When can my child go back to school after having flu?

Keep your child home from school, day care, or camp for at least 24 hours after their fever is gone. (The fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F (37.8°C)* or higher.

*Many authorities use either 100 (37.8 degrees Celsius) or 100.4 F (38.0 degrees Celsius) as a cut-off for fever; but this number can vary depending on factors such as the method of measurement and the age of the person.

March 2019 | 1-800-232-7899

For more information, visit www.cdc.gov/flu/protect/children.htm or call 800-CDC-INFO



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



L.B.J. & C. Head Start

A Limited Purpose Agency Serving
Clay, Cumberland, Dekalb, Fentress, Jackson, Macon, Overton,
Pickett, Putnam, Smith, Warren, and White Counties

1150 Chocolate Drive • Cookeville, Tennessee 38501 • Telephone: (931) 528-3361 • FAX: (931) 528-2409 • www.lbjc.org

MEMO

To: Head Start Parent(s)/Guardian(s)
From: Penny Meadows, Interim Head Start Director
Date: July 1, 2020
Subject: Department of Human Services Meal Guidelines

The Department of Human Services has issued a new set of income guidelines by which your child's eligibility for free and reduced price meals must be re-determined. Please assist us to comply with the requirements of the Child and Adult Care Food Program.

Public Law 110-134 makes any child enrolled in Head Start automatically eligible for free meals without further application or eligibility determination thru the Child and Adult Care Feeding Program.

Income Eligibility Guidelines for Free and Reduced Price Meals Effective July 1, 2020 until June 30, 2021						
Household Size	Reduced Meals			Free Meals		
	Yearly	Monthly	Weekly	Yearly	Monthly	Weekly
1	23,606	1,968	454	16,588	1,383	319
2	31,891	2,658	614	22,412	1,868	431
3	40,182	3,349	773	28,236	2,353	543
4	48,470	4,040	933	34,060	2,839	655
5	56,758	4,730	1,092	39,884	3,324	767
6	65,046	5,421	1,251	45,708	3,809	879
7	73,334	6,112	1,411	51,532	4,295	991
8	81,622	6,802	1,570	57,356	4,780	1,103
***	8,288	691	160	5,824	486	112

*** For each additional family member add

Z:\Operational Manual\Nutrition\2020-2021 CACFP Parent Letter

AN EQUAL OPPORTUNITY AGENCY

Funded by the U.S. Department of Health and Human Services, Administration for Children and Families
L.B.J. & C. Development Corporation is an Equal Opportunity Agency. The agency does not discriminate on any non-merit reasons
such as race, color, religion, sex, national origin, age, marital status, political affiliation, sexual preference, or qualified individuals
with mental and physical handicaps. The 504/ADA/Title VI Contact Person: Barbara Pendergrass (931) 528-3361

Child Health Checks/Identified Illness or Injury

A Child Health Check will be conducted daily. While wearing vinyl gloves, the staff member will look for evidence of illness or injury and report it to the parent/caregiver before accepting the child in the center. The parent/caregiver will be discretely informed of any concerns, head lice, nits, illness or injury. Children's health information is confidential and will not be discussed in the presence of others. The child will not be allowed into the center if the illness is significant to warrant contact with other children. Children will be given a washable ink stamp on their hand once they pass the health check. Education staff will check for the stamp on hand as child enters classroom to ensure health check was performed. If the child hasn't obtained stamp, education staff will perform health check and stamp child's hand.

Any child with the following symptoms during the health check or throughout the day will be removed from the group until the parent is contacted and/or the health issue is resolved.

1. **Fever** – Axillary temperature 99.4 degrees F or more; oral temperature of 100.4 degrees F or more.
2. **Respiratory symptoms** – Severe coughing, difficult or rapid breathing.
3. **Vomiting** – Two or more incidents in a day.
4. **Diarrhea** – Two or more incidents in a day or blood in stool.
5. **Eye drainage** – Thick mucus, pus, or pink eye.
6. **Body rash with fever or unexplained rash** – Red or purple rash, welts that appear quickly, open sores, blisters, and burns.
7. **Unusual appearance/behavior** – The child acts or looks different than usual; appears unusually tired; lacks appetite; difficult to awaken; change in color of skin, eyes, stool or urine; confused; sore throat with fever; and swollen glands.
8. **Obvious severe pain**
9. **Chicken pox**
10. **Live Lice or Nits**

If during the day a child has been determined to be ill, the Family engagement Staff will be notified immediately and take the child to the Family Engagement Staff. If the Family Engagement Staff is not present, the Medical/Dental emergency plan will be followed.

The parent will be notified of the child's illness. The parent will pick the child up as soon as possible. If the parent cannot be located immediately, the child will be isolated and cared for according to the Medical/Dental emergency plan until the parent can be notified to pick up the child. The child will be taken home by staff whenever approved, and necessary. A child must be fever-free without the use of fever-reducing medicine for 24 hours before returning to the Head Start Center.

In the event of a serious illness Head Start will not delay seeking emergency treatment due to a delay in making contact with the parent.

VACCINE INFORMATION STATEMENT

Influenza (Flu) Vaccine (Inactivated or Recombinant): *What you need to know*

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Influenza vaccine can prevent **influenza (flu)**.

Flu is a contagious disease that spreads around the United States every year, usually between October and May. Anyone can get the flu, but it is more dangerous for some people. Infants and young children, people 65 years of age and older, pregnant women, and people with certain health conditions or a weakened immune system are at greatest risk of flu complications.

Pneumonia, bronchitis, sinus infections and ear infections are examples of flu-related complications. If you have a medical condition, such as heart disease, cancer or diabetes, flu can make it worse.

Flu can cause fever and chills, sore throat, muscle aches, fatigue, cough, headache, and runny or stuffy nose. Some people may have vomiting and diarrhea, though this is more common in children than adults.

Each year **thousands of people in the United States die from flu**, and many more are hospitalized. Flu vaccine prevents millions of illnesses and flu-related visits to the doctor each year.

2 Influenza vaccine

CDC recommends everyone 6 months of age and older get vaccinated every flu season. **Children 6 months through 8 years of age** may need 2 doses during a single flu season. **Everyone else** needs only 1 dose each flu season.

It takes about 2 weeks for protection to develop after vaccination.

There are many flu viruses, and they are always changing. Each year a new flu vaccine is made to protect against three or four viruses that are likely to cause disease in the upcoming flu season. Even when the vaccine doesn't exactly match these viruses, it may still provide some protection.

Influenza vaccine **does not cause flu**.

Influenza vaccine may be given at the same time as other vaccines.

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:

- Has had an allergic reaction after a previous dose of influenza vaccine, or has any severe, life-threatening allergies.
- Has ever had Guillain-Barré Syndrome (also called GBS).

In some cases, your health care provider may decide to postpone influenza vaccination to a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting influenza vaccine.

Your health care provider can give you more information.

4 Risks of a vaccine reaction

- Soreness, redness, and swelling where shot is given, fever, muscle aches, and headache can happen after influenza vaccine.
- There may be a very small increased risk of Guillain-Barré Syndrome (GBS) after inactivated influenza vaccine (the flu shot).

Young children who get the flu shot along with pneumococcal vaccine (PCV13), and/or DTaP vaccine at the same time might be slightly more likely to have a seizure caused by fever. Tell your health care provider if a child who is getting flu vaccine has ever had a seizure.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

5 What if there is a serious problem?

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call 9-1-1 and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call 1-800-822-7967. *VAERS is only for reporting reactions, and VAERS staff do not give medical advice.*

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Visit the VICP website at www.hrsa.gov/vaccinecompensation or call 1-800-338-2382 to learn about the program and about filing a claim. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's www.cdc.gov/flu



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Vaccine Information Statement (Interim)
**Inactivated Influenza
Vaccine**



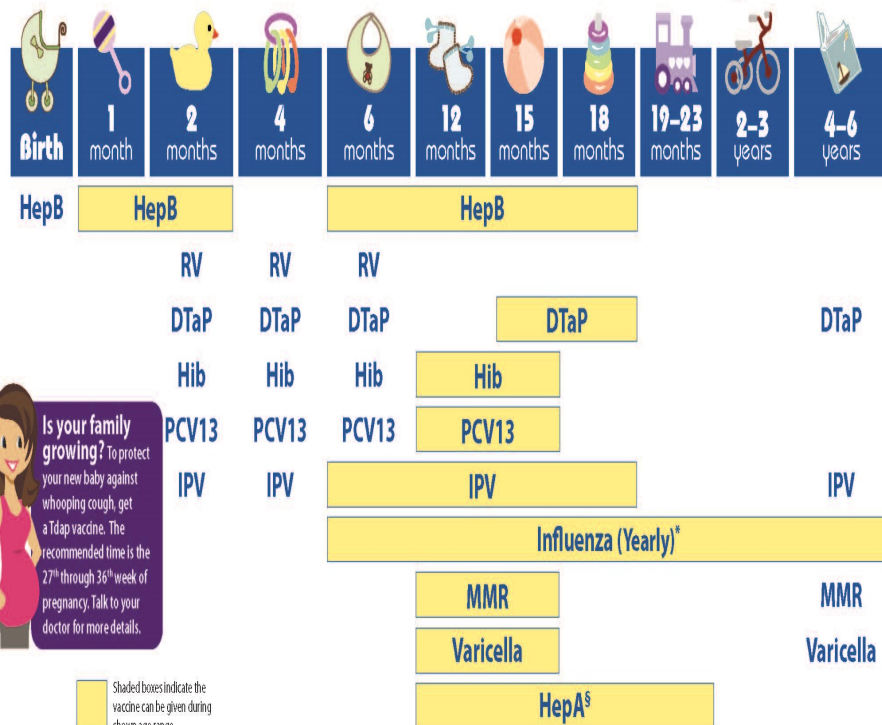
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8/15/2019 | 42 U.S.C. § 300aa-26

Your Child and Her/His Home Learning Environment

Research findings consistently reveal that the earliest years (pre-school years) of a person's life are the most significant. These are the years that are spent in the home. These formative years, therefore, are so important that you as a parent should be intensively sensitive to your role in the home learning environment. You were, are, and will be the most important persons in the formation of your child's life. Make the most of it. Provide a home environment that will make your child be the best he/she can.

2020 Recommended Immunizations for Children from Birth Through 6 Years Old



Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pink eye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR** vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV13 vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Sometimes rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.

** MMR combines protection against measles, mumps, and rubella.

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For more information, call toll-free
1-800-CDC-INFO (1-800-232-4636)
or visit
www.cdc.gov/vaccines/parents



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Learning Opportunities For Head Start Families

Literacy Programs available for Families:

Father/Role Model Reading – In this program, a book and homework folder are sent home with the child on a weekly basis. Fathers or Male Role Models in the child’s life are encouraged to read a book to the child and draw a picture together about the story or to make up one together. The picture is then shown to the group to help promote literacy in the classroom as well as bolster the child’s self-esteem and pride in his/her role model.

PACT-Parent and Child Time – In this program, the parent and child participate in a child-initiated activity in the classroom. The child selects the activity, and the parent participates in the activity with the child.

Family Reads – In this program, any family member may come to the center and read stories in their home language to the children in a group or one-on-one. This activity can be recorded on the lesson plan.

Traveling Book Bag – This program provides an opportunity for the parent and child to bond at home utilizing a book bag that is sent home with the child. A book and associated activity are sent home with children on a monthly basis to give parents an opportunity to spend quality one-on-one time with their child, along with promoting family literacy.

Parent’s Choice Workshops:

Areas of interest expressed by parents are ranked according to highest choice and resources are recruited to provide the necessary skills needed to present workshops. These workshops are scheduled in a timely manner to meet parents’ needs.

Head Start Volunteer Opportunities:

Parents, family members, friends, and the community at large can benefit from the many volunteer opportunities available in the Head Start Program. The hours of service and type of service is recorded and kept on file. In the event that a person needs work experience references, we have their volunteer record to validate those experiences. Over half of our present staff have been Head Start parents and served as volunteers prior to their employment.

Adult Basic Education/GED:

Classes are available in each county. Look for the T&TA Board in your center for contact information.

Tennessee Technology Centers (formerly Vocational School):

Information on classes in Vocational Schools will be provided by the Training and Technical Committee member in each Head Start Center.

College Classes:

Family members of enrolled Head Start children wishing to attend college will be supported by the Training and Technical Assistance Program. Contact the T&TA committee member at your local Head Start center for assistance in filing for financial aid or for any other information needed.



The Story of Dolly’s Imagination Library and how you can enroll your child



In 1996, Dolly Parton launched an exciting new effort to benefit the children of her home county in east Tennessee. Dolly wanted to foster a love of reading among her county’s preschool children and their families. She wanted children to be excited about books and to feel the magic that books can create. Moreover, she could insure that every child would have books, regardless of their family’s income.

So she decided to mail a brand new, age-appropriate book each month to every child under 5 in Sevier County. With the arrival of every child’s first book, the classic *The Little Engine That Could*TM, every child could now experience the joy of finding their very own book in their mailbox. These moments continue each month until the child turns 5—and in their very last month in the program they receive “*Look Out Kindergarten, Here I Come.*”

To find out more about the program and enroll your child, log onto www.dollysimaginationlibrary.com/firsttime.php You can also contact your local library or Head Start Family Engagement staff.



Training and Development Services

The goal of this Unit is to develop, improve, and maintain the quality of professional and paraprofessional staff performance at all levels and within all Units of L.B.J. & C. Head Start program. Head Start encourages and supports the staff and families we serve in utilizing the career development opportunities within our program.

Services include:

1. Implementing a Training & Technical Assistance (T&TA) Committee with a representative at each center to assist staff and Head Start family members;
2. Refunding the GED test fee, if the test is taken while the child is enrolled. A copy of the score sheet and payment receipt must be submitted;
3. Assisting Head Start family members to further their education and job skills by providing information on local Colleges, Universities, and Technology Centers and by assisting them with filling out Financial Aid requests.
4. Working with local Adult Basic Education Offices to provide Adult Basic Education (ABE), General Educational Development (GED) Testing, English as a Second Language (ESL) classes; and
5. Providing training and workshops for parents and staff.



Attention Head Start Parents!
Let Head Start Lead You to Success. . .
Ask about:
GED Classes
(Test Fee Refund)
Tennessee Technology Classes
College Courses



Contact Your Local
Head Start Family Engagement Staff

Health Insurance Portability and Accountability Act of 1996 ("HIPAA")

Introduction of the HIPAA Privacy Rule

The *Standards for Privacy of Individually Identifiable Health Information* ("Privacy Rule") establishes, for the first time, a set of national standards for the protection of certain health information. The U.S. Department of Health and Human Services ("HHS") issued the Privacy Rule to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). The Privacy Rule standards address the use and disclosure of individuals' health information—called "protected health information" by organizations subject to the Privacy Rule—called "covered entities," as well as standards for individuals' privacy rights to understand and control how their health information is used. Within HHS, the Office for Civil Rights ("OCR") has responsibility for implementing and enforcing the Privacy Rule with respect to voluntary compliance activities and civil money penalties.

A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well being. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing. Given that the health care marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosures that need to be addressed.

This is an introduction of the Privacy Rule and not a complete or comprehensive guide to compliance. Entities regulated by the Rule are obligated to comply with all of its applicable requirements and should not rely on this introduction as a source of legal information or advice. To view the entire Rule, and for other additional helpful information about how it applies, see the OCR website: <http://www.hhs.gov/ocr/hipaa> In the event of a conflict between this introduction and the Rule, the Rule governs.

What does the HIPAA Privacy Rule do?

Most health plans and health care providers that are covered by the Rule had to comply with the requirements by April 14, 2003.

The HIPAA Privacy Rule for the first time creates national standards to protect individuals' medical records and other personal health information.

- It gives patients more control over their health information.
- It sets boundaries on the use and release of health records.
- It establishes appropriate safeguards that health care providers and others must achieve to protect the privacy of health information.
- It holds violators accountable, with civil and criminal penalties that can be imposed if they violate patients' privacy rights.
- And it strikes a balance when public responsibility supports disclosure of some forms of data – for example, to protect public health.

For patients – it means being able to make informed choices when seeking care and reimbursement for care based on how personal health information may be used.

- It enables patients to find out how their information may be used, and about certain disclosures of their information that have been made.
- It generally limits release of information to the minimum reasonably needed for the purpose of the disclosure.
- It generally gives patients the right to examine and obtain a copy of their own health records and request corrections.
- It empowers individuals to control certain uses and disclosures of their health information.

L.B.J.& C. Head Start Family Emergency Preparedness Disaster Plan

Disasters can happen anytime and anywhere. When disaster strikes you may not have much time to respond.

Would your family be prepared if Disaster happened?

After a disaster, local officials and relief workers will be on the scene, but they cannot reach everyone immediately. You could get help in hours or it may take days. Would your family be prepared to cope with a emergency until help arrived?

Your family will cope best by preparing for disaster before it strikes. One way to prepare is by assembling a Disaster Supply Kit. Once disaster hits, you won't have time to shop or search for supplies. But if you have gathered supplies in advance, your family can endure an evacuation or home confinement.

To prepare your kit:

- Gather the supplies that are listed. You may need them if your family is confined at home.
- Place the supplies you'd most likely need for an evacuation in an easy to carry container. These supplies are listed with an asterisk (*).

A tornado, flood, earthquake, or any other disaster could cut off basic services – gas, water, electricity and telephones – for days.



A Winter Storm could confine your family at home or in your car.



A highway spill of Hazardous material could mean instant evacuation.



Supplies:

The basic items you should stock in your home: water, food, first aid supplies, clothing and bedding, portable radio, batteries, plastic bags, plastic cups, tissue paper and/or paper towels, tools, emergency supplies, and any special items that may be needed. Keep the items you would most likely need in a evacuation in a easy to carry container. Possible containers include:



A large covered trash container;



backpack;



Or a suitcase or duffel bag.

Water

Store water in plastic containers such as: juice bottles, soft drink bottles or clean milk jugs. Avoid using cartons that will decompose or break, such as milk cartons or glass bottles. A normally active person needs to drink at least 2 quarts of water a day. Hot environments or intense physical activity can double that amount. Children, nursing mothers and ill people will need more.

- Store one gallon of water per person per day (two quarts for drinking, two quarts for food preparation/sanitation)*
- Keep at least a three-day supply of water for each person in your household,

Food

Store at least a three day supply of non-perishable food. Select foods that require no refrigeration, preparation or cooking and little or no water. If you must heat food pack a can of sterno. Select foods that are compact and light weight.* Include a selection of the following foods in your Disaster Supplies Kit:

- Ready to eat canned meats, fruits and vegetables
- Canned juices, milk, or soda
- Soup (if powdered store extra water)
- Staples—sugar, salt, and pepper
- High Energy foods—peanut butter, jelly, crackers, granola bars, trail mix
- Vitamins
- Foods for infants, elderly persons or persons on a special diet
- Comfort/Stress foods— cookies, hard candy, sweetened cereal, lollipops, instant coffee, tea bags

First Aid Kit

Assemble a first aid kit for the home and one for each car. A first aid kit* should include:

- Sterile adhesive bandages in assorted sizes.
- 2-inch sterile gauze pads (4-6)
- 4-inch sterile gauze pads (4-6)
- Hypoallergenic adhesive tape
- Triangular bandages (3)
- 2-inch sterile roller bandages (3 rolls)
- 3-inch sterile roller bandages (3 rolls)
- Scissors
- Tweezers
- Needle
- Moisten towelettes
- Instant cold pack



First Aid Kit-continued

- Antiseptic
- Thermometer
- Tongue blade
- Assorted sizes of safety pins
- Cleansing agent/soap
- Non-porous gloves
- Sunscreen, Hand Sanitizing gel, etc.



Non-Prescription Drugs

- Aspirin or non-aspirin pain relievers
- Anti-diarrhea medication
- Antacids (for upset stomach)
- Syrup of Ipecac (to use to induce vomiting if advised by the Poison Control Center)
- Laxative
- Activated charcoal (to use to induce vomiting if advised by the Poison Control Center)

Suggestions and Reminders

- Store your kit in a convenient place known to all family members. Keep a smaller version of the Disaster Supplies Kit in the trunk of your car.
- Keep items in an air tight plastic bag.
- Change your stored water supply every six months to ensure that it stays fresh.
- Rotate your stored food every six months
- Re-think your kit and your family needs annually. Replace batteries, update clothing, medication, etc.
- Ask your physician or pharmacist about storing prescription medications.
- Include a copy of your address/phone book sealed in plastic bag.

Clothing

- Sturdy shoes or work boots*
- Hats and gloves
- Rain gear*
- Thermal underwear
- Blankets or sleeping bags*

Special Items

Remember family members with special needs such as infants, elderly or disabled persons.

For Baby:

- Formula
- Diapers
- Bottles
- Powdered Milk
- Medications

For Adults

- Medication
- Denture needs
- Contact lens and Supplies
- Extra eye glasses
- Any needed medical supplies
- Entertainment-games, books, etc.

To get started...

Contact your local Emergency Management or Civil Defense office and contact your local American Red Cross chapter.

- Find out what disasters are most likely to happen in your community.
- Ask how you would be warned.
- Find out how to prepare for each disaster.
- Ask you're your Family Service Worker to assist your family in reaching your goal in preparing a disaster plan.

Meet with your family and your local Head Start Committee.

- Discuss the types of disasters that could occur.
- Explain how to prepare and to respond.
- Discuss what to do and where to go if you are asked to evacuate.
- Practice what you have planned.

Plan how your family will stay in contact if separated by a disaster.

- Pick two meeting places:
 - 1) A location a safe distance from your home in case of a fire.
 - 2) Choose an out of state friend or family member as a "check-in contact" for everyone to call.

Meet with the Parent Committee at your local Head Start Center.

- Plan how the community could work together after a disaster.
- Know your neighbors or friends skills (medical, technical, etc.)
- Consider how you could help someone who might have special needs, such as disabled persons or elderly.
- Speak with the staff at your local Head Start and know where the children will be taken in case a disaster occurs during the day while your child is at the Head Start Center.

Complete these steps.

- Post emergency telephone numbers by each telephone in the house.
- Show responsible family members how and when to shut off water, gas, and electricity at the main switches.
- Install smoke detectors on each level of your home, especially near bedrooms; test monthly and change your batteries twice a year.
- Contact your local fire departments to find out about home fire hazards.
- Learn First Aid and CPR. Contact your local American Red Cross or join in on a First Aid/CPR training at your local Head Start Center.



Remember to practice and Maintain your plan.

Your local Head Start is a community wide program which will assist you and your family to prepare a disaster plan. The Federal Emergency Management Agency's Community and Family Preparedness Program and the American Red Cross Disaster Education Program are nationwide efforts to help people prepare for disaster. Contact the Family Service worker at your local Head Start center for resources in your area or contact your local or State Office of Emergency Management.

TENNESSEE DEPARTMENT OF HUMAN SERVICES SUMMARY OF LICENSING REQUIREMENTS FOR CHILD CARE AGENCIES

This summary is a guide for parents of children in licensed child care agencies. It outlines some of the requirements child care agencies must meet in order to be licensed. The Department of Human Services licenses child care agencies with five (5) or more unrelated children operating for three (3) or more hours per day unless exempt. The purpose of licensing is to help maintain healthy, safe, and developmentally appropriate environments for your child. Questions about these requirements or concerns about an agency's compliance should be referred to the local DHS office. You may ask your agency to see the complete set of licensure rules for child care agencies or you can access the rules through the Department's website at:

<https://www.tn.gov/humanservices/for-families/child-care-services.html>

Ownership, Organization, and Administration

- General liability, automobile liability and medical payment insurance coverage shall be maintained on the operations of the child care agency's facilities and vehicles.
- Enrollment of children less than six (6) weeks of age is prohibited.
- Children shall not be in care for more than twelve (12) hours in a twenty-four (24) hour period except in special circumstances.
- Written documentation that the parent performed an on-site visit to the agency to review the agency's facility and parent engagement strategies prior to enrolling the child (not required for children of homeless families).
- Child care agencies shall establish a drug testing policy for all staff having direct contact with children.
- A copy of the agency's policies, procedures, and the Department's Summary of Licensing Requirements shall be supplied to the parent upon admission of the child.
- Parents shall be permitted to see the professional credential(s) of staff upon request.
- During operating hours, parents shall be permitted immediate access to their children, unless legal documents prohibit or restrict access.
- Children's Records
 - Written consent for emergency medical care.
 - Written plan stating to whom the child shall be released.
 - Written transportation agreement between parent and the center regarding daily transportation.
 - Daily attendance that includes time in and time out for each child.
 - Prior written permission of parent for each off-site activity.
- The agency or agency staff shall not disclose or knowingly permit the use by other persons of any information concerning a child or family except as required by law.
- The child care agency's current license and agency report card shall be posted near the main entrance.
- Written expulsion policy clearly shared with parents and staff.

Staff

- Family and group home child care agencies must notify parents in advance of the person in charge during primary educator's absence.
- A staff member shall be designated in charge in the absence of the primary educator / director and the name of the person in authority shall be posted.
- At all times, one (1) adult educator with at least a high school diploma shall be on the premises.
- Pre-service training for all staff prior to assuming duties.
- Substitutes providing services for more than 36 hours in a calendar year shall meet background check requirements and

have a physical exam prior to beginning duties.

- Volunteers cannot be counted to meet the adult: child ratios and shall never be left alone with children.

Criminal Background Check

- Criminal background checks are required for all staff at least every five (5) years.

Record Keeping

- A record for each child shall be maintained within the child care agency.
- Written plan of action must be endorsed by a physician for a child with life threatening allergies.
- Parent must provide written consent for emergency medical care/treatment.
- Written statement must be on file that lists to whom the child shall be released.
- Written transportation agreement between parent and the child care agency regarding daily transportation.
- Maintain daily attendance records that include the full name and time in and time out for each child.
- Written permission slips from the parent for each field trip prior to the activity.
- Each child shall have a written transition plan for moving from one age group to another.
- The records of any child who is five (5) years old in an agency which lacks approved kindergarten status shall include a signed acknowledgment by the child's parents that recognizes that the child's attendance does not satisfy the mandatory kindergarten prerequisite for the child's enrollment in first grade.
- Children of homeless families and/or children in state custody may receive care for up to sixty (60) days prior to providing documentation of immunizations and well-child examinations.

Incident Reporting

- Incidents, accidents, injuries and signs of illness shall be reported to the parent no later than the child's release on the date of occurrence.
- Incidents, accidents, injuries and signs of serious illness to children shall be documented immediately and must include: child's name and date of birth, name of person writing report, date & time of occurrence and completion of incident report, description of incident and circumstances, and actions taken by agency.
- The child care agency shall notify the Department of all serious incidents the same day of the incident by contacting the Complaint Hotline at 1-800-462-8261.

Duty to Report Child Abuse and Neglect

- Every operator, owner, licensee, director, primary educator or staff member of, or substitute staff member or volunteer in, a child care agency licensed by the Department of Human Services is individually responsible and required to

immediately report any reasonable suspicion of child abuse or neglect to either the Department of Children's Services and/or local law enforcement or the judge of the juvenile court in the county of the child's residence, pursuant to T.C.A. §§ 37-1-403 and 37-1-805.

- All child care agency staff shall receive annual training regarding proper procedures to report child abuse and neglect.

Supervision

- All areas of the building and grounds shall be visually inspected after closing the child care agency for the day to ensure no children have been unintentionally left in any part of the child care agency's facilities.
- Children shall be released to only the child's parent, or other person authorized by the parent in accordance with child care agency's policies.
- Child care agencies shall maintain a daily sign-in and sign-out sheet that includes each child's printed full name, date, time of entry, time of departure and space for the printed name and signature of parent or authorized representative.
- Educators providing supervision to children during meal and snack times are prohibited from performing activities/ duties unrelated to food service.
- Child care agencies shall develop, follow and post a written mealtime supervision plan.
- Child care agencies shall develop and follow a written playground supervision plan.
- During field trips, the adult:child ratios shall be doubled and attendance shall be checked upon departure and arrival at each destination and at the beginning and end of each activity (in family and group homes the adult:child ratio shall be increased by one (1) during field trips).
- When children are engaged in activities in or near a body of water, the following requirements shall be met:

Age Group	Adult:Child Ratio
6 weeks-12 months	1:1
13 months - 35months	1:2
Three (3) years	1:4
Four (4) years	1:6
Five (5) years	1:8
School-age (Kindergarten and above)	1:10

- One (1) adult present shall have a current certificate in advanced aquatics lifesaving skills and shall supervise above the level of the swimmers.
- Safe sleep supervision procedures must be followed to prevent suffocation and deaths in infants:
 - Infants shall sleep in cribs or play yards.
 - Infants shall not sleep on a sofa, soft mattress, adult bed, in a car seat, swing or other restraining devices.
 - Bibs shall be removed prior to placing a child in a crib for sleeping.
 - Soft bedding, mobile toys and other toys that attach to any part of the crib are prohibited.
 - Infants that arrive asleep in car seats or fall asleep in any piece of equipment other than a crib must be immediately removed and placed on their back in a crib.
- Any practice that is an exception to the Department's safe sleep supervision procedures shall not be used without written authorization from a physician.

Health and Safety

- Children shall be checked upon arrival each day for signs of illness and injury.
- The receiving educator shall document any obvious marks or injuries and shall note any comments from the parents pertaining to the marks or injuries.
- A child showing signs of illness shall be cared for apart from other children to the extent that supervision can be

Revised November 2018

maintained for all children, and the parent shall be contacted and arrangements made for pick up.

- At least one staff with certification in first aid and one certified in CPR on duty at all times.
- Impetigo and diagnosed strep shall be treated according to a licensed medical professional's instructions prior to readmission to the child care agency.
- Children diagnosed with scabies or lice shall have proof of treatment prior to readmission.
- All medications and preventative products such as non-prescription diaper cream, sun screen and insect repellent, shall be received from the parent by a designated staff person and administered by a designated staff person.
- Unused medication shall be returned to the parent.
- Medication shall never be handled by children or administered in bottles or infant feeders unless authorized by a physician.
- All medications shall be inaccessible to children unless a physician's authorization for the current school year is on file that allows a school-age child to have self-administered medication.
- Smoking is not permitted in any indoor area or vehicle of the child care agency at any time.
- The use of alcoholic beverages is not permitted in a child care agency during the hours of operation.
- Firearms shall not be on the premises of a child care agency, in any vehicle used to transport children or in the presence of a child. (In a private residence, these items must be locked, out of sight and inaccessible to children).
- All items labeled "keep out of reach of children" shall be stored so that they are inaccessible to children.
- Personal belongings of residents and staff (purses, backpacks, coats, etc.) shall be inaccessible to children at all times.
- Children's diapers should be checked throughout the day to determine if they are wet or soiled.
- Educators shall provide rich social interchanges and engaging eye contact during diapering.
- Educators shall utilize sanitary diapering procedures.
- Pre-school and school-age children requiring assistance with toileting needs, shall receive assistance in a location designated for that purpose which provides privacy from other children and adults.
- Staff members with signs of a communicable disease shall not be present.

Food and Food Service

- Educators and children shall wash their hands with soap and water.
- At mealtime, children shall be seated at tables and chairs of appropriate size, and an educator shall be near any table or high chair where a child is eating.
- Educators shall ensure that infants have completed feeding and swallowed all milk/formula prior to being laid down.
- Bottles shall not be propped or given to a child while lying flat.
- Children shall not be permitted to carry a bottle with them throughout the day.
- Children shall not have food or drink while in beds, cots, cribs or on mats.
- In order to prevent injuries related to bottle warmers and microwaves:
 - Crock pots are prohibited as bottle warmers.
 - Crock pots shall be kept in kitchen and inaccessible.
 - Microwave ovens and surrounding area, including cords, shall not be accessible to children.
 - School-age children shall use microwaves only under direct supervision.
- In order to prevent choking:
 - Solid foods, including cereal, shall not be given in bottles

Page 2 of 6

- or infant feeders to children with normal eating abilities unless written authorization from doctor.
- ✓ Food shall not be accessible/served until cut, chopped, diced, mashed for each child's age, chewing and swallowing ability.
- ✓ Educators shall check to ensure that no food is left in the mouth of a child prior to placing down for nap.
- ✓ Educator is prohibited from performing classroom duties unrelated to food service during mealtime.
- ✓ Children shall not wear teething necklaces, pacifiers, or any item around their neck or attached to their clothing.
- All contents remaining in bottles after feeding shall be discarded immediately after feeding.
- Frozen breast milk shall be labeled with date expressed and name of child.
- Food, formula, milk or breast milk brought from home shall be labeled with the child's name; the date received and shall be refrigerated immediately.
- Previously opened baby food jars shall not be accepted in the child care agency.
- If food is fed directly from the jar by the educator, the jar shall be used for only one feeding and discarded.
- If the child care agency provides food, it shall be in accordance with the USDA's Child and Adult Care Food Program (CACFP) nutritional guidelines.
- Breakfast shall be provided to children who arrive before 7:00 a.m. and have not had breakfast at home. (Not required if received at school)
- Children shall be given adequate time to eat.
- Food shall not be used as a reward and should not be forced or withheld.
- Each child's food allergies shall be posted where food is prepared and served.
- For a child with life threatening allergies, a written plan of action should be posted where the educator has immediate access.
- Staff shall support and facilitate a parent's decision to continue breast feeding.
- Home preserved food and raw milk are prohibited.

Equipment for Children

- Developmentally appropriate equipment and furnishings shall be available for each age group.
- All indoor and outdoor large and heavy equipment, appliances and furnishings shall be secured to prevent falling or tipping over.
- Electrical cords and cords on window blinds or curtains shall be inaccessible to children.
- Indoor equipment, materials, and toys shall be available to provide a variety of developmentally appropriate activities so that each child has at least two (2) choices during play time.
- In infant/toddler rooms, equipment and a safe space shall be provided for climbing, crawling, pulling up and exploring without the use of confining equipment.
- Trampolines are prohibited.
- Climbers, swings and other heavy equipment that could cause injury if toppled shall be securely anchored.
- Climbers and swings shall have a protective fall zone surface recognized by CPSC as a shock absorbing, resilient material maintained at a minimum depth of six (6) inches. (Effective for family and group homes by 7/30/2019).
- Portable equipment shall be securely anchored or rendered immobile if required by manufacturer.
- A quiet rest area and cots or mats shall be available for all children who want to rest or nap.
- For health and safety reasons each crib, cot, bed or mat shall be labeled to assure that each child naps on his/her own

bedding.

- Cribs and play yards must comply with CPSC requirements.
- Mattresses and foam pads shall fit the crib without any gaps or spaces.
- A blanket or covering shall be available to each child age thirteen (13) months and older.

Program, Language and Literacy

- The educator(s) shall give individual attention to each child throughout the day (activities are specified for infant/toddler, pre-school, and school-age children). These activities include, but are not limited to, reading to infants, toddlers and preschool age children individually or in a group daily.
- Every child should have an opportunity to participate in program activities.
- Upon arrival, infants and toddlers shall be removed from car seats immediately.
- Child shall never be left unattended in any restraining device and shall not be kept in any restraining device longer than fifteen (15) minutes, except when eating while in a high chair.
- The use of electronic media and other electronic devices is prohibited for children less than two (2) years of age.
- Programs, movies, computer games, and music with violent or adult content shall not be permitted in children's presence.
- Child care agencies shall inform parents in writing of any scheduled media program viewing.
- Other activity choices shall be available to children who do not wish to participate in media time.
- An opportunity for outdoor play shall be extended to children of all ages who are in care for more than three (3) daylight hours unless outdoor play is prohibitive or dangerous.
- Children of all ages who are in care more than three (3) daylight hours shall have a daily opportunity for outdoor play when the temperature range, after adjustment for wind chill and heat index, is between thirty-two (32) degrees and ninety-five (95) degrees Fahrenheit and not raining; children shall be properly dressed and the length of time outside adjusted according to the conditions and the age of the child.
- During outdoor play educators shall be alert for signs of weather related distress such as, dehydration, heat stroke, etc.
- Children in care for more six (6) hours or more shall have an opportunity for a reclining rest period.
- No child shall be forced to lay down/nap or stay on a cot/mat for an extended period of time.
- Nap areas shall have adequate lighting to allow the educator to see each child with a quick glance and respond appropriately to the child's physical and emotional needs.
- If music is played in areas where children sleep, it should be soothing and soft enough so children can be heard.
- Potentially shaming, humiliating, frightening, verbally abusive, injurious discipline methods/techniques that isolate children are prohibited.
- Discipline shall not be related to food, rest, or toileting.
- Spanking and all types of corporal punishment are prohibited.
- Staff shall not restrain a child by any means other than holding and then for only as long as necessary for the child to regain control.
- Toilet learning shall be done in cooperation with the parents, and communication with parents maintained throughout the process.
- Activities shall be intentionally planned based upon the developmental age of the child.
- Infants, less than six (6) months of age shall have direct supervised tummy time every day when they are awake.
- For ages three (3) through school-age, a personal safety curriculum shall be provided annually.

- For school-age children the curriculum shall include instruction on reporting physical, verbal or sexual abuse.
- Parents shall be consulted in developing a plan to meet the individual needs of a child with special needs.

Physical Facilities

- All facilities shall annually pass an inspection verifying compliance with all applicable state and local fire and environmental requirements.
- At least one (1) working telephone shall be available in the agency and the number made available to parents.
- Outdoor play areas shall contain a minimum of fifty (50) square feet of usable play space for each child using the area at one time.
- The outdoor play area shall be enclosed by fence or barrier at least four (4) feet in height.
- Pre-play inspection of outdoor play area prior to use.
- Children shall not be present if an adequate water supply is not available.
- Children shall not be present if the sewage system is not operating.
- All rooms used by children shall be maintained at a temperature of between 68 to 78 degrees by means of heating, cooling or ventilation sources approved for use.
- Children shall not be present if indoor temperature cannot be maintained between 68 to 78 degrees.
- Unvented fuel burning heaters and portable heaters are prohibited.
- Swimming pools made inaccessible to children by use of fences and locked gates.
- Swimming is prohibited in drop-in care.
- Swimming pools and/or wading pools shall not be used without prior approval by the Health Department.
- If animals or birds are kept in classrooms as pets, they shall be caged away from the food storage and preparation area, and cages kept clean.
- Reptiles and amphibians shall not be kept as pets.

Transportation

- Child care agencies shall not transport children without prior written approval by the Department.
- Vehicle emergency evacuation drills conducted quarterly.
- Use of cell phones and texting is prohibited while driving.
- Routine transportation is limited to forty-five (45) minutes each way (does not apply to field trips for school-agers).
- Maintain documentation of daily inspections and necessary repairs.
- The interior temperature of the vehicle shall be monitored during extreme weather to ensure child safety.
- An adult must be in the vehicle whenever a child is in the vehicle.
- A passenger log with the first and last name of each child shall be used to track the loading and unloading of children during transport.
- If the child was loaded from home, the parent or other authorized person will additionally sign the log indicating that the child was placed on the vehicle.
- The log shall be updated as children are released from the vehicle.
- When the child is released to a parent or other authorized person, that person must sign the log indicating the release of that child to them.
- Immediately upon unloading the last child the driver must walk through the vehicle to confirm that all the children are off the vehicle.
- A staff person designated as reviewer shall walk through the vehicle to confirm that all the children are off the vehicle. The reviewer shall have no other responsibilities during the walk

through of the vehicle.

- Family and group homes with a single educator shall develop a Department approved alternative system for ensuring all children are off the vehicle.
- When children are transported to school, they shall be unloaded only at the location designated by the school and only at the time the school is officially open with staff present to receive them.
- Drivers must submit to an annual health examination and pass a drug screening test.
- Drivers and monitors shall hold current certification in CPR and First Aid.
- The following equipment shall be maintained in the vehicle and stored in a manner which is not readily accessible to children: fire extinguisher, emergency reflective triangles; first aid kit; seat-belt cutter or similar device manufactured and designed to immediately release the vehicle's child restraint system(s) in an emergency; blood borne pathogenic clean-up kit; and working flashlight.
- All child care vehicles designed to carry ten (10) or more passengers must conform to the Federal Motor Vehicle Safety Standards for school buses.
- All child care vehicles designed by the manufacturer to carry ten (10) or more passengers must be inspected by the Department of Safety.
- Child passenger restraints must be used in accordance with state law and federal law.
- Signage that includes the agency name, phone number and the Department's toll-free Child Care Complaint phone number must be on child care vehicles.

Emergency Preparedness

- The agency, in consultation with appropriate local authorities, shall develop a written plan to protect children in the event of disaster.

Specific Requirements For Family Child Care Homes

- Adult:Child ratios shall be maintained at all times.
- Licensed capacity shall not be exceeded.
- Family Child Care Home Ratios and Group Size Chart

Maximum Number of Children and Ages (including children "related" to the primary educator under nine (9) years of age)	Educators Required
Seven (7) or fewer children; and no more than four (4) under two (2) years	1
Seven (7) or fewer children; and five (5) or more under two (2) years	2
More than seven (7) children; and no more than four (4) under two (2) years	3
More than seven (7) children; and five (5) or more under two (2) years	3

- Effective 7/30/2018, primary educators receiving an initial license shall have a high school diploma or equivalent.
- The primary educator shall not be employed or engaged in any other full-time activities during hours of operation.
- A qualified educator shall be on site any time the primary educator is not on site during child care operating hours.
- Ongoing training required in specific health and safety topics.
- The maximum number of children present inside a physical space shall be determined by minimum square footage requirements.
- If the number of children exceeds seven (7) at one time or care is provided in one room of the home, the area shall provide thirty (30) square feet per child of usable play space.

Specific Requirements For Group Child Care Homes

- Adult:Child ratios shall be maintained at all times.
- The maximum number of children present shall not exceed twelve (12). Exception: Three (3) additional school-age children may be in care before/after school, school holidays/snow days

and during summer vacation.

Group Home Ratio and Group Size Chart:

Number of Children	Ages of Children	Educators Required
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	No more than twelve (12) children three (3) years of age or older	1
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	Up to nine (9) children under three (3) years of age; and no more than four (4) present under two (2) years of age	2
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	Ten (10) or more under three (3) years of age	3

- If school-age children are enrolled, a school-age program shall be provided.
- If four (4) or more infants/toddlers attend a group child care home, they shall have a separate and distinct space and their own educator.
- When children are sleeping or resting, there shall be at least one (1) adult awake and supervising and adult to child ratios shall be maintained.
- Primary educators shall have a high school diploma or equivalent.
- Owners who are employed elsewhere shall ensure that a primary educator is always on-site.
- The primary educator shall not be employed at any other job during the hours of operation unless the Department has approved the primary educator's employment in an official capacity in a program sponsored or recognized by the Department.
- An educator shall be on-site any time that the primary educator is not on-site during child care operating hours.
- Ongoing training required in specific health and safety topics.
- A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
- The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.

Specific Requirements For Child Care Centers

- Adult: child ratios must be maintained at all times.
- When more than twelve (12) children are present on the premises a second adult must be physically available on the premises.
- Child Care Ratio and Group Size Charts**

Age of Children	Adult:Child Ratio	Maximum Group Size
6 weeks – 15 months	1:4	8
12 months – 30 months	1:6	12
24 months – 35 months	1:7	14
3 years	1:9	18
4 years	1:13	20
5 years	1:16	20
School-age (Kindergarten and above)	1:20	No max

Age of Children	Adult: Child Ratio	Maximum Group Size
6 weeks – 30 months	1:5	10
2 years – 4 years	1:8	16
2 ½ years – 3 years	1:9	18
2 ½ years – 5 years	1:11	20
2 ½ years – 12 years	1:10	10
3 years – 5 years	1:13	22
4 years – 5 years	1:16	24
5 years – 12 years	1:20	No max

Revised November 2018

Ratio Chart first/last hour and one-half (½) of each day only:

Age of Children	Adult: Child Ratio	Maximum Group Size
2 ½ years – 5 years	1:10	10
3 years – 12 years	1:15	15
4 years – 12 years	1:20	20

- Each child must be on roll in a defined group and assigned to that group with a specific caregiver(s).
- Infants shall never be grouped with children older than thirty (30) months, and a separate area shall be provided for them.
- Children shall not be promoted to a new group until required based upon the age and developmental needs of the child.
- Groups, excluding infants & toddlers may be combined for short periods for a special activity of no more than sixty (60) minutes duration per day as long as adult:child ratios are met.
- Each group must have a designated classroom with enough space for the entire group.
- Child care centers shall provide written lesson plans for each group of children.
- When more than twelve (12) children in first grade and above are present, a separate educator, group, space and program shall be provided for them.
- Ratios can be relaxed during naptime and nighttime care but one (1) adult must be awake and supervising the children in each nap/sleeping area (infant/toddler ratios must be maintained).
- Ongoing training required in specific health and safety topics.
- The director of a single site child care center shall be at least twenty-one (21) years of age.
- The assistant director of a single child care center shall be at least eighteen (18) years of age.
- Each group of children shall have at least one (1) educator present who has a high school diploma or equivalent.
- The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.
- A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
- Each nap room shall contain a minimum of thirty (30) square feet of floor space per child.
- Individual lockers or cubbies, separate hooks and shelves or other containers, placed so that children may reach them, shall be provided for each child's belongings.
- In an infant or toddler room with more than one educator, each educator shall be responsible for providing consistent care for a specific infant(s)/toddler(s) which includes but is not limited to: planning, and record-keeping for the child, communication, general interaction with and routine care of the child.
- Following the issuance of an annual license, a child care center may operate without an on-site director for a period of not more than sixty (60) days total within the licensing year.

Specific Requirements For Drop-In Child Care Centers

- Before accepting a child for care, the parent shall provide a statement regarding the estimated amount of time that the parent anticipates that the child will be in attendance.
- The child care agency shall familiarize staff with personal safety material and be prepared to discuss those materials with parents.
- The drop-in center shall have an on-site director and the director shall be at least twenty-one (21) years of age.
- The director shall have earned a high school diploma or its equivalent and one (1) year of full-time work experience with children in a group setting.
- Ongoing training required in specific health and safety topics.
- Each educator who is used to meet the minimum required

Page 5 of 6

adult:child ratio shall have a high school diploma.

- Children shall be placed in age appropriate groups and with adequate adult educator supervision:

Age Grouping:	Adult:Child Ratio
Six (6) weeks – Fifteen (15) months	1:4
Twelve (12) months – Thirty (30) month	1:8
Two (2) years	1:12
Three (3) years	1:15
Four (4) years	1:18
Five (5) years (not in Kindergarten)	1:20
School-age (Kindergarten and above)	1:22

The adult:child ratio for a multi-age group containing infants:

Majority Age of Children Present	One Infant	Two Infants
12 months – 30 months	1:8	1:8
2 years	1:10	1:8
3 years	1:12	1:10
4 years	1:15	1:12
5 years (not in Kindergarten)	1:17	1:13
School-age (Kindergarten and above)	1:19	1:15

- If the child care agency provides food, it shall be in accordance with the USDA's Child and Adult Care Food Program nutritional guidelines.
- The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.
- A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
- Each nap room shall contain a minimum of thirty (30) square feet of floor space per child.
- Staff shall have documentation of all children's allergies and how to deal with any allergic reaction.
- Staff shall review emergency preparedness and fire procedures and shall physically walk through the evacuation process every year.
- Prohibited activities include swimming, transportation and the provision of specialized services.

You can access the Department's website at:
<http://tn.gov/humanservices>

A wealth of child care information can be found on the Department's website.

You can:

- ✓ Learn more about the rules
 - ✓ Learn more about the types of regulated care
 - ✓ Locate a child care provider
 - ✓ Learn more about the Report Card and Star Quality Program
 - ✓ Locate the local child care licensing office
 - ✓ Review the current personal safety curriculum
 - ✓ Read about new initiatives in child care
 - ✓ Locate the nearest child care certificate office
 - ✓ Find info on choosing child care
 - ✓ Locate a resource and referral center
- And much more!

Report Card and Star Quality Program
<http://tnstarquality.org>

Child Care Resource and Referral Centers

Currently, there are eight (8) CCR&R service delivery areas located throughout the state. Child Care Resource and Referral helps parents find the type of care that is best for their child / children. These community resources also give providers technical assistance to better serve the children in their care. Contact information for the CCR&R centers can be found on the Child Care Services website.

Child Care Complaint Hotline

NASHVILLE AREA: (615) 313-4820
TOLL FREE: 1-800-462-8261

If you have a concern about an existing child care agency or wish to report an illegal operation call the Department's complaint hotline.

Department of Children's Services Hotline

Report Child Abuse or Neglect
1-877-237-0004

Information about child health, education, and development as well as available state services:
<https://www.kidcentraltn.com/>

Revised November 2018

Page 6 of 6

YOUR RIGHTS UNDER TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

“No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”

U.S. DEPARTMENT OF JUSTICE CIVIL RIGHTS DIVISION WASHINGTON, D.C. 20530

“Simple justice requires that public funds, to which all taxpayers of all races contribute, not be spent in any fashion which encourages, entrenches, subsidizes, or results in racial discrimination.” (President John F. Kennedy, in his message calling for the enactment of Title VI, 1963).

What is Title VI?

Title VI of the Civil Rights Act of 1964 is the Federal law that protects individuals from discrimination on the basis of their race, color, or national origin in programs that receive Federal financial assistance.

What discrimination is prohibited by Title VI?

There are many forms of illegal discrimination based on race, color, or national origin that can limit the opportunity of minorities to gain equal access to services and programs. Among other things, in operating a federally assisted program, a recipient cannot, on the basis of race, color, or national origin, whether directly or through contractual means:

- Deny program services, aids, or benefits;
- Provide a different service, aid, or benefit, or provide them in a manner different than they are provided to others; or
- Segregate or separately treat individuals in any matter related to the receipt of any service, aid, or benefit.

How can I file a discrimination complaint?

Each Federal agency that provides Federal financial assistance is responsible for investigating complaints of discrimination on the basis of race, color, or national origin in the use of its funds. If you believe that you or others protected by Title VI have been discriminated against, you may file a complaint with the Federal agency that provides funds for the program where you generally within 180 days of the date of the alleged discrimination. It should describe:

- Your name, address, and telephone number. Your complaint must be signed. If you are filing on behalf of another person, include your name, address, telephone number, and your relation to that person (e.g., friend, attorney, parent, etc.)
- The name and address of the agency, institution, or department you believe discriminated against you.
- How, why, and when you believe you were discriminated against. Include as much background information as possible about the alleged acts of discrimination. Include names of individuals whom you allege discriminated against you, if you know them.
- The names of any persons, if known, that the investigating agency could contact for additional information to support or clarify your allegations.

What will the Federal agency do with my complaint?

Once a complaint is filed, it will be reviewed by the agency to determine whether it has jurisdiction to investigate the issues you have raised. Each agency's procedures are different, but an agency generally will investigate your allegations and attempt to resolve violations it has found. If negotiations to correct a violation are unsuccessful, enforcement proceedings may be instituted.

What is the Department of Justice's role?

The Department of Justice, under Executive Order 12250, coordinates the enforcement of Title VI and related statutes by all agencies that administer federally assisted programs. If you cannot determine what federal agency may have Title VI jurisdiction, or if you do not know where to send your complaint, you may send it to the Department of Justice. As the government-wide Title VI “clearinghouse”, the Department of Justice will refer your complaint to the appropriate agency. The address is:

**U.S. Department of Justice
Civil Rights Division
Coordination and Review Section-NWB
950 Pennsylvania Avenue, NW
Washington, D.C. 20530
Title VI (1-888-848-5306)
(202) 307-2678 (TDD)**

What if the recipient retaliates against me for asserting my rights or filing a complaint?

You should be aware that a recipient is prohibited from retaliating against you or any person because he or she opposed an unlawful policy or practice, or made charges, testifies, or participated in any complaint action under Title VI. If you believe that you have been retaliated against, you should immediately contact the Federal agency with authority to investigate your complaint.

WIC

What is WIC?

Congress funded the Special Supplemental Food Program for Women, Infants, and Children (WIC) in 1974 to help low-income pregnant and breastfeeding women, infants and children have the nutritious food they need for a good start toward a lifetime of health. WIC has become one of the most successful and cost-effective federally funded programs directed toward improving the health of its participants.

What does WIC provide?

The WIC program provides milk, cheese, eggs, juice, peanut butter, iron-fortified cereals, and infant formula to participants. Each WIC participant also receives nutrition education and counseling to learn how to use the food as part of a good daily diet and to improve their long-term health.

With national funding of \$4 billion, WIC serves 7 million participants nationwide through 85 state agencies. In Tennessee, the WIC program serves 150,000 people through a \$84 million grant administered by the Department of Health. An additional \$30 million comes from an infant formula rebate contract with Ross Products Division.

Who is eligible?

Pregnant, postpartum and breastfeeding women, infants, and children up to five years of age who meet income guidelines and have documented medical or nutritional needs are eligible. Individuals who receive food stamps, AFDC, or who are on TennCare at no cost are income eligible for WIC. Many individuals not receiving benefits from these programs may also qualify. The potentially eligible Tennessee population is approximately 200,000 people.

How does WIC make a difference in people's lives?

- Helps provide early entry into the health care system
- Supplies basic nourishing foods
- Educates how to choose healthy diets
- Gives breastfeeding mothers help and support
- Is associated with healthy newborn babies
- Links with other help in the community
- Encourages childhood immunizations
- Serves homeless participants with special food packages

How can I get additional information about WIC?

Call your local health department or 1-800-DIAL-WIC (342-5942). Applicants are given an appointment to come in for a health screening, or to bring current medical referral information from a local physician, outpatient clinic, or hospital.

Building for the Future

This day care facility participates in the Child and Adult Care Food Program (CACFP), a Federal program that provides healthy meals and snacks to children receiving day care.

Each day more than 2.6 million children participate in CACFP at day care homes and centers across the country. Providers are reimbursed for serving nutritious meals which meet USDA requirements. The program plays a vital role in improving the quality of day care and making it more affordable for low-income families.

CACFP homes and centers follow meal requirements established by USDA.

Meals

Breakfast	Lunch or Supper	Snacks (Two of the four groups)
<ul style="list-style-type: none">• Milk• Fruit or Vegetable• Grains or Bread	<ul style="list-style-type: none">• Milk• Meat or meat alternate• Two different servings of Fruits or Vegetables• Grains or Bread	<ul style="list-style-type: none">• Milk• Meat or meat alternate• Fruit or Vegetable• Grains or Bread

PARTICIPATING FACILITIES Many different homes and centers operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- **Child Care Centers:** Licensed or approved public or private non-profit child care centers, Head Start programs and some for-profit centers.
- **Family Day Care Homes:** Licensed or approved private homes.
- **After School Programs:** Centers in low-income areas provide free snacks to school age children and youth.
- **Homeless Shelters:** Emergency shelters provide food service to homeless children.

ELIGIBILITY State agencies reimburse facilities that offer non-residential day care to the following children:

- Children age 12 and under
- Migrant children age 15 and younger, and
- Youths through age 18 in after-school care programs in needy areas.

CONTACT INFORMATION: If you have questions about CACFP, please contact on of the following:

Sponsoring organization/Center
Title VI coordinator:

State Agency:
Child and Adult Care Services
TN Department of Human Services
400 Deaderick Street
Nashville, TN 37243-1403
615-313-4749

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**TENNESSEE DEPARTMENT OF HUMAN SERVICES (TDHS)
CHILD AND ADULT CARE FOOD PROGRAM (CACFP) AND SUMMER FOOD SERVICE PROGRAM
(SFSP) CIVIL RIGHTS GRIEVANCE PROCEDURES**

In accordance with U.S. Department of Agriculture, Food and Nutrition Service Instruction 113.4, the Tennessee Department of Human Services provides a grievance procedure in the event a person believes he/she or their children have been discriminated against and/or denied benefits on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department (in the Child and Adult Care Food Program or Summer Food Service Program). ***Not all prohibited basis will apply to all programs and/or employment activities.***

General Instructions

All complaints, written or verbal, alleging discrimination on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department (in the Child and Adult Care Food Program or Summer Food Service Program) shall be processed within ninety (90) days of receipt in the manner prescribed in this document.

Procedure for Filing Complaints of Discrimination:

1. Right to File a Complaint:

Any person alleging discrimination based on race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department has a right to file a complaint within 180 days of the alleged discriminatory action. Under special circumstances this time limit may be extended.

2. Acceptable:

All complaints, written or verbal, shall be accepted by the Tennessee Department of Human Services and forwarded to the U.S. Department of Agriculture. It is necessary that the information be sufficient to determine the identity of the CACFP or SFSP facility or individual toward which the complaint is directed, and to indicate the possibility of a violation. Anonymous complaints shall be handled as any other complaint.

3. Verbal Complaints:

In the event that a complainant makes the allegation verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall document in writing the elements of the complaint for the complainant. Every effort shall be made to have the complainant provide the following information:

- a. Name, address, telephone number or other means of contacting the complainant;
- b. The specific location and name of the facility administering the Child and Adult Care Food Program or Summer Food Service Program;
- c. The nature of the incident(s) or action(s) that led the complainant to believe discrimination was a factor;
- d. The bases on which the complainant feels discrimination exists (i.e., basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department);
- e. The names, titles and addresses of the persons who may have knowledge of the discriminatory incident(s) or action(s); and
- f. The date(s) during the alleged discriminatory incident(s) or action(s) occurred, or if continuing, the duration of such discriminatory incident(s) or action(s).

For complaint other than discrimination complaints, please contact the director of the local facility operating the CACFP or SFSP, or submit the complaint in writing or by telephone to the following address and telephone number:

**Tennessee Department of Human Services
Child and Adult Care Services
400 Deaderick Street
Nashville, TN 37243-1403
Telephone: (615) 313-4749**

**TENNESSEE DEPARTMENT OF HUMAN SERVICES (TDHS)
CHILD AND ADULT CARE FOOD PROGRAM (CACFP) AND
SUMMER FOOD SERVICE PROGRAM (SFSP)
CIVIL RIGHTS GRIEVANCE REPORT PROCEDURES**

To report alleged discrimination in the Child and Adult Care Food Program or Summer Food Service Program based on bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department, these are the guidelines listed. ***Not all prohibited bases will apply to all programs and/or employment activities.*** If you believe that you or your children have been discriminated against and/or denied benefits based on the above mentioned protected bases funded through the Department in the Child and Adult Care Food Program or Summer Food Services Program, please follow these procedures:

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form.

You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at

**U.S. Department of Agriculture
Director of Office of Adjudication
1400 Independence Avenue, SW
Washington, DC 20250-9410**

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Relay Service at (800) 877-8339 or (800) 845-6136 (Spanish).

Information may be returned **by fax to (202) 690-7442 or email at program.intake@usda.gov.**

Telephone Toll Free (866) 632-9992 (Voice)*

Please provide the following information so you may be contacted concerning your complaint:

Name _____ Date of Complaint: _____

Address _____ Telephone _____

Identify the Name of the CACFP or SFSP Facility, Date(s) of Incident(s) or Action(s), and Names(s) of Facility Personnel Involved with the Incident(s) or Action(s):

Describe the Incident(s) or Action(s) which You Believe Were Discriminatory Against You or Your Children:

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L.B.J.& C. Head Start Facts

- ☺ L.B.J.& C. is named for the original four county seats Livingston, Byrdstown, Jamestown, and Cookeville.
- ☺ L.B.J. & C. Head Start has been in existence since 1965. It began as a summer program. In 1966, the program changed to full day - full year.
- ☺ L.B.J.& C. Head Start has 1,307 slots to serve 3- and 4-year-old children.
- ☺ Head Start provides the following services: Nutrition, Health Screenings, Vision, Dental, Child Development, School Readiness, Mental Health, Parent Involvement, Volunteer, Social Services, Transition, Disabilities, and Training and Development.
- ☺ LBJ & C. serves the following twelve (12) middle Tennessee counties: Cumberland, Dekalb, Fentress, Jackson, Macon, Overton, Pickett, Putnam, Smith, Warren, and White.
- ☺ The United States Department of Health and Human Services-Administration for Children and Families, Office of Head Start is our source of funding with 20% matching share coming from the local community through volunteer hours of service and/or materials used in the program.
- ☺ There are 240 staff positions at the present time.
- ☺ The Board of Directors have 12 members. The Policy Council have 16 voting members and 1 non-voting Board Representative with at least 51% of the membership made up of parents of currently enrolled Head Start children.

Motto

... "it takes a village to raise a child..."

L.B.J.& C. Head Start Mission Statement

L.B.J.& C. Head Start's mission is to partner with the family and community to help children and families prepare for school.

L.B.J. & C. Head Start serves the following twelve counties in Middle Tennessee:

