



NORTHWEST MICHIGAN
Community Action Agency

2025-2026

Home Based Program Family Handbook



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Please visit our website

www.nmcaa.net

Child and Family Development

NMCAA Early childhood programs promote children's development through services that support early learning, health, safety, and family well-being.

NMCAA Commitment to Families

At NMCAA, we believe every child and family deserves to feel welcomed, respected, and supported. We value the experiences and strengths each family brings and strive to create a warm, responsive environment where families feel connected and are encouraged to take part in the community.

In accordance with Section 654 of the Head Start Act, our program will not discriminate on the basis of race, creed, color, national origin, sex, political affiliation, or beliefs in all programs, project, and activity operations.

NMCAA Program Philosophy

We believe that children need strong families in order to develop into mature adults who are productive members of society. Our goal is to nurture families. We will seek whatever support is available and advocate for what is needed to enable the children in each family to be successful in school and beyond.

Confidentiality

NMCAA Early Childhood programs value and respect the privacy of all families, children, caregivers, and staff. Education staff will only discuss information about your child with you. Private information will not be shared outside the Agency without your written permission. Families will also respect the rights of others when visiting socialization sites and attending program activities. Please refrain from discussing any child-to-child conversations, behaviors, or staff and family information outside the program.

Personally Identifiable Information

NMCAA Early Childhood Programs will inform parents/guardians of their rights regarding the disclosure of Personally Identifiable Information (PII) from child records. The Annual Notice of Personally Identifiable Information can be found on our website: www.nmcaa.net
A hard copy of the document will be provided upon your request.

WELCOME!
From our family to yours

Dear families,

Welcome to the Northwest Michigan Community Action Agency (NMCAA) family!

Whether you're an expectant parent or enrolling a child in one of our infant, toddler, or preschool programs, we are honored to be part of your journey. Thank you for choosing to partner with us in giving your child a strong and joyful start.

At NMCAA, we strive to create spaces where every child and family feels safe, supported, and truly seen. We invite you to share your family's traditions, values, and hopes – these insights help us to tailor our care and learning to meet your child's individual needs.

Family engagement is at the heart of all we do. Your voice and participation help shape our program and ensure it remains responsive and meaningful. Whether it's reading with our child at home, joining us for classroom activities, attending family events, or serving on Policy Council, there are many ways to be involved – big or small. We'll meet you where you are.

We're excited to get to know you and your child. We believe in the power of relationships and look forward to a year filled with connection, growth, and discovery – for your child, and for your whole family.

Please don't hesitate to reach out with questions, concerns, or ideas. We're here to support you every step of the way.

Sincerely,

Shannon Phelps (mother of Klayton and George)
Early Childhood Programs Director

Melanie Chaney (mother of Henry, Ellery, and Enslee)
Parent Policy Council Chairperson

231-947-3780 or 800-632-7334

www.nmcaa.net

Child-Development Home-Based Programming

Welcome to the Child-Development Home-Based program!

You are your child's first teacher! We value your input and involve you in every part of the program.

When you enroll in our Home-Based program, you take an important step in providing the best for your child, whether you are an expectant parent or a parent/guardian of an infant, toddler or preschooler. Our staff walk alongside families on their parenting journey.

Like a puzzle, the pieces of this program fit together to create a support system of information and opportunities for families and children.

*Our goal: a great start in life
for all infants, toddlers
and preschoolers*



Home Visits

- Each weekly visit is 1.5 hours in length, scheduled at a time that works for you and your child(ren).
- You will learn how regular daily activities and family routines help your child learn and grow.
- You will share with the home visitor all the new things your child is doing and learn what to expect next.
- There will be time during each home visit for questions or concerns about parenting or your child's development.

Playgroups and Family Engagement Activities

Playgroups are a time when children, families and caring staff come together to share experiences with each other and with other families.

For children:

- there are opportunities to learn new things
- there are new things to see, touch, hear and taste
- there are nutritious snacks to share with friends and family
- there is time spent with their favorite person – you!

For parents/guardians there are:

- opportunities to meet other parents and guardians
- different people to learn from or to ask questions
- many ways to help plan and give feedback about the playgroup

Family Engagement Activities/Workshops are based upon the NMCAA Early Childhood Parenting curriculum "Your Journey Together (YJT)." These are opportunities for learning and to meet other parents and caregivers with similar interests and questions.

NMCAA Early Childhood Parenting Curriculum: Your Journey Together

Your Journey Together (YJT) is a program that helps families develop skills to become stronger and more resilient. Being resilient means being able to handle and overcome challenges in life. YJT supports families in turning everyday routines and relationships into opportunities to build resilience. Protective Factors (positive and supportive relationships and resources) help build resilience.

YJT concepts and activities can be used during home visits and family engagement activities to meet individual family needs. YJT is sensitive to trauma and focuses on empowering families and creating safe, trusting, and healing relationships for all families, no matter their background.

Home-Based Program Options

All program options are designed to include children of all abilities.

EHS Home Visiting Program

- Serves expectant families and families with children birth to three
- Weekly Home Visits
- Year-round home visits support parents as their child's primary teacher
- Opportunities for families to attend playgroup experiences

Head Start Home Visiting Program

- Serves families with children who are 3 and 4 years old
- Weekly Home Visits
- Home visiting through the school year supports parents as their child's primary teacher
- Opportunities for families to attend playgroup experiences

All programs support education, health, and parent involvement, along with connecting families to resources!

Help Us Connect with Other Families-Spread the Word!

We need your help! As an enrolled family, you can help spread the word about all our 0-5 child development opportunities. Please share information regarding our program options with other families and encourage them to complete an online interest form at www.nmcaa.net or call us for an appointment with a recruitment specialist. Your efforts in sharing the benefits of these programs with others will help our program and impact the life of a child.

We are always taking applications! Use the QR Code to start the application today!



Benzie, Grand Traverse, and Leelanau Counties
231-947-3780 or 800-632-7334

Missaukee, Roscommon, and Wexford Counties
231-775-9781 or 800-443-2297

Antrim, Charlevoix, Emmet and Kalkaska Counties
231-347-9070 or 800-443-5518

NMCAA Grievance Procedure

- Unresolved grievances regarding NMCAA child development programs will be referred to the Early Childhood Programs Director and/or the Executive Director.
- Every attempt will be made to resolve the situation immediately. However, should an individual wish to file a formal grievance, they will use the NMCAA Program Grievance form.
- Upon receipt of the completed form, an interview with the complainant will be scheduled within 30 working days. A Notice of Grievance Review will be sent to the complainant with further information.
- Attendees:
 - Early Childhood Programs Director
 - Any pertinent staff members
 - A representative of the Policy Council Executive Committee
 - The grievance, with support they may choose
- The complaint will be reviewed, and appropriate action taken. Notice of this action will be mailed to the complainant within 5 working days.
- Should the complainant wish further review, all documents pertaining to the grievance will be forwarded to the Agency Executive Director with a request for review by the appropriate committee of the NMCAA Board of Directors. Action taken by the Board will be considered final.

This procedure will be posted at all centers, and socialization sites for parents and community members to access.

Head Start Parent/Guardian Participation Group and Policy Council

In Head Start, parents/guardians play many important roles and are a vital partner in the program's success.

HEAD START VIEWS ALL PARENTS/GUARDIANS AS THEIR CHILD'S MOST IMPORTANT TEACHER.

Parent/Guardian Participation Group

Parent/Guardian participation groups, family engagement activities, and playgroups provide opportunities that allow families and staff to work together and learn from one another while developing resilience, protective factors, and accomplishing shared goals. During these events, parents have opportunities to engage in the Head Start Parent and Community Engagement Outcomes: Family Well-Being, Positive Parent-Child Relationships, Families as Lifelong Educators, Families as Learners, Family Engagement in Transitions, Family Connections to Peers and Community and Families as Advocates and Leaders.

The HB parents within each home visitor's group elect a representative to serve on the Policy Council. Each Policy Council parent/guardian represents a home visitor's families and playgroup parents/guardians.

Policy Council

Policy Council is the governing body of the Head Start programs and acts as the parent's/guardian's voice in making decisions and providing input for the program. The Policy Council is comprised of both parents/guardians of currently enrolled children and representatives of our community.

Some of the responsibilities of Policy Council include review and approval of all major program policies, grant applications, annual assessments, and financial audits. Policy Council members actively participate in making decisions regarding the operation of the program. A representative is present at most hiring interviews for key personnel; their input is sought and given due consideration.

Elected Policy Council members are reimbursed for childcare and mileage from their home to the meeting site. Policy Council meets approximately 10 times per year and may take place remotely or in person. For either of these options, elected Policy Council members are eligible to receive reimbursement for childcare. When meetings take place in person, round trip mileage to the meeting site is also reimbursed.

Talk with your home visitor about how to become involved!

Volunteer Screening and Supervision Policy

NMCAA Policy: To ensure the safety and well-being of all children in care, NMCAA will screen volunteers following the Head Start Program Performance Standards, Great Start Readiness Program requirements, and the Licensing Rules for Child Care Centers. Volunteers will not have unsupervised contact with children unless they have completed the childcare background check process or have been added to the Child Information Record by the parent/guardian. **Volunteers cannot be counted in the ratio for childcare staff member to child ratios.**

Volunteers may include, but are not limited to, the following: ISD staff, mental health consultants, Foster Grandparents, guest speakers, interns, non-classroom staff, transitioning EHS families, and parents/family members of enrolled children.

**** Parents who spend time in the classroom, outside of regular drop off and pick up times, are considered volunteers and must complete the required screening paperwork. ****

Screening Procedures

- All supervised volunteers will receive a public sex offender registry (PSOR) clearance **before** having any contact with a child in care. **Any individual listed on the PSOR is prohibited from having contact with any child in care.**
 - **EXCEPTION:** Unsupervised 1755 consultants (TRAVERSE HEIGHTS) that have completed the CCBC process and been deemed “eligible,” will be connected to the identified license. These consultants will follow all CCLB/Head Start/GSRP requirements. These identified consultants, with permission and acknowledgement of the management staff, may be left alone with children.
 - ALL other ISD and mental health consultants will follow the Volunteer Screening Policy requirements, and when approved by the parent and documented on the Child Information Record, may meet with children alone after signing them out of the classroom.
- In addition to a PSOR/CCBC clearance, the center will review the **Annual Pre-Service Orientation Training-Volunteer** forms with the volunteer. This includes signing the **Staff and Volunteer Mandated Reporting Policy** acknowledging the following information:
 - The individual is aware that abuse and neglect of children is against the law.
 - The individual has been informed of the center’s policies on child abuse and neglect.
 - The individual knows that all staff and volunteers are required by law to immediately report suspected abuse and neglect to Children’s Protective Services (CPS).

The PSOR clearance and APOT must be completed on an annual basis for returning volunteers. The CCBC process must be followed per the Child Care Licensing Bureau requirements.

- A volunteer who has contact with children at least four hours per week for more than two consecutive weeks must be free from communicable tuberculosis (TB). Verification of TB status is required within one year before employment or volunteering. Volunteers are responsible for the cost of their TB test.
- All copies, including originals, must be kept on file at the site until the person no longer volunteers at the center.

PSOR Instructions

- Go to the [United States Department of Justice National Sex Offender Public Website \(nsopw.gov\)](https://www.nsopw.gov)
- Type the volunteers’ first and last name in the search by name boxes. Then click “name search”.
- Review the results of the search:

- Individuals without a profile or match on the PSOR may continue the volunteer process.
- Individuals with a detailed profile on the PSOR must **NOT** have contact with any child in care.

Print a copy of the search screen, regardless of the profile results and place in the volunteer's file.

Volunteering in the Classroom

- Volunteers with children will need to make other arrangements for their care while volunteering. We are unable to allow children not enrolled in that classroom to accompany the volunteer, unless they are an EHS/HS transitioning child.
- All volunteers shall provide appropriate care and supervision of children at all times.
- All volunteers shall act in a manner that is conducive to the welfare of children.
- Volunteer interests shall determine their role in the classroom.
- Staff shall provide guidance and clear expectations with volunteers to assist them in successfully carrying out assigned duties.

Staff and Volunteer Mandated Reporting Policy

Abuse and neglect of children is against the law. This document outlines the program's policies on the Child Protection Law, mandated reporting, and child/abuse neglect. Child and Family Development staff, childcare collaborative center staff, and center volunteers are mandated reporters and required by law to immediately report suspected abuse and neglect to Child Protective Services.

Upon Suspicion of Neglect/Abuse

When child abuse and/or neglect is suspected, the staff or volunteer needs to only obtain enough information to make a report. If a child or adult begins to disclose information regarding abuse and/or neglect, the staff/volunteer may only ask open-ended questions to avoid leading the child or adult during the conversation. If necessary, staff will determine whether a report needs to be made to the **Child Care Licensing Bureau (CCLB), Child Protection Services (CPS), Intermediate School District/Great Start Readiness Program (ISD/GSRP) consultant, and/or the Office of Head Start (OHS).**

- The staff/volunteer must not attempt to conduct their own investigation before or during the official investigation process by CCLB, CPS, and/or the OHS.
- Per Child Protective Services, do not contact the family when reporting suspected child abuse or neglect.
- If approached by an individual who suspects being reported to CPS, staff and volunteers will remind the individual of the mandated reporter requirements for childcare providers.

Reporting to CPS

Child and Family Development staff, childcare collaborative center staff, and center volunteers (including minors) are mandated reporters. Under the Child Protection Law, staff and volunteers must contact Child Protective Services (CPS) **immediately** when they suspect child abuse and/or neglect.

- Child Protective Services will be notified when:
 - Staff/volunteer suspects that a child has experienced abuse or neglect.
 - To make a report and/or access mandated reporting guidance, contact Child Protective Services at the Department of Health and Human Services Centralized Intake office at 1-855-444-3911 or make an online report at:

<https://www.michigan.gov/mdhhs/adult-child-serv/abuse-neglect/childrens/mandated-reporters>.

The report must be made to Centralized Intake by calling or filing an online report.

- If an online report has been filed, the reporting procedure is complete.
- If a verbal report has been made, a written report must follow. The Report of Suspected or Actual Child Abuse or Neglect (DHS-3200) form must be submitted to CPS within 72 hours.

The reporting person shall notify the person in charge or the next person in the line of supervision (Supervisor/Coordinator, Manager, etc.) of his or her finding and that the report has been made. The reporting person shall also make a copy of the written report or electronic report available to their supervisor. Reporting the situation to the administration or another staff person does not relieve the employee or volunteer of their mandated responsibility to report to CPS.

Reporting to OHS and ISD/GSRP

- The NMCAA Early Childhood Programs Director must submit reports, as appropriate, to the responsible HHS official (OHS) immediately or as soon as practicable, to mean without delay, but no later than seven calendar days following any significant incidents affecting health and safety of program participants, program involvement in legal proceedings, or any matter for which notification or a report to state or local authorities is required by applicable law, including at a minimum:
 - Any reports regarding staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders.
 - Administration staff will refer to the Special Investigations and OHS Reporting form for additional documentation requirements when following up with the Office of Head Start.

Safety of all Child and Family Development and Childcare Collaborative Center Staff

To ensure the safety of all Child and Family Development and Childcare Collaborative Center Staff who visit the home, immediate communication is crucial.

NMCAA personnel, including Family Engagement Specialists, EHS Child Family Specialists, and anyone else going into the home, should be notified the day that a report has been made, so that all are aware of the situation. Coaches should also be notified in a timely manner. Staff should follow the confidentiality policy and not disclose any information to personnel who are not on a need-to-know basis.

Storage of Reports

Report of Actual or Suspected Child Abuse or Neglect-3200 Report Storage:

- Store separately from the child's file in a locked filing cabinet.
- All 3200 reports are kept in a Confidential File for Child Protective Services Reports ONLY.

- See the Program Drop Files document for children exiting or completing the program.

Training – Immediate Reporting

Child Protection Law and Mandated Reporting Training takes place during the Annual Pre-service Orientation and Training. Topics addressed include the Child Protection Law, mandated reporter informational resources, guidance, and training videos on michigan.gov. Individuals are encouraged to attend state and local mandatory reporter training opportunities as they are offered.

Staff Support

Staff and families will be supported through this process:

- Staff will have ongoing training and exposure to the strength-based and trauma sensitive family partnership practices, curricula, and resources used by the program.
- Home visiting staff and supervising staff have reflective practice available.
- Mental Health Consultants and the Mental Health & PFCE Manager are available to reflect upon current practices and relationships with families to individualize planning for everyone involved.
- The Employee Assistance Program (EAP) is available to all staff. Call 1-800-779-0449.
- Other resources can be found in the [Staff Wellness Supports](#) document.

Child and Family Development staff, childcare collaborative center staff, and center volunteers (including minors) will cooperate with the Child Care Licensing Bureau and Child Protective Services agencies.

Staff will make every effort to retain children and families impacted by this process.

Parent Participation

Head Start could not exist without tremendous family involvement and interest in the program. You are your child's most important teacher.

We welcome all families and aim for respect, connection, and open communication. Thanks to all who share your time, ideas, and strengths with the program.

Parents/guardians can provide input about the operation of the program by:

- Sharing your family traditions and talents with us so we can learn from you!
- Talking with other parents/guardians and staff about the program and ways that each person can help.
- Using the suggestion box at playgroups to share ideas or thoughts about the program.
- Becoming active at playgroups and Parent/Guardian Participation Groups.
- Sharing ideas and input about ways to improve program quality.
- Inquiring about paid subbing opportunities.
- Serving as a Policy Council representative if elected.
- Assisting and supporting the current Policy Council representative.

Participating in the program

Participation in the program gives you an understanding of what the program is doing for your child(ren) and how you can help.

- Gives your child a positive impression about learning and shows your interest in their learning.
- Provides the education staff an opportunity to get to know you better.
- Staff can learn from you, and you can learn from them.
- Parents/guardians are encouraged to continue the extension activities throughout the week and share those experiences with their home visitor.
- Staff will follow up each week to learn how much time was spent completing extension activities and may share monthly calendars that describe fun activities you can do with your child throughout the week. Activities are based on Parents as Teachers curriculum goals that support your child's growth and development. These activities may be counted as In-Kind.

In-Kind

The funding we receive for our program is SO important, and we need your help. When you become a part of our program, one of the words you begin to hear is "in-kind." What is it? Head Start programs are partially funded by the federal government. We must raise 25% of our funds through community support - and that is known as in-kind.

Ways you can help our program collect in-kind:

- Complete extension activities throughout the week set by you and your home visitor.
- Spend time with your child working on the child development goal that are set by you and your home visitor.
- Participate in parent meetings, family engagement activities and playgroups.
- Make/prepare materials for the home visit.
- Donate goods or services to the socialization space for program use.
- Please ask your home visitor for additional ideas.

Your involvement in your child's education is key to their future success. You and your child benefit from the time you spend participating in the types of activities listed above; that time and effort also benefits the overall program since it is considered in-kind.

Your in-kind contributions keep Head Start going! Thank you!

Family Partnerships

The role of your home visitor is to support you throughout your Head Start experience. Home visitors serve as your advocate and support your child and family to:

- Identify family strengths.
- Connect to community resources to best meet your family needs.
- Meet school readiness goals and support family goals.
- Obtain needed health screenings.
- Understand how the program works.
- Facilitate parent/child activities

The Family Partnership Process

When you join our program, we start building a partnership with your family to help your child get ready for school and have positive outcomes. We work together through home visits, playgroups, and Parent/Guardian Participation Groups. Our program is made to fit the needs of each family. We will ask you to fill out two important surveys during the year: the Family Needs Assessment once a year and the Family Outcomes Tool twice a year. These surveys help us understand your family's strengths and celebrate them with you. The Family Outcome Tool also shows us how your family's daily routines change and grow over the year. Your home visitor will talk with you about the surveys and support you in setting a family goal based on your interests and needs. Your home visitor will help you find resources in the community. By working together, we can help your child succeed and support positive outcomes for your family.

Child Custody Issues

It is our intent to meet the needs of children, especially when families may be experiencing difficult situations such as divorce, separation, or remarriage. Sharing information about such situations can help staff support your family through potentially difficult and challenging experiences. Staff hold this information in strict confidence. Staff cannot legally restrict non-custodial parents from visiting playgroups or reviewing the child's records. In case of conflicts, the proper authorities will be contacted to ensure the safety of all staff and children.

Cultural Competency Plan

At NMCAA Head Start we value the individual backgrounds, languages, and traditions that families bring. Our goal is to create a welcoming environment where every family is respected and supported. We believe that when we honor who children are and where they come from, they thrive – both in school and in life. Our Cultural Competency Plan helps guide how we provide services in a way that respects and supports every child's and family's culture, race, ethnicity, and religion. By recognizing and responding to the unique needs of our enrolled children and families, we support children's learning, family connections, and school readiness.

How We Support Culture in the Classroom and at Home

We work closely with four Intermediate School Districts (ISDs) in our service area. These partnerships allow us to:

- Offer special education services tailored to each child's needs.
- Collaborate with Early Childhood Specialists to support children's individual learning.
- Plan home activities that reflect the children and families currently enrolled in our program.

In our playgroup areas, you will find:

- Books, dolls, and toys that reflect different cultures.
- Opportunities for children to explore foods from around the world.
- Celebrations and stories that honor a variety of family traditions.
- Group Planning Guides that include input from families – your ideas help shape what we do!

At home visits:

- We individualize with each family to celebrate their culture and traditions.
- Parents/guardians support the planning of the next visit, including material preparation.
- Materials within the home are used whenever possible.

We invite and encourage families to share traditions, recipes, music, clothing, and stories from home. When you're involved, your child sees their culture celebrated and learns to appreciate others too. We love it when families lead an activity or share something special at playgroups!

Keeping Families Informed and Involved

We make sure families know about our cultural commitment through:

- Conversations at home visits
- Family handbooks and newsletters
- Family events and playgroups
- Parent/Guardian Participation Groups

Our staff receive regular training and coaching to better understand and support the unique experiences and backgrounds of all our families. We are here to learn from you and walk alongside you on your child's early learning journey.

Home-Based Curriculum Statement

The home-based program is designed to support parents in giving their child the best possible start in life. We hope to increase parents' knowledge of early childhood development and improve parent practices, provide early detection of developmental delays and health issues, and increase children's school readiness and success.

The home-based program uses the Parents as Teachers (PAT) curriculum. PAT clearly identifies five developmental domains: language, cognitive, motor, social-emotional, and approaches to learning. Each "Activity Page" includes specific skills, behaviors, and concepts from the domains that children might be working on as they engage in the activity. Additionally, "Milestones" include these domains as the overarching areas of child development. The curriculum provides a sequence of learning experiences that supports children as they build knowledge and skills in each of the Head Start Early Learning Outcome Framework.

Curriculum Areas

The activities we plan with families and facilitate as a parent/child interaction will accomplish the goals of our curriculum and give your child a successful start in school.

Social/Emotional

Strong, positive relationships help children develop trust, empathy, and compassion, to make positive choices. Nurturing relationships and being a part of a family with a structured routine and rules support children's resilience and sense of safety and confidence. Social and emotional development is a process for children to help them to understand, experience and manage emotions.

Physical

Increases children's large muscle skills (balancing, running, jumping, throwing, and catching) and use the small muscles in their hands to do tasks like buttoning, stringing beads, cutting, drawing and writing.

Cognitive

Acquiring thinking skills such as the ability to solve problems, ask questions and to think logically: sorting, classifying, comparing, and counting, and using materials and imagination to show what they have learned.

Language

Using words to communicate, to listen and participate in conversations with others and to increase children's vocabulary.

Literacy

Fostering excitement about reading books and what they are seeing and hearing and learning, understanding the purpose of print, recognizing letters and words, and to participate when being read aloud to.

School Readiness Goals

To see NMCAA's School Readiness Preschool data visit www.nmcaa.net

Domain: Perceptual, Motor, and Physical Development:

Children and adults will participate in family style meals that promote relationships, nutritious food choices, and eating habits.

Domain: Social Emotional

Children will increasingly regulate their emotions and behaviors to build connections and navigate their interactions with others.

Domain: Language and Communication

Children understand, follow, and use appropriate social and conversational tools when interacting with others.

Domain: Literacy

Early Head Start: Fostering an excitement about reading books and what they are seeing and hearing and learning, understanding the purpose of print, and to participate when being read aloud to.

Head Start: Children will demonstrate an appropriate understanding of print concepts and build their knowledge of the alphabet.

Domain: Approaches to Learning

Children will demonstrate resilience, persistence and problem-solving skills when completing tasks.

Domain: Cognition

Early Head Start: Children will use play to increase their understanding of symbolic representation as it relates to mathematical concepts such as one-to-one correspondence.

Head Start: Children will use play to increase their understanding of symbolic representation as it relates to mathematical concepts such as number names and count sequence.

Domain: Dual Language Learners

Dual Language Learners will show progress in understanding, listening to, and speaking English.

School Readiness Begins with Health

Physical Health: Children who access ongoing health care have better attendance and are more engaged in learning. Consistent attendance helps children prepare for school. Routines such as handwashing and wearing helmets while on bikes help children stay healthy and avoid injuries.

Oral Health: Children with healthy teeth are better able to eat, speak, and focus on learning. Daily oral health hygiene and ongoing care from oral health professionals help make sure that children have healthy teeth. All children should see a dentist by age 1.

Nutrition: Good nutrition is essential for children's brain development. Children who have access to nutritious food have energy to learn. Providing healthy snacks and meals helps children's bodies grow, giving them what they need to talk, play, and learn together.

Physical Activity and Motor Development: Staying active benefits young children's physical and cognitive development. Activities that get children moving build motor skills that are useful to reading, writing, and math skills.

Sleep and Rest: When children get enough sleep, they can pay attention, remember what they learn, and manage their feelings. When caregivers schedule times for a nap, rest or quiet activities, children can focus on learning.

Perceptual Development: When children use their senses to explore, it helps them learn about the world around them. A child's ability to see and hear affects their reading, writing, and speech and language skills. Sensory screening helps identify children who may need vision or hearing support.

Mental Health: Beginning at birth, children need positive relationships with the adults who care for them. Children gain self-worth, confidence and the ability to manage their feelings, thoughts and behaviors when they have calm adults who help them to recognize and share their feelings. These caring relationships help them develop resilience so that they can be persistent in learning new skills and form relationships with others.

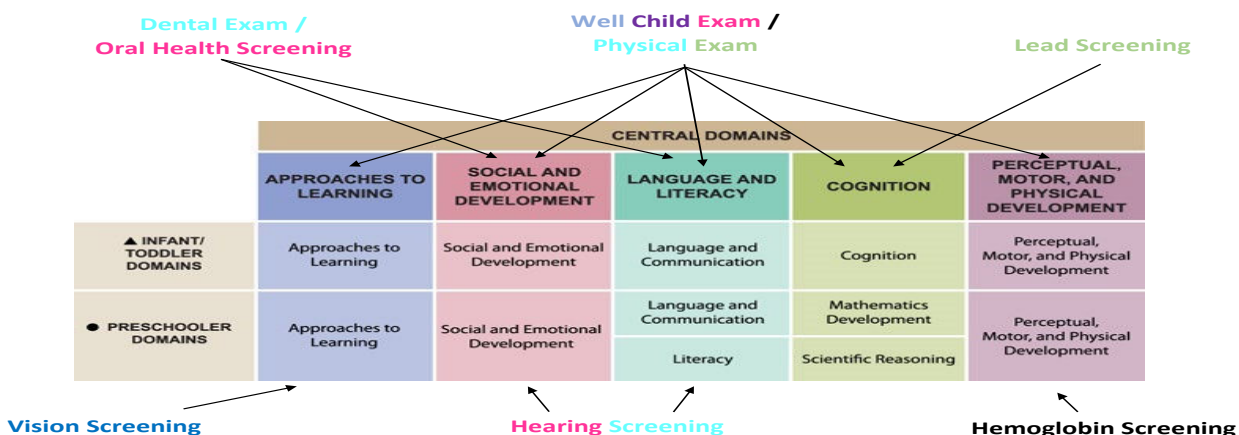
Nurturing and Responsive Relationships: Early relationships shape children's learning and development. Children thrive when adults support their strengths and needs. Responsive adults help children feel safe and valued and learn how to get along well with others.

Self-Regulation: Children who can manage their feelings can learn and play with peers. They are better able to plan, monitor and control their behavior. They can also adjust to changes in schedules and routines.

Prosocial Behavior: Children who get along with adults learn to work together and follow rules. They can also show concern for, and share, take turns and compromise with other children.

Play: When children play, they use their imagination and creativity. They also solve problems and learn to interact with others; skills that help them grow in all developmental areas.

Early Learning Outcome Framework connects to all of your child's Health Screenings.



NMCAA Child and Family Development Health Plan

Northwest Michigan Community Action Agency is committed to protecting the health of our children, families, staff, and community. The following health plan is designed in response to guidance from the Michigan Department of Licensing and Regulatory Affairs and Health and Human Services, in accordance with best practices from the Centers for Disease Control and Prevention, and with everyone's well-being in mind.

NMCAA provides high-quality health, oral health, mental health, and nutrition services that are developmentally, culturally, and linguistically appropriate and that will support each child's growth and school readiness. Our program has established and maintains a Health and Mental Health Services Advisory Committee that includes Child and Family Development families, professionals, and other volunteers from the community.

NMCAA employs Recruitment and Health Specialists (R & H) to support families in their health needs. This includes determining immunization and health statuses are up to date for enrolled children according to the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT). This happens within the first 30 days of enrollment in Head Start or 90 days of enrollment in Early Head Start from their healthcare provider. Additionally, Child and Family Development programs require all children to complete a growth assessment (2 years and older), developmental screening, hearing screening, and vision screening within the first 45 days of enrollment. Within the first 90 days children must complete a blood pressure, lead test, anemia test, and dental exam for Head Start. Lead tests are completed at 12 and 24 months; anemia tests are completed at 12 months, and dental exams begin at one year of age for Early Head Start.

Recruitment and Health Specialists educate families regarding the importance of up-to-date medical and oral health requirements and immunizations and how it connects to school readiness. R & H determines if a family has a medical home and dental home, along with health insurance coverage. Families that do not have continuous care are given a list of health and dental professionals in the area. R & H will assist families in applying for Medicaid when they do not have health insurance coverage; Child and Family Development funds can be used to help families pay for health requirements once approved.

R & H track all children's health requirements and immunizations electronically using Child Plus and the Michigan Care Improvement Registry (MCIR). They are in regular communication with home visitors and families about any updates or needs a family may have.

To limit the potential spread of communicable diseases and other illnesses, NMCAA Child and Family Development Programs have established procedures for handwashing, handling bodily fluids, cleaning, sanitizing, disinfecting procedures and controlling infection. This includes sanitizing and disinfecting procedures to minimize opportunities for person-to-person exposure. Handwashing and Routine Center Cleaning signs are posted in all playgroup spaces for staff, children, families and volunteers.

Health and Mental Health Services Advisory Committee

The purpose of the Health and Mental Health Services Advisory Committee (HSAC) is to participate in planning, operation, and evaluation of program health policy and procedures. This committee also assists the program in meeting its goal of establishing community partnerships and developing collaborative relationships and agreements with community agencies and organizations. This committee meets at least 2 times per year. If you would like to be a part of the committee, please let your home visitor know.

The range of functions of the committee includes:

- Assisting the program in meeting the Head Start Performance Standards and NMCAA Safety and Emergency Preparedness Plan.
- Identifying the health and wellness needs of children, families, staff and communities through the Community Assessment, Family Needs Assessment, Application Packet, family goal process, and reflective practice.
- Identifying health and wellness barriers and finding support to overcome those barriers (physical, mental, and dental)
- Review current policies and procedures regarding health.
- Assisting Child Family Development Programs to identify health and wellness resources within the community to establish collaborative relationships.
- Guest speakers (families, staff, and professionals) will extend our knowledge in focus areas.
- Acting as child health advocates within the greater community.

NMCAA Early Childhood Nutrition

Our purpose is to teach children, families, and staff the importance of nutritious eating through education, experience and by example.

Our nutrition plan is important to children, families, and staff as it provides a framework for supporting healthy food choices as well as nutritional resources for families and staff. Additionally, our plan encompasses regular communication regarding nutrition topics.

We meet the needs of children, families, and staff by providing nutritional family-style meals and snacks to the children and staff, providing foods that are low in fat, sugar and salt, increased servings of fresh fruits and vegetables, teaching serving sizes, introducing children and families to different foods, modeling for children and families, and learning about and respecting different cultures through food. We work with families to meet their children's individual nutritional needs, providing substitutions when needed.

We share our nutritional information with children, families, and staff through our parent handbook, home visits, newsletters, and activities at playgroups.

Program Growth Assessment

As a part of the program's health requirements, height and weight measurements are completed on all enrolled children. Body Mass Index (BMI) is a number calculated from a child's weight and height. According to the Centers for Disease Control and Prevention, BMI is used to screen children for healthy weight, obesity,

overweight or underweight.

If a child's Body Mass Index (BMI) is found to be at or above the 95th percentile or at or below the 5th percentile, the program is required to follow-up with parents/guardians.

We realize one measurement does not show the full picture of your child's health history. For this reason, staff will have conversations with you to learn more about your child's history of height and weight.

We want to be as supportive as possible because your child's health is a very important part of overall growth and development for school readiness. Staff will be able to provide you with more information on related topics and connect you with services as requested.

Well Baby Checks/Dental Exams and Updated Immunizations

Many of us think of the doctor only when we are sick, but "well care" can keep children and adults healthier by preventing sickness and tooth issues

Your child's health is a priority!

- Your child will be following a schedule of regular check-ups with their medical home and dental home (if age 1 year or over).
- Having a health care provider and dentist is important for all children.
- The connection between health care providers and your family will continue to keep your child healthy.

Health care is important before the baby is born!

- Regular doctor visits during pregnancy supports a healthy pregnancy.
- Dental check-ups at least once during your pregnancy promote your oral health and your babies.
- Expectant families are supported in making healthy choices about smoking, diet and exercise during pregnancy.
- A healthy child needs a great start from the beginning!

What to Do When Your Child Is Sick

When is too sick for a home visit or play group?



Keep our home visit if:

I have a runny nose or just a little cough, but no other symptoms
I haven't taken any fever reducing medicine for 24 hours
I haven't thrown up or had any diarrhea for 24 hours



Cancel our home visit if:

I have a temperature higher than 100 degrees
I have been throwing up or have had diarrhea in the past 24 hours
I have been having body aches, fatigue or frequent headaches
I have a runny nose that has yellow or green discharge and a fever
I have a sore throat with a fever

Home-Based Attendance

Early School Success goes hand in hand with good attendance!

Regular attendance is a high priority in all our programs. All families should strive to maintain a 90% attendance rate. Early childhood education enables children to build social and emotional skills that become foundational for later learning. Full participation is encouraged and will maximize your child's opportunities for growth. If your child's home visit attendance becomes sporadic or absences become chronic (more than 10%), we will work with you to improve attendance. 46 home visits will be offered each year for EHS and 32 visits for HS; expect that you will be offered home visits by other staff to support routine and strong attendance if your home visitor is out for any reason.

We look forward to partnering with you during this important time in your child's life!

What you can do:

- Plan your visits on the same day and time whenever possible to encourage routine.
- Call your home visitor when you will not be able to be present for your home visit. Reschedule with the home visitor later in the week whenever possible to maintain good attendance
- Only cancel home visits when your child is truly sick.
- Talk to your child's doctor if you have any health concerns for your child.

Playgroups and family engagement opportunities are also important growth experiences for you and your child. If you have trouble attending, talk with your home visitor to identify ways to remove any barriers.

If your family has missed too many home visits

If you have missed too many home visits, your home visitor will work with you to form an Attendance Success Plan. We want to help remove any barriers to weekly home visits. If there is not any improvement in attendance, the Child Development Program Director will determine if your family has ceased to attend, and your child may be placed back on the wait list.

Staff and Family Communicable Disease Policy

Northwest Michigan Community Action Agency, Inc. recognizes that employees with communicable diseases may wish to continue to engage in as many of their normal pursuits as their condition allows, including work.

- If an employee has been exposed to a contagious disease, management should be notified. Management will consult with the local Health Department to determine if a notification plan and/or needed facility sanitation requirements are needed. The local Health Department will help determine if a communication plan is necessary, and which information can be released to clients, employees, and volunteers, and inform the agency of any required exclusions and re-admission timelines.
- Reasonable accommodation will be made for employees with communicable diseases, in accordance with NMCAA's Disabilities Accommodation Policy.

NMCAA Early Childhood Programs are required by Michigan Law to report confirmed or suspected cases of communicable diseases to the local Health Department.

“Local reporting plays a key role in state and community efforts to control communicable disease.”

NMCAA Early Childhood Programs are required to notify families when a child at playgroup has contracted a diagnosed communicable disease to other families in attendance. The program is not allowed to release the name of the ill child. In situations where the ill child has a diagnosed communicable disease that is more serious than the common nuisance diseases (head lice, ringworm, scabies, impetigo, pinkeye, etc.) Michigan Law requires that the program notify the local health department. The local health department will help determine what information can be released to parents and inform the center of any exclusion and re-admission timelines. *Adapted from: Caring for Our Children, American Academy of Pediatrics and American Public Health Association, 1992.*

NMCAA Health Hygiene Information

NMCAA Child Development programs have established procedures for handwashing, handling bodily fluids, cleaning, sanitizing, and disinfecting guidance, controlling infection, including universal precautions.

All staff, families, and volunteers at NMCAA centers must follow the posted health care information which include Handwashing, Routine Center Cleaning and Diaper Changing Procedure and Maintenance of Changing Tables/Surfaces.

Additionally, as a required Enrollment activity, each enrolled family in NMCAA Child Development Programs will receive a Community Resource Directory listing local health-related resources.

Delays and Closings

Child Family Specialists will contact families scheduled for a home visit on a severe weather day. You can decide with your home visitor whether to go ahead and visit that day or reschedule for later in the week.

If the public school has been cancelled in the school district where a family event is planned, such as a playgroup or family engagement event, it will be canceled.

Admission, Withdrawal, Fees and Exclusion Policy

Children are enrolled based on a priority list developed by the federal government, staff and parents/guardians. Those who are not enrolled are placed on a wait list based on the highest family needs. Vacancies are filled within 30 days of their occurrence. Families are asked to notify staff as soon as possible if they are planning to leave the program so another child can accept that placement.

Home Based programming does not require a fee or tuition.

Children will not be excluded from our program. Education staff and administration will work with families to support success within the program. Alternate means of serving a child and family may be considered to maintain the health, well-being or safety of all children and staff.

Screenings, Observations and Developmental Assessments

The program individualizes curriculum for each family to support their child(ren)'s strengths, needs and overall development. Staff learn about each child through screenings, observations, and conversations with parents/guardians on home visits. The knowledge gained is used to individualize home visits for each family. ASQ screening results are shared with Intermediate School Districts.

Home-Based programs use Ages and Stages Questionnaire (ASQ) and Devereux Early Childhood Assessment (E-DECA) for infants, toddlers, and preschoolers for developmental screening tools. Each child is screened in collaboration with their family, within 45 days of enrollment. If concerns are noted, further resources and support can be provided by special education professionals. A referral for this special education service is discussed with parents/guardians, and a parent/guardian signature is required on the consent form.

Children are assessed four times a year using Teaching Strategies GOLD for EHS and three times a year for HS. This assessment is used to measure child growth and learning.

Please contact your child's home visitor/childcare provider if you have any questions regarding any of the above screenings.

Special Needs

At least 10% of the children enrolled in Head Start have been diagnosed with a disability. Through the screenings, assessments, and observations we perform, children are sometimes found to need further evaluations with a specialist trained in the area of concern, such as oral language/speech or motor/movement skills. Parents are a part of all the screenings and assessments; Child Family Specialist's will discuss any concerns and work with parents in the process of moving forward with an evaluation. An evaluation would require your written permission. We will work together to ensure all of your and your child's needs are met, and you are aware of your rights every step of the way.

Michigan Alliance for Families – Call 1-800-552-4821

Michigan Alliance for Families provides information, support, and education to families of children and young adults with disabilities from birth to age 26. Michigan Alliance connects families to resources in their own community. The groups also help facilitate family involvement as a means of improving services for the Individuals with Disabilities Education Act (IDEA). Michigan Alliance can assist you in knowing your rights, effectively communicating your child's needs, and advising how to help your child develop and learn.

NMCAA Child and Family Program Guidance Policy

Staff, Collaborative Center Staff, Parents/Guardians, and Volunteers will adhere to the following:

- Encourage positive self-esteem, cooperation, self-regulation, and self-direction.
- Model positive behaviors- be composed, empathetic, helpful, and respectful to all.
- Support social and emotional growth through observation by noticing and acknowledging specific behaviors/actions.

- Redirection is a primary tool for supporting infant and toddler behavior and will be used with all children, ages 0-5, when appropriate.
- Develop positive relationships and teach/model classroom and home visit expectations.
- Protect children/parents/staff/volunteers from harm.
- Practice and model personal space/boundaries and respect for ourselves and others.
- Supervise all children, at all times, and support parents in supervising their children at all times.

Staff, Collaborative Center Staff, Parents/Guardians, and Volunteers will refrain from the following:

- Carrying, pulling, or pushing by limbs, aggressively moving, dragging, hitting, shaking, biting, pinching, spanking, or inflicting physical violence.
 - Exception: Infants and non-mobile children may be carried for comfort, safety, and mobility.
- Placing any substances in a child's mouth, including but not limited to, soap, hot sauce, or vinegar.
- Restricting a child's movement by binding, tying, or confining in an enclosed area (adjacent room, closet, locked room, box, hallway, darkened area, play area, or another area where a child cannot be seen or supervised, cubicle, or similar enclosure).
- Mentally/emotionally punishing such as sarcastic remarks, humiliating, shaming, threatening, degrading, ridiculing, or time-outs.
- Depriving children of/or delaying any of the following: meals/snacks/water, rest, toilet use, outdoor play, daily learning, or gross motor activities.
- Using toilet learning/training methods that punish, demean, or humiliate a child.
- Isolated one-on-one interactions, favoritism, or gift-giving to individual children.
- Establishing a relationship with children outside of program activities or exchanging personal email, phone numbers, or private interactions through social media or computer devices.
- Photographing children for purposes other than for program activities or for their families.

Specific Exceptions-Non-severe and developmentally appropriate discipline or restraint may be used when reasonably necessary, based on a child's development, to prevent a child from harming him/herself or to prevent a child from harming other persons or property.

Good Things to Remember...

- It is important to speak in a calm, kind voice. Taking deep breaths is a way to stay composed and to help you stay calm.
- Get down to the child's level. Stoop or sit on a low chair so they can see your face.
- Go to the child; avoid calling them from across the room.
- Speak in short, meaningful sentences the child can understand.
- Try to express your request in a positive way by saying what you want the child to do rather than not to do. This will help the child learn better, more acceptable ways of doing things.
- Answer the child's questions but try not to monopolize the conversation; they need to associate with peers.
- Keep your voice, tone, and facial expressions kind.

It's "HOW" You Say It That Counts	
<i>Say what you want the child to do</i>	<i>Avoid saying it this way</i>
Sit down when you slide	Don't stand up when you slide
Dig in the sand	Don't throw the sand
Sit in the swing	Don't stand on the swing
Use both hands when you climb	Watch it or you'll fall
Put the stick down	Don't play with the stick, you'll hurt someone
Keep the puzzle on the table	Don't dump the puzzle pieces on the floor
Talk in a quiet voice	Don't shout
Wipe your hands on the paper towel	Don't touch anything
Move back on your rug so everyone can see	You're in the way, the other children can't see
Walk around the swing	Watch it, the swing will hit you

Conscious Discipline®

Conscious Discipline® is an emotional and behavior management program that teaches us to be aware of our own feelings. Our e-DECA system includes Conscious Discipline Strategies within each child assessment. These assessments can be used individually and can be adapted for implementing Conscious Discipline within the home.

Conscious Discipline helps us learn to think and cope with emotions and manage responses rather than react to life events. Conscious Discipline® is based on safety and building strong relationships, helps decrease power struggles and builds life skills in relating to others.

Research shows that schools/families using Conscious Discipline® have:

- Increased academic achievement and positive teaching time at home/school; increased social skills, character development and positive teaching time at home/school
- Decreased impulsivity, hyperactivity, and aggression

7 Skills of Conscious Discipline®:

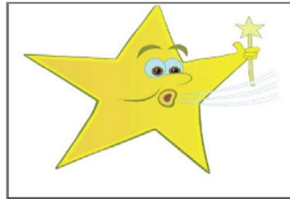
1. Composure ~ be the person you would like your children to become
2. Encouragement ~ build strong relationships
3. Assertiveness ~ set limits respectfully
4. Choices ~ build self-esteem and willpower
5. Positive Intent ~ create teachable moments

6. Empathy ~ handle fussing, fits and upset moments
7. Consequences ~ help children learn from their mistakes

Relaxation Techniques for Calming and Coping

The S.T.A.R. Exercise

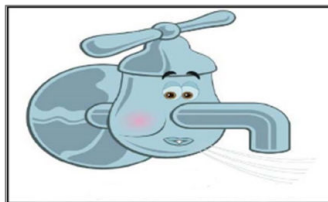
Stop/Smile; Take a deep breath And Relax. Release your breath slowly.



The Pretzel Exercise (Brain Gym) Stand; cross your ankles and hold your arms in front with your palms facing each other. Cross your arms and place hands together (like a clap). Fold them under your chin with your tongue pressed against top of the inside of your mouth; this integrates the brain. **Modification:** Hug yourself - cross legs standing or do crisscross apple sauce (sitting). Breathe in and slowly release your breath.



The Drain Exercise Hold your arms out in front - make your hands into fists. Tighten muscles in your arms - squinch your shoulders up to your ears. Tightly squeeze muscles in your face. Take a deep breath and then breathe out slowly - relax, opening fists to let all your stress drain out of your hands. Let mad feelings drain out of body like flowing water.



The Balloon Exercise Put hands on head and lock fingers together. Breathe deeply - raise hands over head as you let breath fill up a pretend big balloon. Breathe in more and more air.... then let the air out as you drop hands down to head.



Program Safety

Safety is an important part of our program. Our goal is for you and your child to feel safe at our playgroups and family engagement events. It is also important that our staff feel safe at our playgroups, family engagement activities, and when they are in your home.

At playgroups, family engagement events and during home visits, staff and family members will communicate in a calm, positive manner that allows everyone to feel comfortable.

Our policy also requires that staff let someone know where they are during work hours. Because of this, staff may need to make a phone call when they arrive at your home for a home visit.

Regarding home visits, we ask that:

- Animals/pets are under control or contained.
- The home visitor is aware of others in the home.
- The home visitor is aware of anyone in the home that is contagious or has a communicable disease.
- Language and actions are non-threatening.
- Firearms are stored safely.

**Please know that some staff coming into your home may have allergies to pets, smoke or other allergens. If this is the case, we may ask you to plan ahead, or as a last resort, consider another location for the home visit. To protect the health of your family, the home visitor will contact you to reschedule a visit if they are ill.*

Safety Drills

Programs will conduct ongoing safety drills as required by Head Start and the local school district if an event is within a school.

Emergency Procedures

Policy: Provide care for children and staff during an emergency following Head Start Performance Standards.

Procedure: Staff will be trained on emergency procedures upon hire. Refer to the Drill and Safety Log for additional documentation as needed. Also, refer to the Emergency Preparedness and Response Plan for additional emergency and crisis management guidance.

Accident Procedure

If a child sustains any type of injury that requires first aid, the child's parent will be notified and take the lead in care.

All accidents will be documented on the Illness/Incident Report; this will be prepared immediately after the child receives first aid.

Severe Emergency Medical Procedure

In the case of a severe accident or illness of a student, Home-Based programming will do the following, taking into consideration a parent/guardian is present with their children at home visits and playgroup events:

1. Ensure an adult stays with the child at all times
2. Call 911
3. Support the parent/guardian in accompanying the child in the ambulance
4. Complete NMCAA Illness/Incident Report

Parents are welcome to refer to the policies posted in each childcare center and playgroup site for more detailed information.

Safe Ways to Dress Your Child for Home Visits and Playgroups

We have a few suggestions about dressing your child for home visits and playgroups:

- It is great when children wear comfortable play clothing that can get messy . . . we do a lot of creative activities at home visits and playgroups.
- If a home visit or playgroup is planned for outside in the winter, it is important your child has a snowsuit, mittens, hat and boots. Reach out to your home visitor if you need support in accessing this clothing.
- Shoes that tie, Velcro, or stay securely on your child's feet (like tennis shoes) will help prevent accidents. Sandals and flip-flops can be dangerous.
- Clothes that are easy for your child to fasten and unfasten can help them be successful using the bathroom independently.

Injury Prevention Starts at Home

You can protect yourself and your family by taking action to prevent injuries at home!

Prevent burns at home

- Keep matches and lighters out of reach of children.
- Install and maintain a smoke alarm. Remember to change the batteries!
- Cover electrical outlets.
- Turn pan handles on the stove inward and use back burners when cooking
- Set the hot water heater to 120 degrees Fahrenheit (F) or less.
- Test bath water temperature before putting your child in it.

Preventing falls at home

- Watch your child constantly while they are in the bathroom.
- Install window guards on upper windows.
- Use stair gates at the top and bottom of stairs.
- Always use the safety latch in your child's chair and strollers.

Prevent poisoning at home

- Keep all medicines and cleaning supplies in containers with safety caps and store them in a locked cabinet.
- Install a Carbon Monoxide (CO) detector in your home to save your family from CO poisoning.
- Act fast if you think your child has been poisoned! Call the Poison Control Centers 1-800-222-1222

Prevent choking at home

- Don't let children put small things in their mouths.
- Toys, household items, and food can all be choking hazards.
- Teach your child to chew their food fully before swallowing.
- Choose the foods you feed your child carefully – avoid popcorn, hard candy, nuts, hot dogs, grapes, and fish with bones.

Prevent drowning at home

- Never leave your child unattended in a bathtub, bathroom, pool, or even near a bucket.
- Install lid locks on toilets and keep lid closed.
- Never leave a child alone near water.
- Empty buckets after each use.

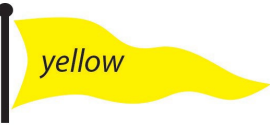

Prevent suffocation at home

- Keep plastic shopping bags and trash bags away from your child.
- Keep toy chests, car trunks, and washer/dryer doors closed when not in use.
- Don't put pillows, blankets, bumpers, or toys in the crib – these things can sometimes keep a baby from breathing.
- Place babies to sleep on their backs and use sleep sacks to keep them warm.

Pedestrian Safety

Head Start provides training for parents/guardians and children in pedestrian safety at enrollment. This training is also reinforced throughout the program year.

Air Quality and Outdoor Activity Guidance for Schools

Air Quality Index	Outdoor Activity Guidance
 GOOD	Great day to be active outside!
 MODERATE	Good day to be active outside! Students who are unusually sensitive to air pollution could have symptoms.*
 UNHEALTHY FOR SENSITIVE GROUPS	It's OK to be active outside, especially for short activities such as recess and physical education (PE). For longer activities such as athletic practice, take more breaks and do less intense activities. Watch for symptoms and take action as needed.* Students with asthma should follow their asthma action plans and keep their quick-relief medicine handy.
 UNHEALTHY	For all outdoor activities , take more breaks and do less intense activities. Consider moving longer or more intense activities indoors or rescheduling them to another day or time. Watch for symptoms and take action as needed.* Students with asthma should follow their asthma action plans and keep their quick-relief medicine handy.
 VERY UNHEALTHY	Move all activities indoors or reschedule them to another day.

* Watch for Symptoms

Air pollution can make asthma symptoms worse and trigger attacks. Symptoms of asthma include coughing, wheezing, difficulty breathing, and chest tightness. Even students who do not have asthma could experience these symptoms.

If symptoms occur:

The student might need to take a break, do a less intense activity, stop all activity, go indoors, or use quick-relief medicine as prescribed. If symptoms don't improve, get medical help.

Go for 60!

CDC recommends that children get 60 or more minutes of physical activity each day. www.cdc.gov/healthyyouth/physicalactivity/guidelines.htm

Plan Ahead for Ozone

There is less ozone in the morning. On days when ozone is expected to be at unhealthy levels, plan outdoor activities in the morning.

Questions and Answers

How long can students stay outside when the air quality is unhealthy?

There is no exact amount of time. The worse the air quality, the more important it is to take breaks, do less intense activities, and watch for symptoms. Remember that students with asthma will be more sensitive to unhealthy air.

Why should students take breaks and do less intense activities when air quality is unhealthy?

Students breathe harder when they are active for a longer period of time or when they do more intense activities. More pollution enters the lungs when a person is breathing harder. It helps to:

- ✓ reduce the amount of time students are breathing hard (e.g., take breaks; rotate players frequently)
- ✓ reduce the intensity of activities so students are not breathing so hard (e.g., walk instead of run)

Are there times when air pollution is expected to be worse?

Ozone pollution is often worse on hot sunny days, especially during the afternoon and early evening. Plan outdoor activities in the morning, when air quality is better and it is not as hot.

Particle pollution can be high any time of day. Since vehicle exhaust contains particle pollution, limit activity near idling cars and buses and near busy roads, especially during rush hours. Also, limit outdoor activity when there is smoke in the air.

How can I find out the daily air quality?

Go to www.airnow.gov. Many cities have an Air Quality Index (AQI) *forecast* that tells you what the local air quality will be later today or tomorrow, and a *current* AQI that tells you what the local air quality is now. The AirNow website also tells you whether the pollutant of concern is ozone or particle pollution. Sign up for emails, download the free AirNow app, or install the free AirNow widget on your website. You can also find out how to participate (and register your school) in the School Flag Program (www.airnow.gov/schoolflag).

If students stay inside because of unhealthy outdoor air quality, can they still be active?

It depends on which pollutant is causing the problem:

Ozone pollution: If windows are closed, the amount of ozone should be much lower indoors, so it is OK to keep students moving.

Particle pollution: If the building has a forced air heating or cooling system that filters out particles then the amount of particle pollution should be lower indoors, and it is OK to keep students moving. It is important that the particle filtration system is installed properly and well maintained.

What physical activities can students do inside?

Encourage indoor activities that keep all students moving. Plan activities that include aerobic exercise as well as muscle and bone strengthening components (e.g., jumping, skipping, sit-ups, pushups). If a gymnasium or open space is accessible, promote activities that use equipment, such as cones, hula hoops, and sports balls. If restricted to the classroom, encourage students to come up with fun ways to get everyone moving (e.g., act out action words from a story). Teachers and recess supervisors can work with PE teachers to identify additional indoor activities.

What is an asthma action plan?

An asthma action plan is a written plan developed with a student's doctor for daily management of asthma. It includes medication plans, control of triggers, and how to recognize and manage worsening asthma symptoms. See www.cdc.gov/asthma/actionplan.html for a link to sample asthma action plans. When asthma is well managed and well controlled, students should be able to participate fully in all activities. For a booklet on "Asthma and Physical Activity in the School," see <http://www.nhlbi.nih.gov/health/resources/lung/asthma-physical-activity.htm>.

Head Lice Policy

Helpful steps in getting rid of Head Lice:

Step 1 Kill the Lice

- Buy a product that will kill the lice. We can also provide one.
- Apply the treatment according to directions.
- **WARNING!** No product should be used for an infant, pregnant woman or nursing mother, individuals with cancer, individuals with asthma or other breathing difficulties and individuals who are allergic or sensitive to ragweed or chrysanthemums. Please read the label of the lice product to see restrictions and age requirements. Check with your doctor if you are unsure.

Step 2 Remove the Nits (Removing nits is the key to beating the problem.)

- Before applying treatment, it may be helpful to remove clothing that can become wet or stained during treatment.
- Apply lice medicine according to the instructions contained in the box or printed on the label. Pay special attention to instructions contained in the box or printed on the label. Pay special attention to instructions on the label or in the box regarding how long the medication should be left on the hair and how it should be washed out.
- **WARNING:** Do not use a combination shampoo/conditioner before using lice medicine. Do not re-wash the hair for 1-2 days after lice medicine is removed.
- This is the most important step! If possible, have someone help keep your child occupied/relaxed by watching a video or “read” while you comb his or her hair. Comb the hair first with a regular comb to remove tangles, then with the fine-toothed nit removal comb that comes with the treatment product.
- Do one section of hair at a time and pin back each section as it is completed.
- Wipe nit comb repeatedly with wet paper towel and discard the towels in a sealed plastic bag.
- Your lice killing product may recommend that you can apply lice egg remover or olive oil and lightly massage.
- If you use a lice egg remover or olive oil, wait at least three minutes before combing through again.
- Have the infested person put on clean clothing after treatment.
- It may require several hours each night for several nights to successfully remove nits and lice.
- Combing with the nit comb may be repeated daily until no lice/nits are seen. Continue monitoring for two to three weeks.

Step 3 Cleaning the Environment

- Machine wash all bed linens, clothes, towels, etc.
- Use HOT, SOAPY water and dry at least 20 minutes on HOT cycle in dryer.
- Store all other exposed items (bike helmets, stuffed toys, etc.) in plastic bags for two weeks.
- Vacuum your house AND car (especially where your child’s head has been).
- Discard vacuum bag.
- Disinfect combs, brushes, barrettes, etc. by soaking them in hot, soapy water (130°F) for 15 minutes. It is NOT necessary or suggested that you spray your home with chemicals if you carefully follow the above steps.

Please let us know if there is any other way we can help. We can provide items such as: lice shampoo, egg loosener, lice combs, laundromat vouchers, plastic garbage bags, cleaning products and possible cleaning assistance.

Head Lice website (CDC):

<https://www.cdc.gov/parasites/lice/head/index.html>

(MDHHS): <https://www.michigan.gov/->

[/media/Project/Websites/mdhhs/Folder2/Folder41/Folder1/Folder141/MI_HL_Manual_Final_2013.pdf?rev=0d98bd1c91e149d2b727edb96b95cf84](#)

Integrated Pest Management Plan

Policy: Northwest Michigan Community Action Agency utilizes an Integrated Pest Management (IPM) approach to control pests.

IPM is a pest management system that utilizes all suitable techniques in a total pest management system with the intent of preventing pests from reaching unacceptable levels or to reduce an existing population to an acceptable level. Pest management techniques emphasize sanitation, pest exclusion, and biological controls. One of the objectives of using an IPM approach is to reduce or eliminate the need for chemical applications of pesticides. However, certain situations may require the need for pesticides to be utilized. The State of Michigan requires childcare centers that may apply pesticides on the property to provide an annual notification to parents of students attending the facility.

Procedures:

- Staff will contact the facilities Coordinator, 231.357.2965 before any type of pesticide is used. Pesticides need to be applied by certified applicators.
- Staff will notify parents of any pesticide application prior to treatment using one of the described methods on the Annual Notification Regarding Possible Pesticide Use in NMCAA Child Development Centers or Facilities.
- When a pesticide treatment is applied by a professional pest control company, staff will ensure that the Advance Notice of Pesticide Treatment sign is posted on the main NMCAA childcare entrance door of the building or classroom used by children, parents, or clients.

Annual Notification Regarding Possible Pesticide Use in NMCAA Child Development Centers or Facilities.

Dear parents and guardians (hereafter referred to as “parents”), we welcome you back to another exciting school year! Our school is dedicated to providing your children with a safe environment that is conducive to learning.

One item that contributes toward this objective is maintaining an environment that is free of potentially damaging and unwanted pests. This is accomplished with effective and economical treatments, while also minimizing your child’s exposure to pesticides. Our school uses an Integrated Pest Management (IPM) program that seeks to use a variety of methods to control/minimize pest problems. Parents can review the IPM program and any records on pesticide applications.

As required by State of Michigan law, the school or daycare will provide advance notice regarding the non-emergency application of a pesticide such as an insecticide, fungicide, or herbicide, other than a bait or gel formulation, that is made to the school or daycare buildings or grounds. Advance notice will be provided, even during periods when not in session. Advance notice is not given for the use of sanitizers, germicides, disinfectants, or anti-microbial cleaners. In certain emergencies, such as an infestation of stinging insects, pesticides may be applied without advance notice to prevent injury to students, but the school or daycare will provide notice following any such application.

If treatment, of a pesticide, is deemed necessary by the IPM program coordinator all parents will be notified of the treatment by two methods:

- It will be posted at the main Head Start entrance(s) of the school, not less than 48 hours prior to the treatment.
- By the following method (that is checked), not less than 48 hours prior to treatment:



- Posted on our website www.nmcaa.net/publicinfo.asp
- Via email
- A written notice that is sent home with each child

- Parents may also be notified by first-class mail postmarked three days prior to application.

*In the **case of an emergency** notification may not be able to be given prior to the treatment, in which case it will be posted/sent promptly after the treatment in the above-described manner. Thank you for your understanding and interest in this matter.

Sincerely,

NMCAA IPM coordinator

Kelly Stockfish

Telephone: 231.346.2162

Email: kstockfish@nmcaa.net

* To request notice of pesticide application by mail please send a letter to our office stating your request, making sure to include your correct name and return address. This must be done every year that you require notification by mail (this request will not carry over from one school year to the next).

Northwest Michigan Community Action Agency, Inc.

For more than 40 years case managers have connected people to services from Agency administered programs, like Early Head Start, Head Start, Veteran Supportive Service, Homeless Prevention, Meals on Wheels, and Financial Management Services (which includes budget and housing counseling services).

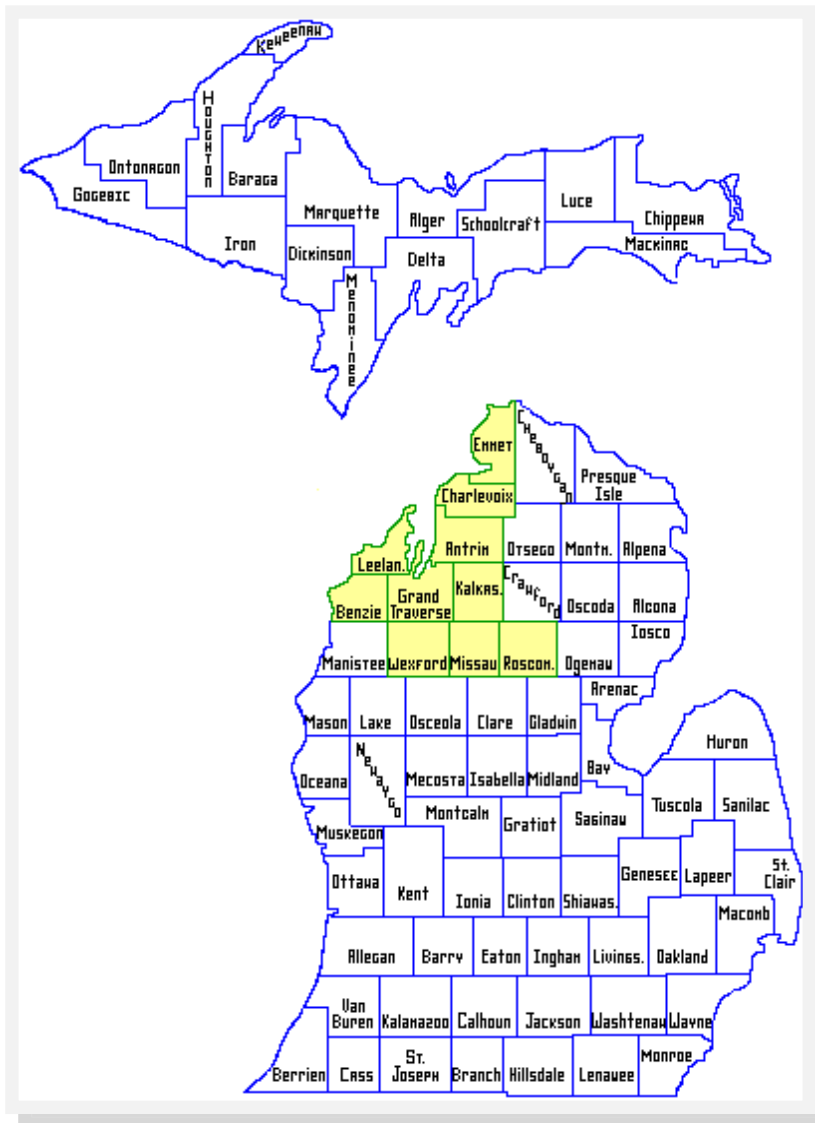
NMCAA leads in strengthening our communities by empowering people to overcome barriers, build connections and improve their quality of life.

Please call for information about services that may be of help to you.

3963 3 Mile Road
Traverse City, MI 49686
231-947-3780 OR 800-632-7334

1640 Marty Paul
Cadillac, MI 49601
231-775-9781 OR 800-443-2297

2240 Mitchell Park Dr., Unit A
Petoskey, MI 49770
231-347-9070 OR 800-443-5518



The following crisis hotlines are anonymous and have counselors available to help with stressful situations.

National Suicide Prevention MDHSS

24 hours per day/9-8-8

For Benzie County Residents Call Central Wellness Network

24 hours per day/1-877-398-2013

Crisis Services

Michigan 2-1-1

www.mi211.org/get-help/crisis-services

If you would like more information about Head Start or Great Start Readiness Programs

please contact your local area office:

Traverse City: 1-231-947-3780 or 1-800-632-7334

Petoskey: 1-231-347-9070 or 1-800-443-5518

Cadillac: 1-231-775-9781 or 1-800-443-2297



Multiple Positions Available

APPLY ONLINE at www.nmcaa.net or SCAN NOW!



Help make a positive impact in the lives of children and families!

We will provide training! No experience necessary!

Join our team!



CORNERSTONES OF CULTURE

RESPECT

Respecting the Uniqueness of All Individuals and Their Circumstances.

ACCOUNTABILITY

Being Accountable to Ourselves and Those We Serve.

ACCEPTANCE

Accepting and Supporting the Journey.

COMPASSION

Being Compassionate in ALL We Do.

COOPERATION

Continually Seeking Solutions for the Greater Good.



Northwest Michigan Community Action Agency



MISSION

NMCAA's fosters positive change. This happens by providing opportunities that promote self-sufficiency, improving the quality of life, and building stronger, more connected communities.

VISION

NMCAA drives the change that strengthens communities where ALL PEOPLE have opportunities to achieve their full potential.



NATIONAL HEAD START MISSION STATEMENT

Head Start is a national program that promotes school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families.



NORTHWEST MICHIGAN
Community Action Agency