Community Action Program, Inc. of Western Indiana

HEAD START And Early Head Start



STAFF HANDBOOK

The Head Start Staff Handbook has been created to address some of the major topics that affect the Head Start program and its staff.

Please be aware that all procedures and policies are outlined in the agency's Personnel Policies and Procedures Manual. This manual contains all of the procedures that affect all agency employees and should be consulted when questions or situations arise. It provides greater detail and precise information in relation to the agency's policies and procedures.

TABLE OF CONTENTS

Mission Statement	page 1
Vision Statement	page 2
Confidentiality Policy	page 3
Child Discipline Policy	page 4
Active Supervision Procedures	Page 5
Abuse and Neglect Policy	page 7
Releasing Children From Center	page 9
Dress Code	page 10
Staff Attendance Policy	page 11
Mileage Reimbursement	page 12
Time Sheets	page 13
Agency Phone Policies	page 10
Personal Cellular Phone Policies	page 14
Drink/Food in Classroom	page 14
Vehicle Cellular Phone Policies	page 15
Tobacco Free Policy	page 16
Child Attendance Policy	page 17
Exclusion Policy and Procedures	page 18

Weather Closings	page 17
Sanitization of Toys	page 18
Forms Timeline	page 19
Continuity of Care	page 20
Communication Plan	page 21
Sample Forms	page 23
Specialists and Their Responsibilities	page 25



MISSION STATEMENT

The mission of Community Action Program, Inc. of Western
Indiana, Head Start Division, is to provide a wide variety of services
concentrating on minimum income level families with
infants, toddlers, and preschool-aged children. The program
operates through shared partnerships with other agencies, qualified
staff, and dedicated parents by providing a high quality early
learning environment, giving information, and offering
encouragement so that families can accomplish positive outcomes
through learning and growth.

Head Start, a division of CAP, Inc. of Western Indiana, recognizes the following to be our core values for assisting low-income preschoolers and their families:

- Making A Difference Head Start strives to make a positive difference in the lives of the children, families, and staff. We seek to make a lasting impact that encourages life-long learning and makes a positive contribution to society.
- High Quality Head Start aims to maintain high quality in our interactions with children, families, communities, and partnering organizations. We promote standards that meet or exceed the best known practices for early childhood education, family partnering, community collaboration, and ongoing staff enhancement.
- Commitment and Teamwork Through shared partnering and participation between program staff and families, the children will benefit from our full commitment. Head Start believes that, through hard work, we will be able to encourage, educate, and support our program participants.
- Accountability With committed professional staff, we will provide the tools
 necessary to achieve positive outcomes and instill growth in our children and
 families.

As a result of these core values, we will be a driving force in promoting self-sufficiency in our communities.

CONFIDENTIALITY POLICY

Confidentiality or right to privacy, for our Head Start families, children, and staff is crucial. The following is the agency policy on confidentiality as written in the personnel manual:

- 1. Until a program, policy, or procedure is formally announced or published, it is considered a matter of confidentiality, and shall not be discussed outside of appropriate staff, board, or councils of Community Action Program, Inc. of Western Indiana.
- 2. Every employee of Community Action Program, Inc. of Western Indiana is morally and ethically bound to keep all records and conversations of participants confidential. Sharing these records and conversation of participants with other staff directly involved with the client will not be considered a breach of confidentiality. Information sharing with other service agencies directly involved with the client will also not be considered a breach of confidentiality, providing the participants authorized it and signed a Release of Information form.
- 3. Files containing confidential information concerning CAP employees or participants are to be accessible only by authorized personnel.
- 4. All personnel matters, including but not limited to disciplinary action, grievances, and supervisory decisions, are considered matters of confidentiality. Discussions of such outside the appropriate and established channels of communication will be considered a violation of confidentiality.
- 5. Any breach of confidentiality shall be considered grounds for disciplinary action and could result in termination.

In general, please follow these guidelines:

- Do not discuss family or child situations in front of other parents, volunteers, or children.
- Do not discuss family or child situations in public places (restaurants, sporting events, community functions, grocery store)
- No information concerning Head Start matters can be given out or discussed with anyone outside of our program without a Release of Information form.
- Any information with other agencies involved with the family should be on a "Need to Know" basis.
- Facebook and other online social networks are not places to discuss any aspect of our work

Breaking confidentiality is a serious offense and will not be taken lightly.

Don't risk your job by saying too much!

Head Start/Early Head Start Child Discipline Policy

- 1) All forms of discipline are viewed as part of a comprehensive approach to behavior support designed to teach, nurture, and encourage positive social behavior.
- 2) Children will be respectfully guided by using POSITIVE correction first. This will be done by using statements such as: "Use your indoor voice" or "Let's use our walking feet."
- 3) Home Visitors and parents will guide children in learning: problem solving, cause and effect reasoning, negotiation skills, and logical and natural consequences while interacting with other children.
- 4) Children will be re-directed from unacceptable activities/behaviors to ones that are appropriate. Example: "It's not okay to pull Tommy off the bike. What can we do until it's your turn to ride?"
- 5) The "Be By Myself" area will be used when a child's behavior indicates harm to him/herself, others or to the classroom environment. At the beginning of the school year, the "Be By Myself "area is introduced to the children in each classroom. This is also explained to parents at the first home visit or parent group.
 - a. Establish a "Be By Myself" area in the classroom that can be easily supervised by teaching staff.
 - b. The teaching staff will refrain from lecturing or commenting to the child about the behavior on the way to the "Be By Myself" area.
 - c. A child will remain in the "Be By Myself" area until he/she is calmed and ready to resume normal classroom activities.
 - d. Once the child is ready to resume classroom activities the staff will accompany the child and remain with him/her until he/she is engaged in an activity and comfortable.
 - e. Any discussion regarding the incident may occur during a positive conversation as a form of support and problem solving to teach new skills.

Please note: As stated in the Indiana Rules for Licensing Child Care Centers, "Discipline means the ongoing process of helping children to develop self-control for self-management while protecting and maintaining the integrity of the child."

The "Be By Myself" area should be used for preschool-aged children only. Early Head Start children may be re-directed as their highest level of discipline.

CORPORAL PUNISHMENT

Such as

Spanking, hitting, or ANY physical discipline

IS NOT ALLOWED

Under any circumstances in the Head Start programs, or at any Head Start sponsored activities.

Community Action Program, Inc. of Western Indiana Head Start and Early Head Start

Procedures for Active Supervision Keeping Children Safe

Active Supervision is a set of strategies for supervising infants, toddlers, and preschool children in the following areas: agency classrooms, field trips, socializations (play groups), as well as on the playground and school buses.

Children learn best when they are in safe, well-supervised environments. Head Start staff can reduce the possibility of a child getting hurt when they closely observe children and respond when needed. Using redundant strategies to ensure no child is left unattended is a way of making certain that all children are safe and free to learn in the best way suited to their stage of development.

Use the resources below, in addition to training you receive, to ensure that you are providing a safe and well supervised environment for the children in your care.

Zoning to Maximize Learning

Create a daily classroom schedule

for the children and teachers to follow. This helps to keep the day predictable for all members of the classroom community.

Create a chart

that specifies which teacher is in charge of which area/ activity, as well as what individual duties are during the transitions before and after the activity. Zoning allows every member of the team to be accountable and informed.

Position your body

so you are always able to see the children. If you are on your knees in the classroom, be sure you can see over the shelving units so that you are aware of the children's whereabouts at all times.

Scan your assigned area

and the rest of the classroom at all times. This allows staff members to be constantly aware of what is happening in the classroom.

Talk to the other staff members

in the classroom throughout the day. Be sure to highlight positive behaviors you see the children engaging in, "Wow, look at these children trading toys so nicely", as well as address any issues that may arise, "Teacher Teri, I need to help Oscar wash his hands, can you cover my area?"

from the National Center on Quality Teaching and Learning

Transitions

Transitions are often the most challenging times to supervise children. To prevent children from being left unsupervised, our program has specific strategies for managing transitions throughout the day:

- Each classroom has specific plans for regular routines, such as on/off bus or pick up/drop off times, including staff assignments (who will monitor the door, etc.)
- All adults know when transitions will take place and are in position to provide constant supervision
- The teaching team will adjust to maintain appropriate adult-to-child ratio at all times.
- All staff will work to limit, or eliminate, the amount of time children are waiting in line to transition.
- All staff will reaffirm to children what adults expect during transitions
- · Count heads, count heads, count heads

Specific expectations:

- A classroom roster and emergency forms are with staff whenever they are away from the center (field trips)
- Children are counted and attendance is taken every time they enter or leave the bus.
- Bus drivers check each seat at the end of each stop before deactivating the child reminder system
- Count heads, count heads at multiple points throughout the day

Hazard Mapping

Hazard mapping offers a process for reducing environmental child injuries within the classroom/center setting. This involves a four step process:

- 1) Identify high risk injury locations
- Pinpoint systems and services that need to be strengthened
- 2) Develop a corrective action plan
- 4) Incorporate hazard mapping in to ongoing-monitoring activities

More information about hazard mapping can be found at http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/safety-injuryprevention/safe-healthy-environments/hazard-mapping.html







. No spece has a responsibility to being philosome and all Tales and the all the resistance will be described by the All and the state of the All and the state of the state o



COMMUNITY ACTION PROGRAM

OF

WESTERN INDIANA HEAD START

PROCEDURE FOR HANDLING SUSPECTED ABUSE AND NEGLECT

The purpose of this child abuse and neglect policy is three-fold:

- 1. To aid in the prevention and elimination of child abuse and neglect.
- 2. To establish a close working relationship with our protective service agencies.
- 3. To assist our program to be as knowledgeable as possible about the problem of child abuse and neglect.

PROCEDURES FOR HANDLING SUSPECTED ABUSE AND NEGLECT

The Family Services Specialist is the central coordinator for all child abuse and neglect activities, including training, reporting and follow-up procedures.

I. If a child is in immediate danger or requires immediate medical attention:

- a. Call 911
- b. Complete FS 16 Head Start Child Abuse Report Documentation,
- c. Notify the Indiana Child Abuse Hotline 1-800-800-5556
- d. Contact the Head Start Health Services Specialist for instruction on how to proceed.
- e. Contact the Family Services Specialist to update on the report and call to Indiana Child Abuse Hotline.
- f. Document observations and CPS contact on Head Start Family Service Log/Head Start Child's Health Chart.

II. If child is not in immediate danger or doesn't require immediate medical attention:

- a. Complete FS 16 Head Start Child Abuse Report Documentation
- b. Notify the Indiana Child Abuse Hotline 1-800-800-5556
- c. Contact the Family Services Specialist to update on the report and call to Indiana Child Abuse Hotline.
- d. The Family Service Specialist will determine whether the parent should be notified of the report. If parent or guardian is to be notified, determine when, how and by whom.
- e. Document observations and CPS contact on Head Start Family Service Log/Head Start Child's Health Chart.

III. If behavioral or physical observations lead you to be concerned that abuse/neglect may be occurring:

- Discuss your observations with the Family Service Specialist who will decide if there is enough information to warrant making a report.
- b. Document concerns and observations on the Family Service/Health Observation log. Be sure to include dates, times, persons involved, description of incident, etc. You may be requested to begin an anecdotal record of your observations on that child. Anecdotal records are factual, objective accounts of the incident.
- c. Complete FS 16 Head Start Child Abuse Report Documentation
- d. Notify the Indiana Child Abuse Hotline 1-800-800-5556.
- e. Family Service Specialist will discuss with you any actions that need to be taken with the family.

IV. In the event that a HS employee is suspected of an act of abuse or neglect

- a. The HS Director will take appropriate action according to the personnel policy.
- b. A report will be filed with Indiana Child Abuse Hotline 1-800-800-5556
- c. A report will be filed with FSSA Office of Early Childhood and Out of School Learning Individual Child Care Center Licensing Consultant
- d. The Director will meet with the child's parents or guardians.

V. Orientation and training of HS staff:

- All staff members will receive a basic orientation during the first 2 weeks of employment focusing on identifying and reporting child abuse and neglect.
- b. Additional training specifically relating to individual roles and responsibilities will be offered annually for the employees.

VI. Orientation and Training for Head Start Parents and Guardians:

- Parents and guardians will receive a basic orientation during their initial enrollment process in which they will be informed of the following:
 - 1. Head Start's role in reporting suspected child abuse and neglect.
 - 2. Head Start's role in serving as an advocate for Head Start families.
 - 3. Parent training activities that will assist them in improving their child-rearing practices and increase their knowledge of child development.
 - 4. This information will be found in written form in the Parent Handbook.
- Parents may attend all staff training sessions relating to child abuse and neglect.
- The Child Abuse and Neglect Program Policy will be made available to all parents.
- Further training on the subject of child abuse and neglect will be made available for parents on request.

VII. Confidentiality

- a. All records relating to suspected child abuse or neglect will be kept in locked files.
- b. Persons wishing to review the records will need to follow the Head Start confidentiality policy.

RELEASE OF CHILDREN FROM THE CENTER OR OTHER HEAD START ACTIVITIES

DEPARTURE

Only persons authorized by the parent/guardian are permitted to take a child from the center. Parents must list the names of all those who might escort the child on the Emergency Contact form. Under no circumstances will any child be permitted to leave with anyone other than those people designated in writing on the proper authorization form. Anyone picking up a child who is not familiar to you should be asked to show a photo ID to assure that they are able to take the child.

Additionally, no child will be released to anyone, even the parent or guardian, whose appearance or behavior indicates that they are intoxicated or impaired. In cases where adults come into the center or other Head Start activity and their condition raises concerns, other authorized adults should be contacted to assure that the child leaves the center under appropriate care.

LATE PICK-UP

For Children Who Ride Head Start Buses: When returning the child home on the school bus, the bus should not leave until a parent or person listed on the emergency contact from is visible. If a parent or responsible adult is not home to receive the child, the child will be returned to the center. Children cannot be dropped off with other individuals unless they are listed on the emergency list.

If any child is not picked up by 4:30pm at our Head Start center (or 5:30pm for CAP Kids), the Division of Children's Services should be contacted and the child should be taken to the local police department.

DRESS CODE

Your appearance during working hours serves as a direct reflection of the Agency, our specific program, and yourself. For many of our families, we serve as a role-model that they may try to emulate. As stated in the agency personnel policies:

Appropriate dress and personal grooming create a favorable image for Community Action Program, Inc. of Western Indiana. We expect employees to use good judgment and to maintain high standards in their personal cleanliness and attire.

Please keep your dress as follow:

- o Clothes should be comfortable and appropriate for sitting on the floor with children
- O Skirts or dress shorts may not be higher than mid-thigh.
- o Sweatshirts or t-shirts should not have writing, statements, etc. Logos are okay.
- Jeans are not appropriate for teaching/social service staff. Cooks and bus drivers may wear jeans that are in good condition. No tattered edged, rips, etc.
- o Flip flops are not safe footwear and are not allowed.

Agency personnel policies state:

Community Action Program, Inc. of Western Indiana reserves the right to determine that particular attire is inappropriate for its business and to inform and instruct employees to change inappropriate attire.



STAFF ATTENDANCE POLICY

PTO (Paid Time Off) is accrued at the beginning of each month.

All time away from work must be requested through your immediate supervisor. These requests must be discussed or submitted to your supervisor at least FIVE days in advance of the day you wish to request. If you are requesting leave for an emergency, call your supervisor as soon as you know you will be away from work. Complete the time off request from on https://landing.paychex.com as soon as possible.

Request for intermittent leave without pay should be reserved for unusual or unavoidable situations that necessitate a reduced work day or work week. Requests must be on the proper form (green leave request sheet) and approved by the immediate supervisor, program director, and Executive Director. Leave without pay requests will be approved on a case-by-case basis. Frequent absenteeism without good cause may result in disciplinary action up to and including termination.

For Head Start Academic Year staff: Excessive absenteeism has been defined as four or more days missed without pay in a school year for reasons other than extreme emergency, illness, or death in the immediate family. Excessive absenteeism may deem an employee ineligible for recall from summer layoff.

Please keep in mind that your request for leave can be denied.

- If you know that you will be missing work, it is YOUR responsibility to secure a replacement while you are gone. Each center should keep a list of potential paid aides and substitute bus drivers to assist in this process.
- In cases of emergency, you must contact your immediate supervisor, as well as your coworkers, as soon as you realize that you will be absent from work. This will allow sufficient plans to be made to cover your duties during your absence.
- You must make sure to notify any individuals who you were scheduled to meet with to cancel appointments and to them aware of your absence (ie. home visits, business meetings, etc.)

MILEAGE REIMBURSEMENT

Please see the agency Personnel Policies and Procedures Manual for a detailed explanation of Employee Expenses and Reimbursement.

Head Start Center-Based Employees are reimbursed for any travel from their first work related stop (either the center or first visit of the day) to their last work-related stop of the day (either the center or home visit).

Head Start Home-Based Employees are reimbursed for travel between home visits and work-related stops throughout the day. Mileage reimbursement to and from the home visits will be determined based on one way travel to the closest destination:

- 1. If a home visit is closer to your residence than the distance between the residence and the county center, no mileage will be paid.
- 2. On home visit days (Mon, Tues, Weds.), it is not typical for visitors to start or end their day from the Head Start center. Mileage will be reimbursed for travel from the closest distance: from the county center to the home visit, or from the residence to the home visit (unless #1 above applies)

For home visitors who live outside of the county they serve, mileage reimbursement decisions should be discussed with your immediate supervisor. Travel will not be reimbursed for start or end at HS center sites or county CAP offices.

MILEAGE REIMBURSEMENT FORM

The mileage sheet is an Excel document that should be saved to your office computers. Each entry should begin with 'from' and list all areas you traveled to. The purpose of your travels must also be included. Mileage should be counted from your first stop or base station to your last work-related stop of the day. You must use actual odometer readings.

Complete name, program, odometer readings, etc. The total miles traveled will automatically calculate and total the entire mileage sheet. Complete reimbursement rate. The current reimbursement rate is 50 cents a mile. You should also enter travel expenses, when applicable (normally parking for a conference). You will need to submit those receipts either by scan or regular mail. Make sure you do that immediately. And write your name on the receipt.

Submission of Mileage Sheet:

You will notice at the signature section it states this is an electronic signature, in lieu of the employee's and supervisor's written signature. You will also note a section that says "email verified by".

1. Type in your name and date

- 2. Forward as an attachment to your supervisor for signature
- 3. SUPERVISOR it is YOUR responsibility to forward the document on to Kelly Mitchell at kmitchell@capwi.org. To Central Office supervisors, print mileage and give to HS Director for approval.
- 4. The mileage sheet must be received by Kelly by 2:00 p.m. on Monday following the end of the pay period.
- 5. Kelly will verify that the document actually came from **your supervisor's email** address.
- 6. If your mileage sheet is received after 2:00 p.m. on Monday, it will be processed with the next pay period.
- 7. You may still submit a paper mileage sheet. However, if it isn't received by Monday at 2:00 p.m., it will be processed the following pay period.

TIMESHEETS

- Timesheets are done online through the website of https://landing.paychex.com in two week increments.
- Timesheets should be completed and entered before 9:00 am on Monday following the end of the pay period.
- Remember to mark 'save all' and the small file emblem in order to correctly submit your timesheet.
- The system is designed to request a new password occasionally. This is a standard practice and should not alarm you.
- Timesheets should reflect exact hours worked each day (ie. PAWS night may show you worked 10 hours and then you work only 6 the following day).
- No employee can work over 40 hours on agency business without prior permission from the Head Start Director.

Personal Cellular Phone Usage

Most staff members have personal cellular telephones that they utilize during working hours. The following procedures will be used when accessing personal cellular phones while at work:

- 1. Personal cell phones may not be turned on or utilized during times when staff members are working within the classrooms, playground, etc. (Phones should not be in classrooms/playgrounds during hours that children are present)
- 2. Home visitors, family facilitators, and other similarly employed staff may utilize personal cellular phones while out of the offices for work related matters.
- 3. Cell phones may not be taken into the home during visits. They should be left in the vehicle and staff can check for messages when returning to their car.
- 4. No staff member may have cellular phones turned on during any type of staff training, meeting, or other community event in which you are representing the agency. It is disruptive to others in attendance and rude to the presenters.
- 5. Personal cellular phones may be utilized during designated break times for any staff member.

Misuse of personal cellular phones during working hours is disruptive to our children and families. It can also lead to disruptions to the working environment. Please remember that we are responsible for the well-being of our Head Start children and families during working hours and need to have our focus on the tasks at hand. Failure to adhere to cellular phone policies can result in disciplinary action.

Drink/Snack Rules for the Classrooms

As adults in the Head Start classroom, our role is to model appropriate behaviors for both the children in our care and the adult parents/volunteers. In order to do this most effectively, while still meeting the guidelines and regulations of Head Start and Indiana Child Care Licensing, the following will be followed:

- 1. No outside foods or drinks are allowed in the classrooms during times when children are present. This means that staff or volunteers cannot bring in their own drinks during class time. All adults are encouraged to use the water fountains if they are in need of a drink. Any snacks can be consumed during your scheduled break time.
- 2. Classroom staff members are to sit and eat with the children at meal times. If you do not care for the foods being served, you are still expected to place the servings onto your plate and act as if you are enjoying the meal. (It is really no different than being a guest in someone's home and using proper etiquette.)
- 3. Meals are prepared for the children following the menus and guidelines of our Child and Adult Care Food Program (CACFP) contract. Although changes are made to meet the food needs of our children, there are no changes to meet the food needs of staff or other adults. If you have special food or dietary requirements, those will need to be addressed during your scheduled break times.

HEAD START CELLULAR PHONE POLICIES

CAP Vehicle Cellular Phones

The following procedures will be used when accessing the cellular phones while operating vehicles with the Head Start program:

- 1. The center drivers will contact the Head Start center to relay messages for emergency calls. All center staff must have access to emergency authorization numbers in order to assist the drivers in relaying messages or information.
- 2. Drivers may access cellular phones for these purposes:
 - A. Child illness emergency only
 - B. Bus problems
 - C. Parents not home

Before 4:30 - call center so they can make contact After 4:30 - call emergency numbers of child

- D. Route changes (ex: tree down, bridge closed)
- E. Weather (flooding, snow)
- 3. Cellular numbers are **NOT** to be given to Head Start families or anyone else. They should be encouraged to contact the center.
- 4. Buses must be off of the road in order for a cellular phone to be in use.

Please remember that the bus cellular phones are available in order to ensure the safety of the children we are transporting. It is not appropriate for drivers to be spending time on phones when the job of transporting our active preschoolers is such a great responsibility.

The key point is that our cellular phones are for emergency use only.

As stated in CAP Employee Handbook

"Driver distraction can be defined as the voluntary or involuntary diversion of attention from the primary driving tasks due to an object, event, or person that shifts the attention away from the fundamental driving task. The diversion reduces a driver's situational awareness, decision making, or performance; and it may result in a crash, near-crash, or unintended lane departure by the driver.

Therefore, the use of cell phones, texting, or other forms of wireless communication devices while driving are prohibited while transporting clients, children, or other staff. Violation of this policy may include termination."

CAP, Inc. of Western Indiana Head Start Division Tobacco-Free Policy for Facilities/Functions

Because there in considerable evidence that environmental tobacco smoke is harmful to children and adults,--and because Head Start has the mission of promoting the healthy development of the children and families it serves, it in imperative that all Head Start programs create smoke-free environments.

The Head Start Division abides by a tobacco-free policy within all Head Start facilities, on any grounds utilized by the Head Start facility or for Head Start activities, and in the homes of any clients. These stringent limitations are the results of what is best practice for the young children and their families that we serve.

These policies are inclusive of any group socialization activities (which include field trips, neighborhood walks or other outdoor group activities). It is our intent to have parents and staff refrain from smoking when Head Start activities are taking place. Parents and staff should recognize that they serve as role models for the children and should not smoke or use tobacco products in front of them.

Our CAP Policy states that all buildings and vehicles owned, leased or utilized by the agency will be tobacco free. This policy will be in effect both during and after working hours in all agency-utilized buildings and vehicles.

The 5-Star Environmental Program guidelines state that our centers must implement a 100% tobacco free facility and grounds.

This policy will be strictly enforced.



CHILD ATTENDANCE POLICY

Center Base

All children are expected to maintain an attendance rate of 85% or higher for daily center-based attendance.

- 1. Attendance is recorded daily by bus drivers and teachers who report to the Center Facilitator and/or ERSEA Coordinator if a child has been absent for three consecutive days.
- 2. The Center Facilitator or Teacher/Family Facilitator contacts families of absent children to determine the cause of absenteeism and completes the daily entry of attendance on ChildPlus, specifying the cause of absences in 'attendance notes'.
- 3. If needed, the family can be referred to the Family Services Coordinator for support services.
- 4. If a child is absent for 3 consecutive days or in a pattern (a particular day of the week or time of the month), report the absences to the ERSEA Coordinator and appropriate area managers.
- 5. Excessive absences will need to be addressed. The family may need support services in addition to an Attendance Improvement Action Plan to determine continued enrollment.
- 6. Consult the Policy and Procedure Manual for more detailed information.

Home Base

- 1. Attendance is recorded at each home visit, playgroup, and field trip, specifying the cause of absences in 'attendance notes.'
- 2. Cancellations due to staff absences are to be made up within two weeks.
- 3. If a family is absent for 3 consecutive home visits, the Home Visitor will consult with the ERSEA Coordinator and appropriate area managers, as needed, for support services and to determine continued enrollment.
- 5. Consult the Policy and Procedure Manual for more detailed information.

Excused Absences for Home and Center Base

A child's absences will be reviewed with parents/guardians. The child will be excused from the program providing absences fall into one of the following categories:

- 1. Child has illness or serious injury
- 2. Child is hospitalized
- 3. Child has communicable disease
- 4. Death in child's family
- 5. Child is receiving medical treatment or therapy
- 6. Temporary family situation
- 7. Hazardous driving conditions
- 8. Cultural and/or religious family activities

Consult the Exclusion Policies and Procedures to determine whether an absence due to illness is excusable.

HEAD START EXCLUSION POLICIES AND PROCEDURES

Colds and Fiu Colds and Fiu Conjunctivitis (Pink Eye) Conjunctivitis (Pink Eye) Conjunctivitis (Pink Eye) Conjunctivitis (Pink Eye) Cytomegalovirus (CMV) Feyer Cytomegalovirus (CMV) A child with CMV does not need to stay home. Cytomegalovirus (CMV) Cytomegalovirus (CMV) A child with CMV does not need to stay home. Cytomegalovirus (CMV) Cytomegalovirus (CMV) A child with CMV does not need to stay home. Cytomegalovirus (CMV) Children with fifth disease do not need to stay home as long as they feel well enough to participate to participate in sersolved. Children with fifth disease do not need to stay home as long as they feel well enough to participate in sersolved. Children with fifth disease do not need to stay home as long as they feel well enough to participate in activities. Children with participate in activities. Children can attend school as long as they feel well enough to participate in activities. Children with completed, and he or she is free of nits. One week after the start of jaundice and until the child feels well enough to participate. "Chronol Carrier" can attend as long as they feel well enough to participate. "Chronol Carrier" can attend as long as they feel well enough to participate. Seep them home if they feel well enough to participate, have oozing skin lesions that can't be covered, or other contagious conditions. Meningilis Meningilis	Condition	Return When
are scabbed over Colds and Flu Colds and Flu Children with colds or flu can attend school as long as they feel well enough to participate. Conjunctivitis (Pink Eye) Until 24 hours after the start of antiblotic treatment, and until there is no discharge form the eyes. Cytomegalovirus (CMV) A child with CMV does not need to stay home. Ferver Until 24 hours after temperature has returned to normal. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral with fifth disease do not need to stay home as long as they feel well enough to participate. Cideral well enough to participate in activities. Cideral well enough to participate. Cideral well enough to participate. Cideral with HIV/AIDS can attend school as long as they feel well enough to participate. Cideral with HIV/AIDS can attend school as long as they feel well enough to participate, keep them home if they are too sick to participate, have oxing skin leaded in the covered. Cideral with HIV/AIDS can attend school as long as they feel well enough to participate, have oxing skin leaded in the covered. Cideral with HIV/AIDS can attend school as long as they feel well enough to participate, have oxing skin leaded to can be covered. Cideral with HIV/AIDS can attend school as long as they feel well enough to participate, have oxing skin leaded to can be covered. Cideral with HIV/AIDS can attend school as long as they fe		Until six days after the start of rash or when the lesions
Colds and Flu Conjunctivitis (Pink Eye) Conjunctivitis (Pink Eye) Conjunctivitis (Pink Eye) Color each of the color of	Officient ox	
Ihey feel well enough to participate. Conjunctivitis (Pink Eye)	Colds and Flu	
Conjunctivitis (Pink Eye) Cytomegalovirus (CMV) A child with CMV does not need to stay home. Lintil 24 hours after temperature has returned to normal. Fifth Disease ("Slap Cheek") Children with fifth disease do not need to stay home as long as they feel well enough to participate. Giardíasis If child has diarrhea, child can return to the program after treatment and when diarrhea is resolved. Hand, Foot and Mouth Syndrome (Coxsackie Virus) Head Lice Head Lice After treatment is completed, and he or she is free of nits. One week after the start of jaundice and until the child feels well enough to participate in activities well enough to participate in activities. Hepatitis B Hepatitis B Hepatitis B Lintil 10 ne month after the start of jaundice and until the child feels well enough to participate in activities. "Chronic Carrier" can aften as long as they deel well enough to participate in activities well enough to participate in activities well enough to participate in activities. "Chronic Carrier" can aften as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. Lintil the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate. Keep them home if they are too sick to participate. Keep them home if they are too sick to participate, and continued the control of the participate in activities and the control of the control of the participate in activities and the control of the participate in the start of antibiotic treatment is started the participate. Lintil	Joolus and Hu	they feel well enough to participate
Until there is no discharge form the eyes. Cytornegalovirus (CMV) A child with CMV does not need to stay home. In this competency of the competency of th	Conjunctivitie (Pink Eva)	
Cytomegalovirus (CMV) A child with CMV does not need to stay home. Fever Until 24 hours after temperature has returned to normal. Fifth Disease ("Slap Cheek") Children with fifth disease do not need to stay home as long as they feel well enough to participate. Children with fifth disease do not need to stay home as long as they feel well enough to participate. Children with fifth disease do not need to stay home as long as they feel well enough to participate. Children can attend school as long as they feel well enough to participate in activities. Children can attend school as long as they feel well enough to participate in activities. Children can attend school as long as they feel well enough to participate in activities. Children can attend school as long as they feel well enough to participate in activities. Children can attend school as long as they feel well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or oozing skin lesions that can't be covered. Until the mounth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contagious conditions. Until 24 hours after the start of antibiotics treatment. Until 124 hours after the start of antibiotics treatment. Until 124 hours after the start of antibiotics treatment. Until 125 appears and until he or she feels well enough to participate the health provider says it's not contagious. Until 126 appears and until he or she feels well enough to participate. Until 126 appears and the or she feels well enough to participate. Until 126 appears and he or she feels well enough to participate. Until 126 appears and he or she feels well enough to participate. Until 126 appears and he or she	Conjunctività (i ilik Lye)	
Fever Until 24 hours after temperature has returned to normal.	Cutomanalovirus (CMV)	
Children with fifth disease do not need to stay home as long as they feel well enough to participate. Hand, Foot and Mouth Syndrome (Coxsackie Kirathand, Foot and Mouth Syndrome) Head Lice After treatment is completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she is free of nits, for a completed, and he or she feel well enough to participate. Children can attend when they feel well enough to participate. Until six days after the start of antibiotics treatment and until he or she feels well enough to participate. Until six days after the start of antibiotics treatment is started to completed. Until six days after the start of antibiotic treatment is capital completed. Until six days after the start of antibiotic treatment and until the fover is gone and the child feels well enough to partic		Intil 24 hours after temperature has returned to normal
long as they feel well enough to participate. If child has diarrhea, child can return to the program after treatment, and when diarrhea is resolved. Children can attend school as long as they feel well enough to participate. After treatment is completed, and he or she is free of nits, Children can attend school as long as they feel well enough to participate. After treatment is completed, and he or she is free of nits, Children can attend school as long as they feel well enough to participate. After treatment is completed, and he or she is free of nits, Children with the start of jaundice and until the child feels well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate. Chronic Carrier' can attend as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Until shows after the start of antibiotics treatment. Until shows after the start of antibiotics treatment and until he or she feels well enough to participate. Until shows after the start of antibiotic treatment and until he or she feels well enough to participate. Until says after the start of antibiotic treatment and un		
Giardiasis Hand, Foot and Mouth Syndrome (Coxsackle Hand, Foot and Mouth Syndrome (Coxsackle Virus) Head Lice Children can attend school as long as they feel well enough to participate. Hepatitis A One week after the start of jaundice and until the child feels well enough to participate in activities. Hepatitis B Until one month after the start of jaundice and until he or she feels well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they with the covered, or other contagious conditions. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Meningitis Mumps Until six days after the start of antibiotics treatment and until he or she feels well enough to participate Until intercontagious. Until six days after the start of swelling glands. Until intercontagious. Until intercontagious after the start of swelling glands. Until intercontagious. Until intercontagious after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started the child can return to school after treatment is started Children can attend when they feel well enough to participate. Until six days after the start of antibiotic treatment is started the child can return to school after treatment is started Children can attend when they feel well enough to participate. Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until six days after the start of ant	Luffi Disease (Slab otteer)	
treatment and when diarrhea is resolved. Children can attend school as long as they feel well onough to participate. After treatment is completed, and he or she is free of nits. One week after the start of jaundice and until the child feels well enough to participate in activities. Until one month after the start of jaundice and until to or she feels well enough to participate. Children with HIV/AIDS (human immunodeficiency virus/Acquired immunodeficiency virus/Acquired immunodeficiency virus/Acquired immunodeficiency syndrome Impetigo (human immunodeficiency virus/Acquired immunodeficiency vi	Clardicala	If child has diarrhea child can return to the program after
Hand, Foot and Mouth Syndrome (Coxsackie Virus) Children can attend school as long as they feel well enough to participate. After treatment is completed, and he or she is free of nits, After treatment is completed, and he or she is free of nits, One week after the start of jaundice and until the child feels well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or oozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they are too sick to participate, Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contaglous conditions. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Until six days after rash appears and until he or she feels well enough to participate the health provider says it's not contagious. Until five days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate the health provider says it's not contagious. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Until five days after the start of antibiotics treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment is started. Children can attend when they feel well enough to participate. Until six days after the start of antibiotic treatment and until the feels well enough to participat	Gialulasis	trootmont and when diarrhea is resolved
Head Lice	Hand Foot and Mouth Cundrama (Cayanalda	
Head Lice Hepatitis A One week after the start of jaundice and until the child feels well enough to participate in activities. Until one month after the start of jaundice and until the child feels well enough to participate in activities. Until one month after the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. HIV/AIDS (Human Immunodeficiency Wirus/Acquired Immunodeficiency Wirus/Acquired Immunodeficiency Syndrome (Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate, have ozing skin lesions that can't be covered, or other contaglous conditions. Until 4 hours after the start of antibiotics treatment. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Until six days after tash appears and until he or she feels well enough to participate. Until ine days after the start of swelling glands. Until five days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Until five days after the start of antibiotics treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health departmen		
Hepatitis A Hepatitis B Herpes Horizon at the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate, have ozing skin lesions that can't be covered, or other contagious conditions. Until the Diarrhea is resolved. If it's a bacterial or parasite infectious Diarrhea Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Until six days after rash appears and until he or she feels well enough to participate the health provider says it's not contagious. Mumps Until nine days after the start of swelling glands. Pertussis (Whooping Cough) Until rive days after the start of swelling glands. Vour child can return to school after treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started to save after the start of antibiotics treatment and until he or she feels well enough to participate. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Children can attend when they feel well enough to participate. Children can attend when they feel well enough to participate. After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fover is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fover is gone and the child feels well enough to participate.	Viius)	
feels well enough to participate in activities.		
Hepatitis B Until one month after the start of jaundice and until he or she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or oozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they derive with HIV/AIDS can attend school as long as they dere well enough to participate. Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contaglous conditions. Until 24 hours after the start of antibiotics treatment. Until six days after rash appears and until he or she feels well enough to participate Until six days after the health provider says it's not contagious. Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until inine days after the start of antibiotics treatment and until he or she feels well enough to participate. Vour child can return to school after treatment is started to secola Children can attend when they feel well enough to participate. Until six days after the start of antibiotics treatment is started contagious. Until five days after the start of antibiotics treatment is started than a treatment of an attend to school after treatment is started contagious. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment is started to participate. Until six days after the start of antibiotic treatment is started to participate. Until six days after the start of antibiotic treatment is completed. Until six days after the start of antibiotic treatment and until he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until he fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine	nepauls A	
she feels well enough to participate. "Chronic Carrier" can attend as long as they don't have uncontrolled biting or oozing skin lesions that can't be covered. Until the mouth sores are healed or can be covered. Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they are too sick to participate. Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contagious conditions. Until 24 hours after the start of antibiotics treatment. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Until six days after rash appears and until he or she feels well enough to participate the health provider says it's not contagious. Until inine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate the health provider says it's not contagious. Until inine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started to can enter to school after treatment is started to children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment is started to participate. Until six days after the start of antibiotic treatment and until she fever is gone and the child feels well enough to participate. Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate.	Lanatitia D	
attend as long as they don't have uncontrolled biting or ozing skin lesions that can't be covered. Herpes Until the mouth sores are healed or can be covered. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate, have ozing skin lesions that can't be covered, or other contagious conditions. Infectious Diarrhea Infectious Diarrhea Until 124 hours after the start of antibiotics treatment. Until sky agreer as a peers and until he or she feels well enough to participate Infection the child must have received the appropriate treatment. Until sky agreer rash appears and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Until or she feels well enough to participate. Until dan return to school after treatment is started. Children can attend when they feel well enough to participate. Until sky days after the rash appears and he or she feels well enough to participate. Until sky days after the rash appears and he or she feels well enough to participate. Until sky days after the rash appears and he or she feels well enough to participate. Until sky days after the start of antibiotic treatment and until he or she feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	пераші в	pho fools well applied to participate "Chronic Carrier" can
New contagious New		
Herpes HIV/AIDS (Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Wirus/Acquired Immunodeficiency Syndrome Wirus/Acquired Immunodeficiency Syndrome Wirus/Acquired Immunodeficiency Syndrome Meetigo Infectious Diarrhea Infectious Diarrhea Infectious Diarrhea Infectious Diarrhea Infectious Diarrhea Infection the child must have received the appropriate treatment. Infection the child must have received the appropriate treatment. Intil six days after rash appears and until he or she feels well enough to participate the health provider says it's not contagious. Intil five days after the start of swelling glands. Intil five days after the start of smelling glands. Intil five days after the start of smelling glands. Intil five days after the start of antibiotics treatment and until he or she feels well enough to participate. Intil five days after the start of smelling glands. Intil five days after the start of smelling glands. Intil five days after the start of antibiotics treatment and until he or she feels well enough to participate. Intelligence an aftend when they feel well enough to participate. Intil six days after the rash appears and he or she feels well enough to participate. Intil five days after the start of antibiotic treatment is started. Intil six days after the start of antibiotic treatment is started. Intil six days after the start of antibiotic treatment is capate. Intil six days after the rash appears and he or she feels well enough to participate. Intil six days after the start of antibiotic treatment and until the feer is gone and the child feels well enough to participate. Intil 24 hours after the start of antibiotic treatment and until the feever is gone and the child feels well enough to participate. Intil 24 hours after the start of antibiotic treatment and until the feever is gone and the child feels well enough to participate. Intil 24 hours after the start of antibiotic treatment and until the feels well enough to participate. Intil six days after the start of antibiotic treatm		
Children with HIV/AIDS can attend school as long as they feel well enough to participate. Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contaglous conditions. Until 24 hours after the start of antibiotics treatment. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Until six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Until 124 hours after the start of antibiotics treatment. Until six days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. Children with HIV/AIDS can attend school as long as they feel well enough to participate. Until six days after the start of antibiotic treatment and until he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until in er she feels well enough to participate. Until six days after the start of antibiotic treatment and until the feever is gone and the child feels well enough to participate. Until six days after the start of antibiotic treatment and until the feels well enough to participate. Until six days after the start of antibiotic treatment and until the feels well enough to participate. Until six days after the start of antibiotic treatment end until he or she feels we	Harna	Until the mouth cores are healed or can be covered
feel well enough to participate. Keep them home if they are too sick to participate, have oozing skin lesions that can't be covered, or other contagious conditions. Infectious Diarrhea Infectious Diarrhea Infectious Diarrhea Infection the child must have received the appropriate infection the child must have received the appropriate treatment. Intil six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Intil five days after the start of swelling glands. Until nine days after the start of antibiotics treatment and until he or she feels well enough to participate. Intil five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. Intel day after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until six days after the start of antibiotic treatment and until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that		Children with UIVAIDS can afford school as long as they
are too sick to participate, have oozing skin lesions that can't be covered, or other contagious conditions. Infectious Diarrhea Infe	MIV/AIDS (Human immunodeliciency	
can't be covered, or other contagious conditions. In the circuit plant in the contagious conditions. In the circuit plant in the contagious conditions. In the circuit plant in the contagious plant in the contagious. In the child must have received the appropriate treatment. In the child must have received the appropriate treatment. In the child must have received the appropriate treatment. In the contagious and until he or she feels well enough to participate In the contagious. In the contagious after the start of swelling glands. In the contagious after the start of antibiotics treatment and until he or she feels well enough to participate. In the child can return to school after treatment is started to child can return to school after treatment is started. In the child can return to school after treatment is started. In th	Virus/Acquired immunoderciency syndrome	
Intell 24 hours after the start of antibiotics treatment. Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Until six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Mumps Until nine days after the start of swelling glands. Pertussis (Whooping Cough) Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 124 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 124 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate.		lean't be covered or other contagious conditions
Until the Diarrhea is resolved. If it's a bacterial or parasite infection the child must have received the appropriate treatment. Measles Meningitis Meningitis Meningitis Meningitis Muntil symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Mumps Until inine days after the start of swelling glands. Pertussis (Whooping Cough) Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started to seola Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment is cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 124 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 124 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	mnotica	I Intil 24 hours after the start of antihiotics treatment
infection the child must have received the appropriate treatment. Until six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Vour child can return to school after treatment is started the child can return to school after treatment is started. Children can attend when they feel well enough to participate. Children can attend when they feel well enough to participate. Children can attend when they feel well enough to participate. Cubella (German Measles) Until six days after the rash appears and he or she feels well enough to participate. After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	nfeetige Diamboo	Until the Diarrhag is received. If it's a harterial or parasite
Iteratment. Until six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Until can return to school after treatment is started to seel well enough to participate. Until six days after the start of antibiotic treatment and until he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	medious Diamea	
Until six days after rash appears and until he or she feels well enough to participate Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Vour child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child can return to school after treatment is started to child return to school after treatment is started to child feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that		
Meningitis Meningitis Meningitis Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	llearles	
Until symptoms resolve and until he or she feels well enough to participate the health provider says it's not contagious. Mumps Pertussis (Whooping Cough) Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	VICASICS	well enough to participate
enough to participate the health provider says it's not contagious. Mumps Pertussis (Whooping Cough) Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Lubella (German Measles) Until six days after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	// Application	I Intil symptoms resolve and until he or she feels well
Contagious. Mumps Pertussis (Whooping Cough) Until nine days after the start of swelling glands. Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Limit of the treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	vioringias	enough to participate the health provider says it's not
Until nine days after the start of swelling glands. Pertussis (Whooping Cough) Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Limit of the child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that		
Pertussis (Whooping Cough) Until five days after the start of antibiotics treatment and until he or she feels well enough to participate. Your child can return to school after treatment is started. The child can return to school after treatment is started. Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Liber treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	/lumns	
until he or she feels well enough to participate. Your child can return to school after treatment is started The child can return to school after treatment is started Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Cables Cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	Perfussis (Whooping Cough)	Until five days after the start of antibiotics treatment and
Pinworms Your child can return to school after treatment is started The child can return to school after treatment is started Coseola Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	ortabolo (vvilooping obagil)	
The child can return to school after treatment is started Coseola Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Cables Cables Cables Catery treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	Pinworms	Your child can return to school after treatment is started
Children can attend when they feel well enough to participate. Until six days after the rash appears and he or she feels well enough to participate. Cables Cables Cables Catery treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that		
participate. Until six days after the rash appears and he or she feels well enough to participate. cables cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. uberculosis Until the doctor and/or health department determine that		
tubella (German Measles) Until six days after the rash appears and he or she feels well enough to participate. After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	NO SOLIN	
well enough to participate. cables After treatment is completed. Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. uberculosis well enough to participate. Until 124 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	tuhella (German Measles)	Until six days after the rash appears and he or she feels
cables After treatment is completed. treptococcal Infection (Strep throat, Scarlet ever) Until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	masin (southern monoray)	
treptococcal Infection (Strep throat, Scarlet until 24 hours after the start of antibiotic treatment and until the fever is gone and the child feels well enough to participate. Until the doctor and/or health department determine that	cables	
ever) until the fever is gone and the child feels well enough to participate. uberculosis Until the doctor and/or health department determine that		Until 24 hours after the start of antibiotic treatment and
participate. uberculosis Until the doctor and/or health department determine that		
uberculosis Until the doctor and/or health department determine that	0101/	
747 X M M M M M M M M M M M M M M M M M M	uherculosis	
	droi onionin	[HONEL - BROND HONEL HONE

Child/Adult Ratios

All Head Start and Early Head Start classrooms and playgroups must follow the adult/child ratios established by Indiana Child Licensing and/or the Head Start Performance Standards. We are mandated to follow whichever regulation is most stringent. Our program operates with the following ratios:

go	Infant	Toddler	Preschool
Class Size	1:4 (no more that 8 in one group)	1:4 (no more that 8 in one group)	1:10 (no more than 20 in one group. Double-session classrooms can have 17).

Methods for Maintaining Ratios:

- Be prepared! Assure that you have needed and extra supplies, materials, paperwork, etc. in the classroom so that both staff members can be present at all times.
- If a staff member must leave the classroom, they need to take children with them to assure that proper ratios are met.
- If outdoors and a child must use the restroom, the staff member will need to take the number of children along in order to meet ratios.
- Have volunteers!! These individuals can run errands and perform other duties that leave our paid staff members with the children.
- Please note that our Head Start regulations also state that two staff members must be with the children at all times. You cannot allow a staff member to leave when there are less than ten children in attendance.
- Access the walkie-talkie systems that are available in our larger centers to communicate with others in the building.
- Divide and conquer! For busy children, it might work to have ½ of the children outdoors while the other ½ are at freeplay.
- In cases of emergency or illness of the caregiver, another staff member must be placed into the classroom until an appropriate substitute caregiver can be contacted and arrives at the classroom.
- Children can never be left unattended or in situations where the ratio would rise above 1:10.

FIELD TRIPS

Head Start (preschool-aged)

Our Head Start field trips are a social and fun event for our children. We want all of our parents to participate as volunteers during our outings but these activities are not established to be attended by siblings. These guidelines are to be followed by all Head Start staff and are outlined for parents in the parent handbook (see page 11).

- 1. Only infants (6 months and under) are allowed to come with the parents on field trips. If parents brings the infant, he/she must provide transportation for that infant. Head Start staff are not to transport siblings on field trips.
- 2. No other siblings may attend field trips.
- 3. Please encourage the parent to provide a babysitter for all siblings.
- 4. No smoking is allowed by staff or parents during any Head Start function.
- 5. No weapons are allowed by staff or parents during any Head Start function.
- 6. Occasionally, a field trip may involve Head Start paying admission fees. The following ratio system has been developed for such trips:

 Head Start will pay parent admission fees for:
 - I adult to every 3 center-based children attending I adult to every I home-based child attending

Early Head Start

The Early Head Start program may take occasional field trips based on the ages of the children on the caseload. These guidelines are to be followed by EHS staff and parents:

- 1. All children must be in proper car seat restraint systems in order to participate.
- No smoking is allowed by staff or parents during any EHS function.
- 3. No weapons are allowed by staff or parents during any EHS function.

PLEASE NOTE: All fieldtrips must be requested following the procedures directed by the Child Development Services Specialist.

Staff may not bring their own children/relatives on field trips.

WEATHER CLOSINGS

During inclement weather, it may be unsafe to expect our young children to be transported to and from school. The guidelines for weather closings are as follows:

Center Based

If a public school district served by the center is closed, Head Start buses will not operate and Head Start preschool classes will be cancelled. Staff will be expected to report to work as usual.

If a public school district served by the center delays opening, Head Start preschool morning classes will be on a one-hour delay (children should arrive at 9:30) but staff will be expected to report to work as usual.

If a public school district served by the center dismisses early, Head Start preschool classes will be dismissed <u>after</u> parents or emergency contacts have been notified. Staff will be expected to work as usual.

If a center is closed at the discretion of the Head Start Director, children will not attend but all staff will be required to report to work at the center.

If a center opens late or closes early at the discretion of the Head Start Director, staff will be expected to work as usual.

- No center can close at their own discretion. Closings must be approved by the Head Start Director.
- ☑ If staff leave prior to close of business (unless CAP has closed), they will be expected to use their leave credit.

PLEASE NOTE: CAP KIDS Head Start will only close when the CAP office is closed!

Home Base/Home Visits

If public school in the service area of your caseload is closed, the home visit can be cancelled but you may make contact with the family to proceed as scheduled. All home visits cancelled due to weather must be rescheduled within a two week period.

Home Base/Playgroup or Field Trips

If the public schools in your caseload's service area are closed, any playgroup or field trip will be cancelled. Field trips will need to be rescheduled. The first missed playgroup will be excused, any others will need to be rescheduled.

Home Visitor Safety

There may be occasions that, as a home visitor, you feel that you may be at risk when traveling in inclement weather. Home Visitors will need to contact their supervisor and caseload families to notify them of their decision. Any missed home visits must be rescheduled within a two week period.

*Note: A public school area served by the center is defined as a school district within the county where at least 20% of the center's children are residing.

Clean Daycares for Healthy Kids



- · Clean non-absorbent toys with soapy water, then rinse with clear water
- · Wipe dry with disposable paper towels
- · Sanitize by applying a chlorine bleach solution
- Air dry



Clean Hands

Wash hands carefully and frequently with spapy water, especially:

- After going to the bathroom
- · After changing diapers or cleaning body fluids
- · Before preparing foods or beverages

Wash hands for as long as it takes to hum the "Happy Birthday" song twice. Dry hands thoroughly using disposable paper towels.

> *Make bleach solutions fresh daily; keep out of reach of children; never mix bleach solution with other cleaners.







www.americanohernstry.com

www.disinfect-for-health.org

Our Head Start Program relies heavily on documentation for tracking and relaying information. It is the staff's responsibility to get these forms in to the Central Office as needed.

MONTHLY FORMS

Food Service Daily Meals Worksheet
Food Service Expense/Bills
Bus Logs and Bills
Mechanic's Monthly Inspection

Yellow
Blue
Blue

(every other month)

* Bus Daily Safety Checklist Blue

Child's Attendance Online on ChildPlus
Child's Meal Checklist Online on ChildPlus

Parent Volunteer/In-Kind Report Green

EVERY OTHER WEEK

Time Sheet Online on PayChex

Mileage Online with excel document

Bi-Weekly Time Planner White

IMMEDIATELY WHEN ACTION IS TAKEN (THESE SHOULD BE MAILED IN EACH FRIDAY)

Payment Vouchers/Bills White
Dental Form White
Paid Aide Payment Form White
Referral Form White
Parent Mileage (same as staff) Blue
Parent Babysitting Voucher Pink

Field Trip Request Salmon or Online

Physical Form White
Any Health Permission Slip Grey
Child Abuse Mandated Report Green
Intakes (COMPLETE) All Copies

IMMEDIATELY WHEN ACTION IS TAKEN

Change of Status (completed on ChildPlus)

Leave Request (Online on PayChex)

Absence Documentation (completed on ChildPlus)

All forms marked with a (*) indicate center-base only.

CONTINUITY OF CARE/TRANSITION

PRENATAL TO NEWBORN:

- Home Visitor will visit mom and baby in hospital.
- Home Visitor will complete a new application on newborn as well as documentation that is available.
- Home Visitor will complete Change of Status.

LEAVING EARLY HEAD START:

At 30 Months

- Home visitor/teacher will discuss up-coming Transition with parents.
- Home Visitor/teacher will contact First Steps Coordinator to obtain transition information (if applicable.)
- Home visitor/teacher will attend transition conference (if applicable.)
- Home visitor/teacher will deliver all conference information to Child Development Services Specialist (if applicable.)
- Home visitor/teacher will encourage parents not interested in or income eligible to research other preschool placements in the community.

At 33 Months

- Home visitor/teacher will turn in a completed application for Head Start
- Home visitor/teacher will make certain all documentation is current, Health, Education, and Family Service.

At 35-36 Months

- Home visitor/teacher will encourage parents to visit the Head Start classroom or community preschool.
- For children transitioning from FD/FY toddler room to the FD/FY preschool room, staff will allow for a transitioning period of at least 2 weeks whereas the child visits the preschool classroom for lengthening periods of time.
- For children receiving First Steps services the home visitor/teacher will obtain conference information for enrolled child to verify eligibility for further services.
- Home visitor/teacher will turn in all transition files to the Central Office making certain to include: transition date and reason for, first and last names of child and parent on all forms.
- Home visitor/teacher will complete Change of Status.

LEAVING HEAD START

- Children take field trips to their local kindergartens
- Children use milk cartons at mealtime in order to learn how to open the containers
- Packets are prepared and sent to schools with pertinent transition information.
- Kindergarten teachers or principals come and speak to parent groups.

Communication Plan and Systems For the Head Start and Early Head Start Program

The systems used for communication within our Head Start program are listed in the Program Design and Management Area Plan. This will serve to enhance the language available within the plan.

Communication is a key element in the success of the program with the families, community, and staff. The following plan outlines how the program will utilize systems, both formal and informal, to ensure that this level of communication works:

Communication with families:

Parent-staff interactions will be carried out in an effort to discuss program activities and policies through:

- Parent orientation which covers Head Start goals, procedures, expectations, etc.
 Staff review all forms and elements of Initial Home Visit packets (Week 0 and 1) during this orientation.
- o Parents receive a parent handbook which outlines the Head Start program as well as information that will allow them, as well as their children, to receive the highest possible benefit from the program.
- Open House events are held at each site to allow the staff to communicate classroom happenings to the parent and for the parent to ask questions regarding educational programming.
- o Families receive quarterly newsletters and a monthly calendar.
- O Center-based families receive visits within their home several times each year. Topics regarding the program activities, family goals, and child progress are topics that may be discussed.
- o All efforts are made to provide written and verbal communication to families in their primary language.

Communication with governing bodies and policy groups.

Policy Council:

 Members receive an orientation packet of performance standards, by-laws, established local policies and guidelines, and materials concerning the conduct of Policy Council business.

- o Members receive monthly financial reports of expenditures of HS grant and policy council funds and local contributions.
- o Members receive information each meeting concerning issues such as personnel policies, work plans, grant applications, community assessment, etc.

CAP Board:

- o Members receive updates of Head Start activities during each Board Meeting.
- Members receive financial reports for the agency, including Head Start during each Board meeting.

Communication with staff:

 Staff members receive information though staff meetings, staff newsletters, weekly mailings from the central office, continual and ongoing telephone and email communication, monthly center visits by administrative staff.

Record-Keeping systems

Record keeping is done through multiple sources such as:

ChildPlus Tracking
CACFP Food Service System
Health Care Tracking Systems
IFSP or IEP
Completed Family Referrals
On-going Monitoring
Family Partnership Agreement
In-Kind Documentation
Professional Development Plans
Bi-Annual Reports to Regional Office
PIR
Self-Assessment
Child/Family Records
Teaching Strategies GOLD

Each of these tools tends to represent a different aspect of the program although all of them relate together to create a system of comprehensive tracking services.

HEAD START BI-WEEKLY PLANNING CALENDAR

Name	Month	
This Week//	Next Week//	
Mon:		Priority items carried over
List names of appointments, times, and phone (or address)		Keep in mind that this lets your supervisor
		know what you will be working on, if you are on target, etc.
Tues:	Each day must reflect the actual hours worked.	
	This should match your timesheet for that date.	reflects what you are doing.
Wed:		
		Waiting for:
		•
Thurs:		
		On Deadline:
Fri:		
	This should be turned in at the beginning of each pay period.	
Major Goal:	2.	
WINDE TONE		5.

SPECIALISTS/COORDINATORS AND THEIR RESPONSIBILITIES

Child Development Services (Education/Disabilities)

Kim Swinson

classroom issues
child behavior issues
educational supplies
anything regarding disabilities (suspected or diagnosed)
communications with LEA
transition/case conferences
early educational information for parents
field trips
Education/Transition Committee

Family Partnership Services (Social Services)

Maria Gonzalez-Blacketer

issues of child abuse/neglect
parent concerns
inkind
volunteer information
mental health for families
home visiting general information
parent awareness
FSAC (Family Services Advisory Committee)

Health Services (Health/Nutrition)

Lori Brewer

child health concerns
health screenings
food service
licensing
physical/dental examinations
immunizations
communications with health care professionals
physician, dentist, Medicaid concerns
HSAC (Health Services Advisory Committee)

ERSEA

(Enrollment, Recruitment, Selection, Eligibility, & Attendance)

Julie Pettit

change of status for children/families recruitment information intakes/documentation enrollment all tracking input class rosters/ChildPlus reports office supply purchasing

SPECIALISTS/COORDINATORS AND THEIR RESPONSIBILITIES

Parent Resource

Kim Crowder

adult literacy information parent group issues and information communications with literacy programs transitioning to public school information sib sitter information family literacy issues paid aide issues

Director

Robin Curry-Shumaker

program concerns communication for facility agreements Policy Council grant/budget

Immediate Supervisor Role

timesheet and mileage approval PTO approval assuring that job description is being met overall job performance job performance assessment

CAP, Inc. of Western Indiana Head Start and Early Head Start

EMPLOYEE ACKNOWLEDGEMENT FORM HEAD START STAFF HANDBOOK

I acknowledge that I have received a copy of the Head Start and Early Head Start Staff Handbook. I understand that it is my responsibility to read this handbook and to comply with all policies contained within.

I further acknowledge that this Agency has the right, without prior notice, to modify, amend or terminate policies and practices within the limits and requirements imposed by law.

I understand that no statement contained in this handbook creates a guarantee of continued employment or an obligation, contractual or otherwise, on the part of Community Action Program. I understand that my employment is conditional based on my being able to perform the essential functions of the position with any necessary, appropriate, or reasonable accommodations.

Employee Signature:		
	•	
Date:	ya y	