



NORTHWEST MICHIGAN
Community Action Agency

2024-2025 Family Handbook



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Child & Family Development

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

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 Head Start/GSRP programs value and respect the privacy of all families, children, caregivers, and staff. Education staff will only discuss information about your child with you. You may at times feel that you need to discuss personal affairs with your child's teacher. Private information will not be shared outside of the Agency without your written permission. Families will also respect the rights of others when visiting the center and attending program activities. Please refrain from discussing any child-to-child conversations, behaviors, or staff and family information outside the classroom.

Licensing Inspection Reports

Licensing inspection reports are available to families at www.michigan.gov/michildcare. Please ask the teacher to use a computer or iPad to look up these reports if desired.

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.

DEIA (Diversity, Equity, Inclusion and Accessibility)

NMCAA honors DEIA, which means that we create programming and environments that are respectful. We are accepting of all people and their diverse backgrounds so that everyone feels valued and included. We appreciate that everyone is equal, and we avoid making assumptions about anyone. Program staff and families are expected to be respectful to all children, families, and staff, using kind words and actions, treating everyone with dignity. Program staff and families are expected to not say anything hurtful about the following:

- **race** (color of person's skin)
- **ethnicity** (person's cultural background & where they come from)
- **religion** (person's beliefs and practices)
- **abilities** (what a person can or cannot do)
- **family structure** (different kinds of family's people have)
- **body structure and physical traits** (how a person looks)
- **sexual orientation and whom someone loves** (who people are attracted to)
- **gender identity and how people identify themselves** (how people see themselves as male, female, or something else)
- **education level** (how many years of education someone has)
- **financial situation** (how much money someone has)

WELCOME!
From Our Family to Yours

Dear Families,

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

Maybe you are an expectant parent; or maybe you are enrolling in one of our programs with an infant, toddler, or preschooler. In any case, we are honored that you have chosen us to join you in providing a great start to your child's learning experience.

It is our goal to create environments that are safe, secure, and foster a sense of belonging for all who enter. In order to do so, we encourage you to share your family's culture and values, as well as your thoughts, wonders, and hopes for your little one. Together we can work to ensure our program is ready to best meet your child's individual needs.

Family engagement is a cornerstone of all that we do. It is participation in many ways, from families like you, that helps to make our programs responsive and relevant. Engagement as a parent/guardian comes in many forms, whether you choose to participate in curriculum-based activities with your child at home, join us in the classroom or at family events, or participate in Policy Council, we aim to create a community where you and your child feel connected and supported. No matter your schedule, or amount of time available, we encourage you to ask your teacher or home visitor about ways you can become more involved.

As a program that cares about the entire family, we look forward to partnering with you and wish you a wonderful journey of growth, laughter, and all good things!

Please feel free to contact us if you have any concerns, ideas, or questions along the way.

Sincerely,

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

Blair Cole (mother of David, Alice, Emma, and Luke)
Parent Policy Council Chairperson

231-947-3780 or 800-632-7334
www.nmcaa.net

Program Options

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

Head Start Child Care Collaborations

- Programs start in September and end in May or June
- Enrolled children receive Head Start services at their childcare site.
- Families receive parent/teacher conferences and are offered home visits to support parents/guardians in strengthening their child's school readiness skills.
- Childcare providers are trained to deliver Head Start services at their childcare center or licensed home.
- Childcare teachers are supported in their efforts to provide individualized lesson planning based on each child's level of ability using the GOLD assessment tool and parent/guardian input.
- Children are in one location all day - easier on children and parents/guardians.

Head Start (HS)

- Centers are open 7 hours per day, 4 days per week.
- Families receive 2 parent/teacher conferences and 2 school readiness home visits.
- Programs start in September and end in May or June
- Family Engagement Opportunities
- Parents/guardians may transport their children to and from the center.
- Transportation options for your child may be available.

Great Start Readiness Program (GSRP) 4 Year Olds

- Children must be 4 years old by September 1
- Centers are open 7 hours per day, 4 days per week.
- Families receive 2 parent/teacher conferences and 2 school readiness home visits.
- Programs start in September and end in May.
- Family Engagement Opportunities
- Transportation options for your child may be available.

Help Us Fill Our Classrooms - Spread the Word!

We need your help! As an enrolled family, you can help us 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 Head Start/GSRP Grievance Procedure

- Unresolved grievances regarding NMCAA child development programs will be referred to the Early Childhood Programs Director and/or the Executive Director.
- If you are a GSRP parent and are not satisfied with NMCAA's service, you can contact your local ISD office.
- 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 he/she 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 shall be posted at all centers for parents and community members to access.

Head Start Parent/Guardian Committee Membership 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 Committee

Parent/Guardian meetings and family engagement activities 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 opportunities, parents have opportunities to engage in the Head Start Parent Family 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 Parent Committee from each Head Start classroom and childcare collaborative site elects a representative to serve on Policy Council. Each Policy Council parent/guardian represents a classroom teacher.

Policy Council

Policy Council is the governing body of the Head Start program and acts as the parent's voice in making decisions and providing input for the program. 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 from home to the meeting site is also reimbursed.

Talk with your child's teacher or childcare provider about how to become involved!

Great Start to Quality

Great Start to Quality is Michigan's system, which sets quality standards and evaluates the quality of early care and education programs. Great Start to Quality includes 10 Resource Centers across the state that work with programs to take steps to improve their quality. Great Start to Quality also shares information about programs with families and helps families select the right program for their needs.

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 \(nsopw.gov\)](http://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.
- 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 Child Care Licensing Bureau (CCLB)

- The Child Care Licensing Bureau will be notified with 24 hours by phone, fax or email when:
 - A child is lost or left unsupervised, or an incident involving an allegation of inappropriate contact occurs at the center. An incident report will be submitted in the Child Care Hub Information Records Portal (CCHIRP) within 72 hrs.
 - The Child Care Licensing Bureau telephone number for our entire service region is 1-866-856-0126.
- **For childcare collaborative center staff ONLY:** Regarding child abuse and neglect, the Collaborative and EHS Center-based Manager must be notified within 12 hours of submitting a report in the Child Care Hub Information Records Portal (CCHIRP) to the Child Care Licensing Bureau, or when a special investigation is initiated by the Child Care Licensing Bureau. A discussion will be held between the Manager and/or Director regarding further action.

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.
- The ISD/GSRP consultant must be notified within 24 hours of a special investigation being initiated by the Child Care Licensing Bureau for GSRP funded programs.

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.

Participating in Your Child's Classroom

Adults can participate in the preschool classroom in a variety of ways depending on staff needs. There is always something to do and having an extra pair of hands is a great help to the entire classroom.

Some ways to get involved:

Be an observer: Watch, listen and learn what happens in preschool. Watch your child learn while playing. Become comfortable with the setting and activity schedule.

Focus on your child: Be a play participant. Follow your child's lead; they will draw you into play.

Assist the staff: Help with the daily program and routines. The education staff will welcome your assistance and provide you with guidance as to what tasks would be most helpful. As a volunteer, you will never be left alone with children.

Children often become more and more used to sharing their parent or guardian while at school. In the beginning, it may help to explain to your child that while you are at school, you will be a volunteer for all the children.

PLEASE, join us when you can. Your education staff has more specific suggestions for what you might do as a volunteer.

Parent/Guardian Participation

Head Start/GSRP could not exist without tremendous parent/guardian involvement and interest in the program. You are your child's most important teacher! We are accepting of all families and their diverse backgrounds so that everyone feels valued and included. We appreciate that everyone is equal, and we avoid making assumptions about anyone. Thank you to all parents/guardians who share their strengths with the program.

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

- Become active at your center.
- Share your family traditions and talents with us so we can learn from you!
- Talk with other parents/guardians and staff about the program and ways that each person can help.
- Use the What do You Think About Program form in the classroom to share ideas or thoughts about the program.
- Offer opportunities for decision-making activities within the local advisory structure.
- Share ideas and input about ways to improve program quality.
- Inquire about paid subbing opportunities.
- If elected, Head Start parents/guardians may serve as Policy Council representatives.
- Head Start parents/guardians may assist and support the current Policy Council Representative.

Participating in the program

It gives you an understanding of what the program is doing for your child and how you can help.

- Gives your child a positive impression about school and shows your interest in school.
- Provides the education staff with an opportunity to get to know you better.
- Staff can learn from you, and you can learn from them.
- Families may also request assistance in implementing fun, educational activities in their own home.
- To reinforce and support the child's total preschool experience, staff members can provide family members with ideas about learning opportunities to continue the program at home.
- Teachers utilize Learning Genie and/or send home monthly calendars that describe fun activities you can do with your child. Activities are based on Creative Curriculum goals that support your child's growth and development. These activities may be counted as In-kind.

Learning Genie Mobile App

- Our program uses a tool called Learning Genie for communication about your child, family needs, school events, school closures, at home learning activities, resources for your family, educational opportunities, health requirements and so much more....
- Please download the Learning Genie Parent App (make sure it's the one for parents!) and we'll walk you through the next steps.
- We are excited to build a connection with you and become a partner in your child's education.

Head Start/GSRP School Readiness Home Visits and Parent/Teacher Conferences

Home visits are a valuable part of the Head Start/GSRP experience. The education staff visits your home to:

- Make connections between the home and classroom setting so there are open lines of communication.
- Learn more about your child and your hopes and dreams for them.
- Share ideas about learning opportunities available in your home.
- Tell you more about our curriculum and your child's current development.
- 1st home visit scheduled between August-November and the 2nd home visit scheduled between February-April

Thank you for participating in home visits! They are important in building relationships with your child's teachers and FES (Family Engagement Specialists) and supporting your child's success in school and in life.

Parent/teacher conferences are:

A scheduled meeting that takes place in the classroom with your child's teacher and you to discuss your child's growth and development using the data on the GOLD assessment tool.

- Scheduled in December/January and in May. The conferences are 45 minutes.
- A time for you to ask questions about your child's school experience and to set goals for your child's continued growth.

If you need to cancel a home visit or a teacher conference, please call the center to reschedule. Call/text your FES directly if you need to cancel with them.

Advisory Meetings/Family Participation Group

Each center has an advisory committee/family participation group meeting which meets at least two times per year. The committee consists of classroom staff, parents/guardians, and specialists/stakeholders. The committee reviews local operations, including recruitment/enrollment, classroom observations and child outcome data, and other issues important to parents/guardians. The committee needs parents/guardians to be part of the decision-making process governing your local center. All parents/guardians are encouraged and welcome to attend these meetings.

Intermediate school district's work in collaboration with programs to provide a data advisory committee and school readiness committee which meet periodically throughout the year.

All parents/guardians are encouraged and welcome to attend these meetings as well. Each region hosts a Great Start Collaborative Parent Coalition where parents/guardians and early childhood professionals gather to discuss important issues impacting children and families.

Health Services Advisory Committee

The purpose of the 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.

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.

Family Partnerships

The role of the teaching staff and FES (Family Engagement Specialist) is to support families throughout your Head Start/GSRP experience. Teachers and FES serve as your advocates and support your child and family to:

- Identify family strengths.
- Connect to community resources to meet your family needs.
- Teachers help you meet school readiness goals and FES support family goals.
- Obtain the needed health screenings.
- Understand how the program works.
- Provide home visits to enrolled families as needed.

The Family Partnership Process

We believe in strong family partnerships to help your child get ready for school and have positive outcomes for your family. Congratulations on being enrolled! NMCAA staff value families as children's first and most important teachers. We support the needs of your whole family without judgment. Please download Learning Genie for communicating about your child/family, to receive information about family events, center parent/family meetings, school closures, important program updates, and resources for family well-being and school readiness. Staff team with you during parent teacher conferences, organizing family meetings, events and workshops based on your interests.

Head Start asks families to schedule a home visit with an FES for reviewing your "Circles of Support" (who helps take good care of you) and two important surveys: the Family Needs Assessment (done once) and the Family Outcome Tool (done twice).

We will use the surveys to celebrate your family strengths and identify areas you want support for, which can become a family goal. The FES will assist you with any interested community or NMCAA resources to meet your family needs.

Wexford-Missaukee ISD is an affiliate of Help Me Grow (HMG) Michigan so all families in our GSRP programs and county wide can connect with Help Me Grow. Families can access local community services and resources in one location. Whether a parent has a concern or just wants to know more about their child's development, Help Me Grow can help. For more information go to www.helpmegrow-mi.org and click on your county to get started.

Cultural Competency Plan

The purpose of the cultural competence plan is to develop a system that can effectively provide services to children and families of all cultures, races, ethnic backgrounds, and religions in a manner that recognizes values, affirms, and respects the worth of the children and families and protects and preserves the dignity of each. NMCAA believes that by addressing the cultural and linguistic needs of our children and families, it will improve access to health care, quality of education and better school readiness outcomes. It is important to value the culture, ethnicity, race, and religion in the delivery of services that NMCAA provides to ensure a comprehensive and coordinated plan that includes interventions on levels of policy and procedures making, program administration and evaluation, and most importantly quality programming for all enrolled in the program.

NMCAA has many partnerships that help to ensure the cultural competence plan is executed. The agency works with four Intermediate School Districts in its service area.

Each ISD brings unique support, based on their resources and capacity. They provide special education services to ensure all children receive educational experiences based on their needs. They also provide Early Childhood Specialists who complete observations in the classrooms. They monitor that the cultures of the classroom are represented, and activities are planned to support these cultures.

The Resource Center provides resources and support through training's that are offered in the 10 different counties NMCAA serves. NMCAA provides programs with the resources they need to purchase classroom materials and equipment to support the plan. There are activities planned through language experiences, creating food from different cultures, celebrations, books, dolls so that currently enrolled children and families are reflected in the lesson plan experiences each week. The parents/guardians have a section on the lesson plan where staff reach out to them to get ideas to support the study that is taking place that week. Many times, the family's culture is represented in the activities, and we encourage parents/guardians to visit the classroom to implement the activity ideas they shared.

This information is shared with families through many ways: parent/guardian handbook, parent/guardian meetings, family engagement events, newsletters, visits to the classrooms, conversations, home visits, and teacher conferences. NMCAA staff are culturally sensitive in their interactions with children and families. The staff are trained and coached to understand and respect each family and the uniqueness that each of them bring to the program.

Head Start/GSRP Preschool Curriculum Statement

The most important goals of our preschool curriculum are for children to get along well with others and become enthusiastic learners. We want children to be independent, self-confident, and curious learners. We're teaching them **how** to learn, not just in preschool, but throughout their lives. We do this by creating purposeful and productive play experiences that help children grow in all areas.

The Creative Curriculum focuses on developing the whole child by providing a developmentally appropriate learning environment and experiences. In this setting, children are observed and then assessed three times a year. We use scientifically researched objectives/dimensions in the areas of social/emotional, physical, language, cognitive, literacy, math, science, social studies, and the arts.

Curriculum Areas

The activities we plan and the way we organize the classroom 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, compassion, and a sense of making positive choices. We support children and foster their resilience and their sense of comfort, safety and confidence with nurturing relationships and being a part of a school family with a structured routine and rules. Social and emotional development is a gradual process of building the capacity to understand, experience and manage emotions.

Children learn to form friendships, communicate emotions, manage challenges, and develop independence, self-confidence, and self-regulation skills, which help them for school and life successes. We also promote the resilience of children's caregivers.

Physical - to increase 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 - to acquire thinking skills such as the ability to solve problems, to ask questions and to think logically; sorting, classifying, comparing, and counting, and to use materials and imagination to show what they have learned.

Language - to use words to communicate, to listen and participate in conversations with others, and to increase children's vocabularies.

Literacy – to foster an excitement about reading books and what they are hearing and learning, understand the purpose of print, recognize letters and words, to participate during interactive read aloud times, to notice print in the environment and ask questions about the meaning of print, and begin writing for a purpose.

Math – to develop an understanding of mathematics by letting children interact with mathematic materials in the interest areas, introducing activities with a mathematics focus, using mathematical vocabulary to describe their actions, and thinking, asking questions that get the children to investigate, playing logic games and creating problem-solving stories.

Science – to engage children in the process of scientific thinking, gaining understanding and making connections with living things, the physical properties of materials and the earth's environment.

Social Studies – to teach children to learn how to be researchers, critical thinkers and active members of a classroom community and understand how they relate to others.

Arts – to give children the opportunities to draw, paint, construct, mold, weave, dramatize, sing, dance and move so that they make new discoveries and integrate what they are learning.

Head Start/GSRP 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

Children will demonstrate age-appropriate understanding of print concepts and build their knowledge of the alphabet.

Domain: Dual Language Learners

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

Domain: Mathematics Development – Cognition and General Knowledge

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: Approaches to Learning Children will demonstrate resilience, persistence and problem-solving skills when completing tasks.

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 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.

Nutrition: Good nutrition is essential for children's brain development. Children who have access to nutritious food have the 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 for 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 programs 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, 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. When children learn to recognize and share their feelings with trusted adults, they feel good about themselves. These relationships help them develop the confidence to learn new skills. Children also learn how to manage their feelings, thoughts, and behavior.

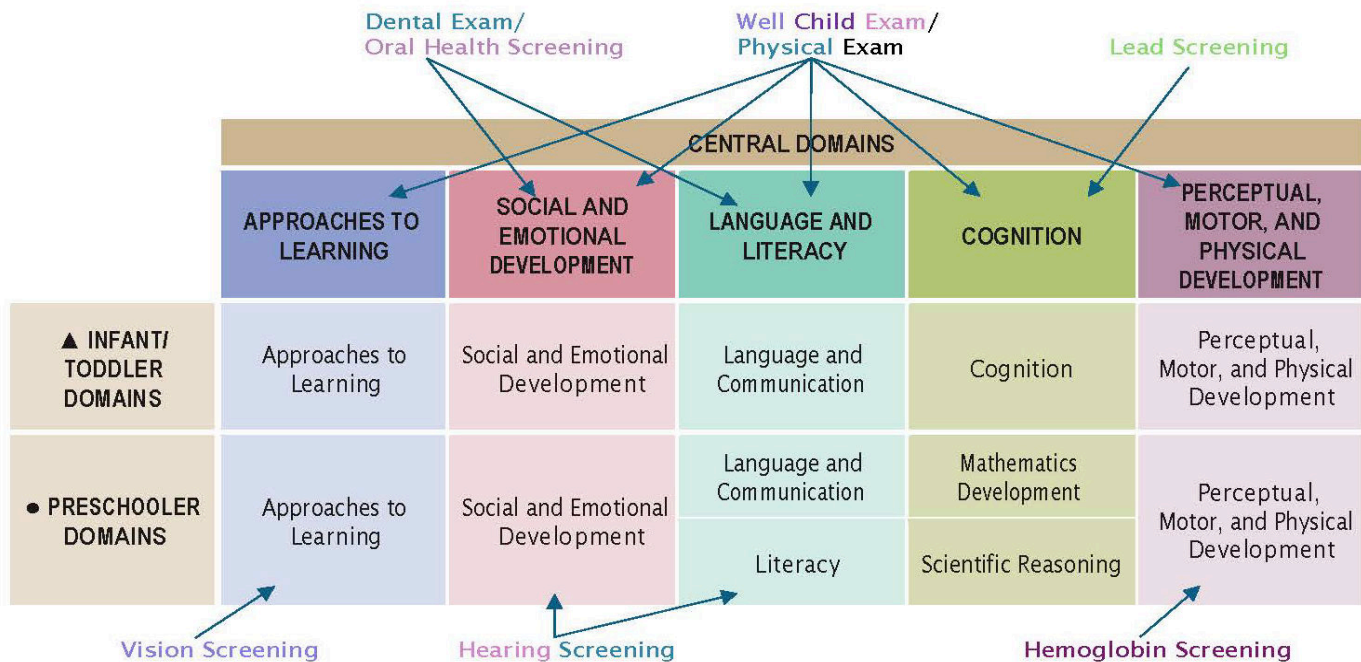
Nurturing and Responsive Relationships: Early relationships shape children's learning and development. Children thrive when adults support their strengths and needs. Responsive adults help children feel safe and valued and learn how to get along well with others.

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 Department of Lifelong Education, Advancement, and Potential along with our Head Start Performance Standards, 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 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 within 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. R&H communicates with families regarding any children needing follow-up care.

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 ChildPlus and the Michigan Care Improvement Registry (MCIR). They are in regular communication with classroom staff, 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, 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 classrooms and socialization spaces for staff, children, families, and volunteers.

Attendance

When your child will be absent:

Contact the classroom as soon as you know that your child will be absent. If your child rides the bus, classroom staff will notify the bus personnel. When a child is absent and the family has not contacted the classroom, classroom staff will attempt to make telephone/text contact with the family for the child's safety and well-being.

Build the habit of good attendance:

All families should strive to maintain a 90% attendance rate. Establishing the habit of regular attendance in preschool will build skills and develop good habits for showing up on time. Too many absences-excused or unexcused-can keep students from succeeding in school and in life. School success goes hand in hand with good attendance.

What you can do:

- Keep an attendance chart at home. At the end of the week recognize your child for attending school every day.
- Set regular bedtime and morning routines.
- Keep your child home from school only when your child is truly sick. Complaints of a stomachache or headache can be a sign of anxiety and is not a reason to stay home. Talk to your child's doctor if you have any concerns.
- Classroom staff, the Family Engagement Specialist, or other parent/guardians can help with advice to support your child's comfort at school and excitement about learning.
- Make plans for transportation to school if something comes up. Ask a family member, a neighbor, or another parent/guardian for backup.
- If possible, schedule medical appointments and extended trips when school is not in session.

If your child has too many absences--excused or unexcused

If you are unable to maintain regular attendance, the Head Start or GSRP staff will work together with you to make an attendance success plan. We want to help remove any barriers to regular attendance, if possible. If there is no improvement in attendance, the Early Childhood Programs Director will determine if your child has ceased to attend, and your child may be placed back on the waitlist.

Admission, Withdrawal, Fees, and Exclusion Policy

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

Head Start and GSRP does not require a fee/tuition for preschool. GSRP income eligibility is now up to 400% of the FPL.

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

Quiet Time Routine for School Day Programs

Children will be given an opportunity to rest during a designated time every day according to each individual classroom's daily schedule. Quiet time is mandated by licensing regulations, Head Start and GSRP; all require that children have a rest time when in care for more than five hours a day. When quiet time starts, children will be on their cots for 20

minutes. After that time, the non-sleepers can participate in quiet, planned activities. The duration of rest time is 30-60 minutes and allows for the individual needs of the child.

Toileting Guidance

Children do not have to be toilet trained to be enrolled in preschool programs.

We will support and encourage the child's readiness for independent self-help skills. Education staff and the child's primary caregiver will work together to make sure that the toilet routine is consistent both at the center and the child's home. Families will receive copies of Toilet Training Reports and/or Illness Incident Reports to share progress or incidents.

Typical Daily Schedule

Routines are very important for preschool children.

The classroom establishes a daily schedule that allows for:

Arrival/Breakfast/Greeting Time – Children enter the classroom at their own pace. Parents/guardians are encouraged to stay until children are ready for them to leave. Children have choices about whether to eat, spend time with books, or interact with adults and one another. Once all children have arrived, adults and children spend 3-5 minutes together sharing daily announcements.

Large-Group Time/Music and Movement – All adults and children participate in activities planned around children's interests, developmental levels, music and movement, cooperative play and projects; and events meaningful to children.

Small Group Time – An adult-initiated learning experience based on children's interests and development where children explore, play, work with materials, and talk about what they are doing. Individual children explore and use the same set of materials in their own way.

Planning Time – Children indicate their plans to adults in a place where intimate conversations can occur and where people and materials are visible. Adults use a range of strategies to support children's planning (e.g., props, area signs, tape recorders, singing, planning individually, in pairs, in small groups).

Work Time (children's hour of uninterrupted Choice Time) – Children always initiate activities and carry out their intentions. Children make many choices about where and how to use materials. During Work Time, adults participate as partners in child-initiated play and encourage children's problem solving both with materials and during times of social conflict.

Cleanup Time – Children and adults clean up together keeping the spirit of play and problem solving alive. Children make many choices during clean up. Adults accept children's level of involvement and skill while supporting their learning.

Recall Time – Gathered in small group settings, children choose Work Time experiences to

reflect on, talk about, and exhibit. Adults provide a variety of materials and strategies to maintain interest as they follow children's lead and encourage children to share (e.g., individual props such as puppets, telephones or periscopes, group games using a hula hoop, ball or spinner, re-enacting, drawing, showing and describing a structure or painting). Adults are unhurried in their approach and may complete Recall Time with four or five children each day.

Outside Time – Children have many choices about how they play in the outdoor learning environment, much as they do during Work Time indoors. Adults supervise children for safety and join in their active outdoor play, supporting their initiatives and problem solving. Outside time is minimally 30 minutes each day, excluding time for dressing and transitioning outdoors.

Bathroom/Wash Hands/Prepare for Lunch – Children assist in preparation and set up. Children choose where they would like to sit and are encouraged to serve themselves.

Lunch/Brush Teeth – Family-Style meals support children doing things for themselves (e.g., serve themselves, pour beverages, distribute napkins, wipe up spills). Children choose whether to eat, what to eat, and how much to eat.

Adults eat and have meaningful conversations with the children. Children are encouraged to clean their own meal space including disposal of leftovers, wiping of tables, and pushing in their own chairs.

Quiet/Resting Time – Resting is a time for sleeping or quiet, solitary, on-your-own-cot play. Rest Time plans should be individualized to meet the needs of each child. Quiet play could include books, soft music, baby dolls, or fine motor manipulatives.

Wake/Bathroom/Snack – As children wake up, adults and children work together to put away cots and set up for snack. Children are encouraged to clean their own snack space including disposal of leftovers, wiping of tables, and pushing in their own chairs.

Work Time – A second work time, while essentially the same as morning work time, may vary slightly from morning expectations while ensuring that children are primarily involved in planning and carrying out their own intentions. Teachers may implement activities with various grouping strategies (individual, very small groups, homogenous) to support children's learning of targeted skills. At least one member of the teaching team will be assigned to support the majority of children working in open centers. A collaborative curriculum-planning approach helps to ensure that the teaching team will meet individual child needs by supporting and extending development, knowledge and skills within children's play themes rather than pulling them aside for teacher-directed activities. GSRP expectations for active, play-based must be met at all times.

Outside/Dismissal – Children will be dismissed. Adults will assist children during this transition. Occasionally the center may have the opportunity to offer educationally sound field trips.

Parents/guardians will be notified and complete a permission slip before each field trip event.

Parent/Guardian Notice of Program Measurement*

NMCAA is required to work with the Michigan Department of Lifelong Education, Advancement, and Potential (MiLEAP) to measure the effect of the state-wide Great Start Readiness Program (GSRP). Information is sometimes collected about GSRP staff, enrolled children, and their families. Program staff or a representative from MiLEAP might:

- Ask parents/guardians questions about their child and family.
- Observe children in the classroom.
- Measure what children know about letters, words, numbers, etc.
- Ask teachers how children are learning and growing.

Information from you and about your child will not be shared with others in any way that you or your child could be identified. It is protected by law.

Questions? Contact:

- mileap@michigan.gov or 517-241-7004 or MiLEAP 105 W. Allegan Street Lansing, MI 48933
- Northwest Michigan Community Action Agency, 3963 3 Mile Road Traverse City, MI 49686 or 800-632-7334

Screenings, Observations, and Developmental Assessments

The program individualizes instruction to support each child's strengths, needs, and overall development. Teachers learn about children through screenings, observations, assessments, teacher conferences, individual time with each child, and home visits. The knowledge gained from these experiences is shared with you and used for individualizing instruction for children. The screening and assessments results are shared with the Intermediate School Districts where NMCAA receives GSRP funding.

Head Start/GSRP uses the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire: Social Emotional (ASQ-SE) for developmental screening tools. Each child is screened, in collaboration with their family, once a year to monitor their development. 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 a consent form.

Children are assessed three or four times a year using the Teaching Strategies GOLD. This assessment is used to measure child growth and learning. To support social and emotional needs, we may use the Devereux Early Childhood Assessment (E-DECA) or the (E-DECA Clinical).

Please contact your child's teacher if you have any questions regarding any of the above screenings and assessments.

Special Needs

At least 10% of the children enrolled in Head Start have been diagnosed with a disability. Through the screenings, assessments, and observations, children are sometimes found to need further evaluation with a specialist trained in the area of concern, such as oral language/speech or motor/movement skills. If your child would benefit from an evaluation, you will be informed immediately, and you will be asked to give written permission for further evaluation. We will work together to ensure that your child's needs are met and that 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 (closet, locked room, box, 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 physical level, if possible. Stop or sit on a low chair so that they can see your face.
- Go to the child; avoid calling them from across the room.
- Speak in short, meaningful sentences that 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 a better, more acceptable way 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

Say what you want the child to do:	Avoid Saying it this way:
Sit down when you slide.	Don’t stand up when you slide
Dig in the sand.	Don’t throw 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 with a 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.
Put a paint shirt on.	Don’t you want an apron on?

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, teacher conferences, and 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.

Conscious Discipline® in Head Start and GSRP

Conscious Discipline® is an emotional and behavior management program that teaches us to be aware of our own emotions. Parents/guardians may be asked to complete an "e-DECA," which includes Conscious Discipline Strategies within each child assessment. These assessments can be used for specific children and/or for supporting the classroom and 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.

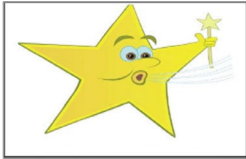
Research shows that schools/families using Conscious Discipline® have:

- Increased academic achievement and positive teaching time at home/school; increased social skills, character development and positive home/school relationships.
- 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 to Increase Calming and Coping

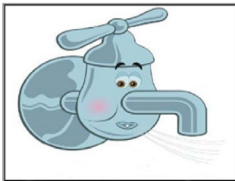


The S.T.A.R. - **S**top/Smile; **T**ake a deep breath **A**nd **R**elax. **R**elease your breath slowly.



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



The Balloon - 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 deeply and then let the air out as you drop hands down to head.

Active Supervision

Keeping children safe is a top priority for our Head Start and GSRP programs. Education staff ensure children are always supervised.

Active Supervision is an effective strategy for creating a safe environment and preventing injuries in young children. It transforms supervision from a passive approach to an active skill. Staff use this strategy to make sure that children of all ages explore their environments safely.

All staff are responsible for making sure that no child is left unsupervised. Active supervision is a strategy that works. It can be used in classrooms, playgrounds, during transitions, and on buses. It can also be practiced by families as a tool to use at home. Please ask your child's Teacher or Family Engagement Specialist for more resources.

Six Strategies

1. Setup the environment
2. Position the staff
3. Scan and count
4. Anticipate children's behavior
5. Engage and redirect
6. Listen

Injury Prevention Starts at Home

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

You Can 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. Ask a friend or your landlord if you need help.
- Test bath water temperature before putting your child in it.

You Can Prevent Falls at Home

- Watch your child CONSTANTLY when 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 or strollers.

You Can Prevent Poisonings 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.

You Can 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 his or her food fully before swallowing.
- Choose the foods you feed your child carefully—avoid popcorn, hard candy, nuts, hot dogs, grapes, and fish with bones.

You Can Prevent Drowning at Home

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

You Can 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 crib—these things can sometimes keep a baby from breathing.
- Place babies to sleep on their backs.

Safe Ways to Dress Your Child for School

We have a few suggestions about dressing your child for school:

- It is great when children wear comfortable play clothing that can get messy.... we do

lots of creative things in preschool.

- For playing outside in the winter, it is important to have your child come to school with a snowsuit, mittens, hat and boots each day. **Put your child's name on these items.** Outside activities are a required part of our program and a vital part of your child's whole development.
- Shoes that tie, Velcro, or stay securely on your child's feet (like athletic 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 more successful using the bathroom independently.

Staff can provide resources for those who may need children's clothing and/or injury prevention items.

Bringing Items from Home

There are many reasons that children may want to bring things to school like their favorite toy, stuffed animal, or security blanket.

Except for rare occasions, we encourage children to leave these things at home. While we try to keep track, items from home can be damaged, lost or end up in someone else's backpack. Please keep things at home that are not necessary at school.

Check your child's backpack and pockets every day before they come to school. There is a chance that something dangerous could find its way into a backpack. Preschoolers have little understanding of dangerous items such as guns or knives. **PLEASE** help us keep all children safe and secure.

For the safety of all children, and due to health and/or allergy concerns, please make sure any food/snacks from home are not brought to school.

Pedestrian Safety

Head Start/GSRP provide training for parents/guardians and children in pedestrian safety at center orientations and/or home visits. This training is also reinforced throughout the program year.

Children receive safety education training which includes:

- Safe riding practices.
- Safety procedures for boarding and leaving the vehicle.
- Recognition of the danger zones around the vehicle.
- Emergency evacuation procedures, including participating in an emergency evacuation drill conducted on the vehicle the child will be riding.

Safety education training for families includes:

- The need to escort their children to and from the bus or their own vehicle.
- Helping adult caregivers to reinforce bus safety procedures with their children.
- Encouraging families to practice vehicle safety in their everyday routines.

Parking lot guidance includes:

- Do not allow your child to get out of the car until you are at the child's door.

- Never leave children unattended when going to and from your car.
- Turn your car off, remove all children from the vehicle, lock it, and take the keys with you.

Program Safety

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

At centers, 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 all the time. 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.

Safety Drills

Programs will conduct ongoing safety drills as required by Head Start/GSRP, the State of Michigan Licensing Rules for Child Care Centers and the local school district.

Weather Policy

Severe weather closings are determined by the local public school district.

- If the public school is cancelled for the entire day, the local Head Start/GSRP will also be closed.
- If the public school is delayed in the morning, School Day programs with a morning delay may follow the public-school schedule.
- If the public school closes early, the local Head Start/GSRP may also close.
- If the program provides transportation, parents/guardians can contact the center prior to the bus run to let staff know the conditions of their rural roads. There may be times when the center is open, but the buses do not travel their whole route.


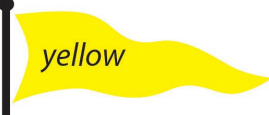



If the weather is questionable, families have the choice to keep their child at home.

Classroom Emergency Closures

If the center closes for an emergency, the teacher will contact parents/guardians by phone, text, or email as soon as it's determined safe to do so. Emergency closures may be due to illness, severe weather, or loss of utilities. It is vital that your child's emergency contacts are current. Please contact your child's teacher to make any changes in-person on the Child Information Record as soon as possible.

Air Quality and Outdoor Activity Guidance for Schools

Regular physical activity — at least 60 minutes each day — promotes health and fitness. The table below shows when and how to modify outdoor physical activity based on the Air Quality Index. This guidance can help protect the health of all children, including teenagers, who are more sensitive than adults to air pollution. Check the air quality daily at www.airnow.gov.

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

*** 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>.



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Periods During Which the Center is Closed

The dates and periods when the center is closed vary considerably from site to site. Please check with your child's education staff to find out how the program year calendar, holidays, and breaks coincide with the public-school calendar.

Request for Identification

Individuals who arrive to pick up your child but are not known to center staff will be asked for identification. Their name will be matched with the Child Information Record **before any child is released**. A copy will be made of the identification.

Releasing Children to Authorized and Unauthorized/Unknown Adults

Children will only be released to persons authorized by the parent/guardian. Children will be released to either parent unless a court order prohibits release to a particular parent. Children may only be released to adults authorized by parents or legal guardians whose identity has been verified by photo identification. Names, addresses, and telephone numbers of persons authorized to pick up child should be obtained during the enrollment process and regularly reviewed, along with clarification/ documentation of any custody issues/court orders. The legal guardian(s) of the child should be established and documented at this time.

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 classroom staff and Family Engagement Specialists support your child through potentially difficult and challenging experiences. Staff hold this information in strict confidence. Our centers cannot legally restrict the non-custodial parent from visiting the child, reviewing the child's records, or picking up the child. A child shall be released to either parent or the child's guardian unless a court order prohibits release to a particular parent. A copy of the order prohibiting release must be kept on file at the center. In case of conflicts, the proper authorities will be contacted to ensure the safety of all staff and children.

In-Kind

The funding we receive for our program is SO very 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:

- Volunteer in the classroom.
- Complete at home activities with the monthly in-kind calendars.
- Spend time with your child working on the school readiness goals that are set by you and the teacher.
- Participate in field trips, parent meetings, and family engagement activities.
- Make/prepare materials for the classroom.
- Donate goods or services to be used for program use.
- Please ask your child's teacher 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! We thank you!

Emergency Procedures Posting

Policy: Provide care for children and staff during an emergency following Head Start Program Performance Standards, Child Care Center Licensing Rules, Great Start Readiness Program Requirements and Great Start to Quality Guidance.

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

FIRE-EVACUATION

- (Staff Position) declare emergency. Alert staff about emergency and begin evacuation procedure. **Call 911.**
- (Staff Position) retrieve Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record and emergency phone numbers.
- (Staff Position) will gather students at the nearest emergency exit and complete a head count. (Non-mobile infants and toddlers will be transported in an evacuation crib.)
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as individualized plans (IFSP/IEP), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the evacuation meeting site. If blocked, use secondary evacuation route.
- **The evacuation meeting site is _____.**
The secondary evacuation meeting site is _____.
- Upon exiting, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, text, or classroom communication app as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is _____.** **Staff person responsible for releasing students _____.**
- Wait for all clear before returning to the building.

TORNADO-SHELTER IN PLACE

- (Staff Member) declare emergency. Alert staff about emergencies and begin shelter in place. **Call 911.**
- (Staff Member) will retrieve Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record, and emergency phone numbers.
- (Staff Member) will gather students at the nearest emergency exit and complete a head count. (Non-mobile infants and toddlers will be transported in an evacuation crib.)
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as individualized plans (IFSP/IEP), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the designated meeting site. If blocked, use the secondary route.
- **The designated shelter in place site is _____.**
The secondary designated shelter in place site is _____.
- Upon guiding children to shelter in place, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, text, or classroom communication app as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is _____.** **Staff person responsible for releasing students _____.**
- Wait for all clear before leaving shelter and resuming daily activities or begin evacuation procedures if the building is no longer structurally safe.

LOCKDOWNS AND OTHER CRISIS MANAGEMENT PROCEDURES are included in the SAFETY AND EMERGENCY PREPAREDNESS PLAN located in the GRAB and GO BINDER.

OTHER NATURAL OR HUMAN CAUSED EVENTS (I.E.: GAS LEAK, CHEMICAL SPILL, SEWER BACK-UP, FLOOD, POWER OUTAGE)

- (Staff member) declares emergency and decides the best emergency response: **evacuate or shelter in place. Call 911.**
- (Staff Member) retrieves Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record, and emergency phone numbers.
- (Staff Members) gather students at the nearest emergency exit or shelter in place and complete a head count. (non-mobile infants and toddlers will be transported in an evacuation crib.)
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as individualized plans (IFSP/IEP), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the evacuation meeting site. If blocked, use secondary evacuation route.
- **The evacuation meeting site is _____.**
The secondary evacuation meeting site is _____.
The designated shelter in place site is _____.
The secondary designated shelter in place site is _____.
- Upon exiting or guiding children to shelter in place, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, text, or classroom communication app as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is _____.** **Staff person responsible for releasing students _____.**
- Wait for all clear before re-entering the building, leaving the shelter in place location, and/or resuming daily activities; begin evacuation procedures if the building is no longer structurally safe.

SERIOUS ACCIDENT/INJURY PLAN

- Ensure that all staff and volunteers are aware of the location of the First Aid Kits (one kit for the classroom and one for outside), Safety and Emergency Preparedness Kit, the Child Information Records, and the emergency phone numbers.
- (Staff Position) will stay with the injured child and administer the appropriate first aid.
- (Staff Position) locate in the Grab and Go Binder both the emergency phone numbers and the Child Information Records to contact a parent or other emergency contacts listed on the card.
- (Staff Position) will care for the other children present during this time by removing them from the immediate area if possible. (Non-mobile infants and toddlers will be transported in an evacuation crib.)
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as individualized plans (IFSP/IEP), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- According to the parent's wishes and/or nature of the emergency, staff will plan for the child to be picked up or for an ambulance to transport the child to the hospital.
- Meeting sites and reunification sites will be determined by circumstance and/or emergency personnel.

INCIDENT, ACCIDENT, INJURY, ILLNESS, DEATH, FIRE REPORTING TO LICENSING AND REGULATORY AFFAIRS

- The center shall make a verbal report within 24 hours to Licensing for the occurrence of any of the following: a child is lost or left unsupervised, an incident involving an allegation of inappropriate contact, the death of a child in care, the center is evacuated for any reason, a fire on the premises of the center that requires the use of the fire suppression equipment or results in loss of life or property.
- In the event of death of a child in care, immediately report it, in person or via phone, directly to the child's parent. Other incidents, accidents, injuries or illnesses will be reported to the child's parent as soon as possible.
- A center shall make a verbal report to the department within 24 hours of notification by a parent that a child received medical treatment or was hospitalized for an injury, accident or medical condition that occurred while the child was in care.
- A center shall submit a written Incident Report (BCAL-4605) to MiLEAP within 72 hours of the verbal report. A copy of the report shall be kept on file at the center. Additionally, staff will provide a copy to their Supervisor and Program Support Staff.

What To Do When Your Child is Sick

The program should notify parents/guardians when children develop new signs or symptoms of illness. The notification should be immediate for emergencies or urgent issues. Staff should notify parents/guardians of children who have symptoms that require exclusion, and family members should remove children from the early care and education setting as soon as possible. For children whose symptoms do not require exclusion, verbal or written notification to the adult caregiver at the end of the day is acceptable. Most conditions that require exclusion do not require a primary health care provider visit before re-entering care.

When a child becomes ill but does not require immediate medical help, a decision should be made regarding whether the child should be sent home. The caregiver/teacher should determine if the illness:

- Prevents the child from participating comfortably in activities.
- Results in a need for care that is greater than the staff can provide without compromising the health and safety of other children.
- Poses a risk of the spread of harmful diseases to others.
- Causes a fever above 100.4 °F and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, and diarrhea).

If any of the above criteria are met, the child should be removed from direct contact with other children and monitored and supervised by a staff member known to the child until dismissed to the care of a parent/guardian, primary health care provider, or other person designated by the parent/guardian.

Children Returning to the Program After Being Sick

- If your child has a fever or a continuous cough, they must be fever free for 24 hours after symptoms subside without the use of medicine that reduces fevers.
- If your child was vomiting or had diarrhea, they must be symptom free for 24 hours before returning to school.
- If your child has a communicable disease, we will use the primary care providers recommendations for returning to school.
- If your child has been exposed to a contagious disease, classroom staff should be notified so that the incubation period can be discussed and it can be determined what dates, if any, your child should stay at home.

NMCAA classrooms 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 classrooms are required to notify families when a child in care has contracted a diagnosed communicable disease. The center is not allowed to release the name of the ill child to any other parent/guardian. 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 families 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.

Staff and Volunteer Communicable Disease Policy

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

- If an employee has been exposed to a communicable disease, management should be notified. Management will consult with the local Health Department to determine if a notification plan is needed and/or 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 Health Hygiene Information

NMCAA preschool 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 Orientation activity, each family enrolled in a NMCAA preschool program will receive a Community Resource Directory listing local health-related resources.

Head Lice Policy

If live lice are found in your child's hair, we will contact you to pick your child up from school as soon as possible. Keep your child at home until s/he is **free of live lice**.

If the Head Start/GSRP center is in a public school, we will abide by their policy which may require that children be **free of live lice and nits** before they can return to the center. Families may be referred to the local Health Department for additional resources and support.

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!** Some products cannot be used on an infant, pregnant woman, 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 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 the 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 all 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 step.

Step 4 - Returning to School

- When treatment is complete, please plan to self-transport your child rather than sending him/her on the bus.
- Staff and parent/guardian together can then carefully recheck your child's hair to make sure that your child no longer has live lice (or live lice and nits if our center is in a public school and needs to abide by their policy).
- If you have a problem with this self-transport request, please contact your classroom teacher for help.
- We look forward to welcoming your child back into the daily routine of the classroom!

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/lice/about/head-lice.html?CDC_AAref_Val=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

Medication Authorization Form

Policy: Staff will follow the proper handling, storage, administration, and record keeping of administration of medication.

Procedure: Medication will be given to a child by staff only. When giving or applying medication to a child in care, the following must be completed by the parent/guardian for **each** medication. An interruption in medication will require a new authorization form.

Send a copy of the completed log home each day when medication is dispensed.

- Only prescription medication can be dispensed. Medication **MUST** be sent to school in its original container, stored according to instructions and clearly labeled for the named child.
- Medication must have a pharmacy label indicating the physician's name, child's first and last name, instructions, name, and strength of the medication, and must be given according to those instructions.
- Medication shall not be added to a child's bottle, beverage or food unless indicated under the prescription label.
- Your child is **NOT** to carry medication to school.
- Communicate any changes regarding medication with education staff.
- Your child's medication must be current. Your child may not be able to attend school until their required medication is at the center.
- The instructions from the child's parent/guardian shall not conflict with the label directions as prescribed by the child's health care provider.

TO BE COMPLETED BY PARENT/GUARDIAN

I give my permission for _____ to give or apply the medication,
(Center)
 _____, to my child, _____, as follows:
(Specify, prescribed medication) (Child's name)

DIRECTIONS

1. Date to Begin Giving Medication	2. Date to Stop Medication
3. Time Medication is to be Given	4. Amount (dosage) of Medication Each Time Given
5. Frequency (daily, weekly, monthly, as needed, etc.)	6. Route (oral, inhalant, injectable, topical)
7. If frequency is "as needed", describe when medication will be needed. (wheezing, soreness in the muscle, etc.)	
8. Storage of Medication	9. Reason for Medication
10. Medication Expiration Date (NOT the REFILL Date)	11. Date of Training
12. Name of Health Care Provider	13. Phone Number
14. Additional Instructions (side effects, medication returned end of day, etc.)	
15. Signature of Parent/Guardian	Date

TO BE COMPLETED BY CAREGIVER

Date	Medication	Actual Time Administered	Amount Given	Staff Signature

Date/Time	Error/Reaction to Medication	Action Taken	Parent/Guardian Notified (date/time)	Staff Signature

Medication Authorization Guidance

A few reminders:

- The Medication Authorization Form must stay with the medication.
- Medication will be returned to the child's parent or destroyed when the parent determines it is no longer needed or it has expired.
- Emergency medications (EpiPen, inhaler) are always stored out of the reach of children but are always quickly accessible (rescue medication should not be stored in a locked box).
- When emergency medications are stored in a backpack, ensure that the backpack is hung high enough to keep it out of the reach of children.
- Non-emergency medications will be kept out of the reach of children and secured in a lock box. Lock boxes will be used in the classroom, in the refrigerator, and on the bus.
- Medication cannot be added to a child's beverage or food unless indicated on the prescription label.
- The staff member administering the medication must sign (full signature is required) the record each time. Do not use initials.
- If medication is used "as needed," there must be additional instructions noted in box 13. Describe when the medication will be needed (wheezing, soreness in the muscle, etc.).
- Describe error/reaction in detail on the Illness/Incident Report.
- If a child is seen by a doctor or goes to the emergency room, complete and Illness/Incident, make a verbal report to Licensing within 24 hours. Complete the Incident Report State of Michigan form (BCAL 4605) within 72 hours.
- A program must submit reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting health and safety of program participants or any matter for which notification or a report to state or local authorities is required by applicable law, including at a minimum:
- 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.
- Written authorization for triple antibiotic ointment, sunscreen, insect repellent, diapering cream, and hand lotion is obtained annually on the Parent/Guardian Release. Ensure the parent/guardian signature is on the release before using these products on a child. If the release is signed, it is not necessary to complete this form for items listed in this bullet. Triple antibiotic ointment and diaper cream must be labeled with the child's name.

BUS INFORMATION

Parent/Guardian Bus Responsibilities

Dear Parent/Guardian:

_____ Head Start and/or GSRP offers transportation to your child through _____ so that s/he can attend the program on a regular basis. Please read the following information carefully so that you can help us maintain a transportation system that operates well.

- Bus Driver Name and/or Bus Number: _____
- Center Telephone #: _____
- Pick Up Time: _____ Drop Off Time: _____

These times may vary depending on many factors. However, if your driver is consistently very late or very early, please let your teacher know.

- Changes in pick up and drop off locations must be discussed and arranged with the child's teacher. **Bus Drivers are not authorized to make these changes.** If your child will not be attending, it is your responsibility to let the center know either the day before or at least **one hour** before the route begins. Let us know as soon as possible if you will be moving.
- At pick up, walk your child to the bus. If the driver does not see anyone, s/he will continue on the route. Situations when an adult cannot walk a child to the bus (due to young children in care or other issues) need to be discussed with your child's teacher. If you are consistently not at home at pick up and/or drop off or if you fail to notify the program that your child will not be attending, **TRANSPORTATION FOR YOUR CHILD MAY BE TERMINATED.**
- At drop off, walk to the bus to pick up your child. If the driver does not see anyone s/he will bring your child back to the center. **It will be your responsibility to pick up your child. If you cannot be reached, your designated emergency contact will be called.** It is important to keep phone numbers of your contacts updated. If the center is unable to contact an approved person to pick up your child, the **Parent/Guardian Pick Up Policy** will then be followed.
- **In case of an accident or emergency,** you will be contacted as soon as possible. You will be given directions as to what to do and how to reunite with your child.
- It will be helpful for the safety of your child to discuss the importance of using quiet voices and remaining seated with the seat belt buckled on the bus at all times.

County Transit System

Program regulations prohibit children riding alone on a County Transit System that is open to public riders. County Transit can be used when the parent/guardian rides to and from the center with the child. There are some classrooms that contract with transit. In these situations, an agency employee is on board.

Parent Pick Up Policy

It is essential that each child be picked up at or before the center's posted closing time.

If an emergency occurs that is going to interfere with normal pick-up time, the parent/guardian needs to call the center as soon as possible. The parent/guardian will indicate who will be picking up the child by the center's posted closing time. The people picking them up must be noted in the Emergency Contact section on the Child Information Record. **Please make sure the people who are listed as emergency contacts on the Child Information Record are reliable, have a working telephone number and are available to pick up your child. The emergency contact must provide a photo ID at pick up time to be copied by staff for the safety of the child.** If there is no contact by parent/guardian, the guidelines listed below will be followed.

- The parent/guardian and persons listed on the Child Information Record form will be called three (3) times in 15 – minute intervals, beginning 5 minutes after the expected pick-up time.
- The staff will ensure the safety and well-being of the child at the center until the issues are resolved.
- One hour after the school day, the program will contact DHHS Child Protective Services.

We thank you for your cooperation in this matter. We know you understand that for the safety and well-being of your child, it is essential that children are picked up on time by the appropriate people.

If you are having a problem picking up your child on time, please speak with your child's teacher.

Celebration Policy

NMCAA honors DEIA (Diversity, Equity, Inclusion and Accessibility), which means that we create programming and environments that are respectful. We are accepting of all people and their diverse backgrounds so that everyone feels valued and included. *We appreciate that* everyone is equal and avoid making assumptions about anyone. When preparing for celebrations, program staff will consider how all the following are being respected:

- **race** (social term often used based on skin color and/or ancestry)
 - **ethnicity** (person's cultural background)
 - **religion** (person's beliefs and practices)
 - **differing abilities**
 - **family structure** (different kinds of family's people have)
 - **body type and physical traits** (how a person looks)
 - **gender identity** and how they identify themselves (how people see themselves as male, female, a blend of both or neither)
 - **sexual orientation** and whom they love (whom people are attracted to)
 - **education level**
 - **financial situation** (how much money someone has)
- Before planning celebrations, consider the backgrounds of all the families in your group and how the celebration may impact each person's sense of inclusion.
 - Consider how the planned activities reflect the children's life experiences, as well as broaden their insight into the lives and experiences of others.

- Keep in mind, cultures have their own set of rules and expectations, and cultural concepts are best taught by using the children's varied family heritages and community resources.
- Avoid teaching stereotypes from the past.
- Learn about family traditions and use them when possible (i.e. songs families sing to children, games they play, etc.)
- Celebrations are an opportunity to highlight children's learning and experiences in NMCAA early childhood programs. When celebrating the children and their work use pictures, videos, and displays to show children's accomplishments.
 - Be careful not to confuse celebrations with holidays. (i.e., Halloween, Thanksgiving, Christmas, Valentine's Day, etc.)
- Activities need to be open ended and process oriented so that ALL children can be involved successfully.
- Concepts being presented must be developmentally appropriate.
- Preparation should not dominate a month's worth of activities.
- If food consumption is involved in a celebration:
 - We cannot ask parents/guardians specifically to provide these food items. (They may, however, volunteer to bring items or volunteer to give time: i.e.: set up, serve, and clean up.)
 - Involve children in food preparation as much as possible, always keeping food allergies in mind.
 - Nutritious foods must be strongly encouraged and provided whenever possible.
- Celebrations held after hours should also follow these guidelines.
- Celebrations held after hours cannot be used as substitutes for classroom or home visiting time.
 - We cannot imply or request individual parents/guardians to provide gifts, money, or materials for celebrations.

If you need clarification on any point about this policy talk to your Ed. Coach, Coordinator, or PSC.

Celebration Policy Guidance

Holiday traditions are family events celebrated differently from home to home. Staff will not plan activities specifically related to religious, cultural, or commercial holidays.

When planning and setting up the environment to include items below, ensure the children and families can see themselves reflected in the materials, and that the materials are representative of the diverse world we live in. Be mindful of where the materials come from, consider things such as: authenticity, who the author or artist is, and what's their background.

This is what we CAN DO:

- have all kinds of books and read by request or choice.
- have music in a wide variety of styles and authentic instruments.
- talk about different types of homes, families, work, and foods.

- display posters and artwork, have dolls, puzzles, clothing in dramatic play, and cooking items that represent a variety of people, including differing races, ethnicities, abilities, family structure, different body types and physical traits,
- display artwork covering a variety of periods and styles.
- celebrate the seasons, using items like pumpkins, clovers, pinecones, gourds etc...
- send valentines home when brought in by a child.
- learn and share words in another language.
- set up the environment to represent diversity.
- have parents/guardians share about their culture and traditions...if they ask to
- have parents/guardians contribute to the dramatic play area by sending in empty boxes, cans, etc. from foods they eat.

Animal and Pet Policy

Policy:

Animals can provide a variety of productive learning experiences for students. Our program is committed to the health and safety of each child and family we serve. It is for this reason and to ensure compliance that this policy has been developed to define procedures for children's interactions with animals while in our care. These guidelines apply to animal and pet interactions in the classroom, on field trips, during family engagement activities, at socializations, and visiting pets.

Procedure:

Many types of animals carry salmonella, e-coli, rabies, parasites, fungi and/or a variety of other diseases that can be transferred to humans. As required or recommended by the above listed sources, the following animals are prohibited and will not be kept at or brought onto the grounds of our facility:

- | | | |
|----------------------|-------------------------------------|----------------------|
| ○ Rabbits | ○ Squirrels | ○ Turtles |
| ○ Bats | ○ Hermit Crabs | ○ Poisonous animals |
| ○ Wolf-Dog Hybrids | ○ Stray animals | ○ Chickens and ducks |
| ○ Aggressive animals | ○ Reptiles and amphibians | ○ Birds |
| ○ Ferrets | ○ Animals less than one year of age | ○ Animals in estrus |

- The Parent/Guardian Release form must be signed prior to the child's interaction with any animals at school or on field trips. The Parent/Guardian Release form states: I give permission to have my child participate in activities that involve having/bringing animals into the classroom (other than those animals on the prohibited list). Consult parents about possible pet allergies making sure that proper allergy paperwork is completed and there is no contact with that animal.
- Any pet or animal present at the facility, indoors or outdoors, must be in good health, free from disease, be fully immunized, and be maintained on a flea, tick, and worm control program. A current (time-specified) certificate from a veterinarian shall be on file in the facility, stating that the specific pet is up to date with their immunizations and free from conditions that may pose a threat to children's health.

- All contact between animals and children will be supervised by a staff person who is close enough to remove the child immediately if the animal shows signs of distress or the child shows signs of treating the animal inappropriately. The staff person will instruct children on safe procedures to follow when in close proximity to these animals (for example, not to provoke or startle animals or touch them when they are near their food).
- When animals are kept in the childcare facility, the following conditions shall be met:
 - The living quarters of animals shall be enclosed and kept clean of waste to reduce the risk of human contact with this waste.
 - Animal litter boxes will not be in areas accessible to children.
 - All animal litter will be removed immediately from children's areas and discarded as required by local health authorities.
 - Animal food supplies will be kept out of reach of children.
 - Live animals and fowl will be prohibited from food preparation, food storage, and eating areas.
 - Caregivers and children will wash their hands after handling animals, animal food or animal wastes. Follow the Handwashing guidelines posted in the classroom.

NMCAA Early Childhood Nutrition Plan

The purpose of our nutrition plan 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, which is so important in supporting the family-to-school connection.

The tools and resources we use in our program include the following: We currently participate with the Child and Adult Care Food Program and are in good standing. We follow CACFP guidelines, Head Start Program Performance Standards, Licensing and GSRP regulations, and use a nutrition analyst. We take advantage of grants and programs such as MSU Extension. We collect and evaluate planned monthly menus and served monthly menus using our nutrition analyst. We provide feedback to classrooms and vendors based on the nutrition analyst's findings, as necessary.

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, adding a meat/meat alternate to breakfast, teaching servings 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 food substitutions when needed. We also hold family engagement activities that include meals and/or snacks that follow our nutritional requirements.

We share our nutrition information with children, families, and staff through our parent handbook, new child cover letter, new staff orientations, activities in the classroom, and yearly staff nutrition trainings. Additionally, all our planned, CACFP-approved menus are posted and accessible to families and staff.

Program Growth Assessment

As a part of the program's health requirements, height and weight measurements are completed on all enrolled children or collected from their physical form for children that are 2 years old and up. 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.

Michigan Department of Education Child and Adult Care Food Program

Where Healthy Eating Becomes a Habit

Program Information Sheet

This care center is a participant in the Child and Adult Care Food Program (CACFP), a United States Department of Agriculture (USDA) program. The CACFP provides cash reimbursement to child and adult day care centers for nutritious meals and helps children and adults develop and maintain healthy eating habits. The CACFP is administered by the Michigan Department of Education (MDE).

Through the Child and Adult Care Food Program you can be assured each participant is getting balanced, nutritious meals and developing/maintaining healthy lifelong eating habits. Proper nutrition throughout life ensures fewer educational and physical problems later in life.

As a participant in the CACFP, your care center receives reimbursement for serving nutritious meals and snacks. Meals and snacks must meet the USDA meal pattern requirements listed in the chart on the next page (Child Meal Pattern).*

Breakfast	Lunch and Supper	Snack (serve 2 different food items from the food components below)
Milk	Milk	Milk
Fruit, Vegetable, or a combination of both**	Meat or Meat Alternate	Meat or Meat Alternate
	Vegetable	Vegetable
Grain	Fruit or second vegetable	Fruit
Meat or Meat Alternate***	Grain	Grain

**** NMCAA requires a fruit at breakfast; vegetable is optional.**

*****NMCAA requires a protein component at breakfast.**

MDE is required to verify the enrollment, attendance and meals/snacks typically consumed by children while they are in care.

MDE staff may contact you regarding your child's participation in our day care center. If you have any questions about the Child and Adult Care Food Program, please contact:

NMCAA
3963 3 Mile Road, Traverse City, MI
49686
231-947-3780
800-632-7334
Child and Adult Care Food Program

OR

Michigan Department of
Education
P.O. Box 30008
Lansing, MI 48909
(517)-241-5353

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027)

(http://www.ascr.usda.gov/complaint_filing_cust.html) online, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form.

To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; Fax: (2) Fax:(202) 690-7442 or (3) email: program.intake@usda.gov. This institution is an equal opportunity provider.



NO SMOKING NO VAPING

The use of tobacco, nicotine, or vaping products is prohibited inside and outside of this building, including parking lots.

Thank You

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

Printed Name: 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.

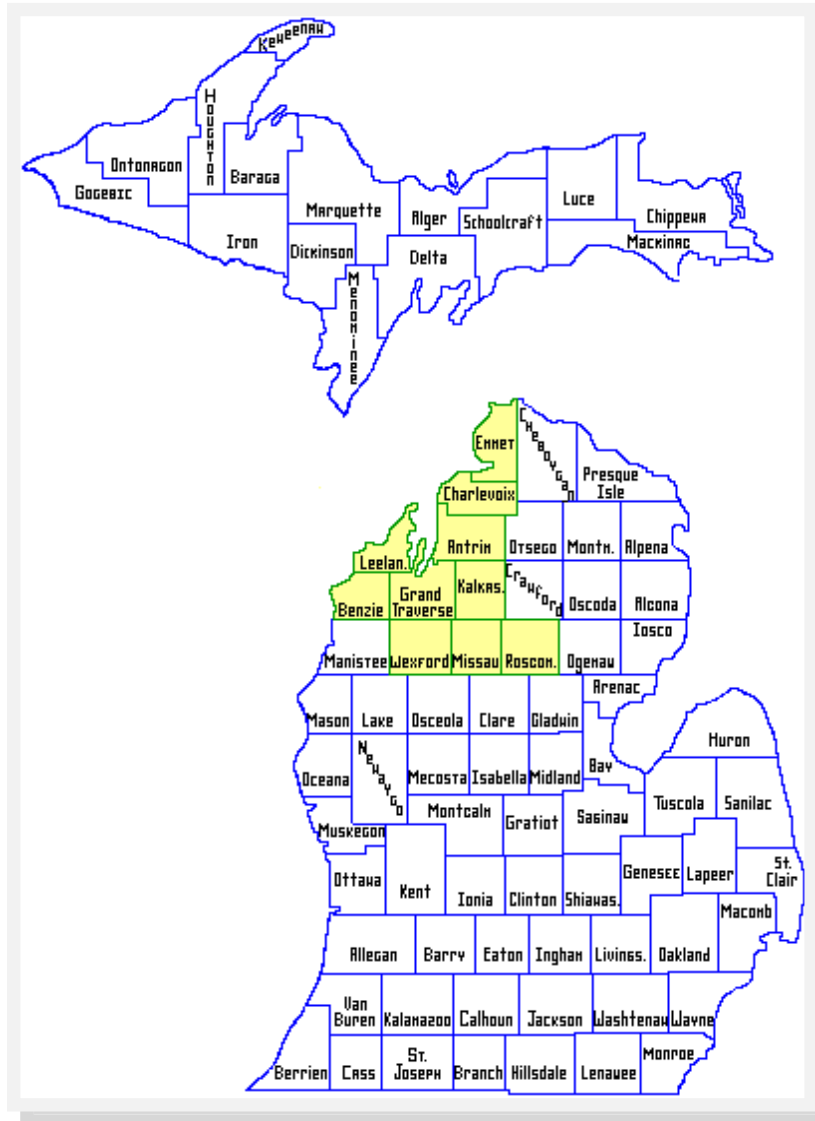
For more than 40 years case managers have connected people to services from Agency administered programs, like Early Head Start, Head Start, Veteran Supportive Service, Homeless Prevention, Meals on Wheels, and Financial Management Services (which includes budget and housing counseling services). NMCAA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

NMCAA's mission is to foster positive change by providing opportunities that promotes 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.

These materials were developed under a grant awarded by the Michigan Department of Lifelong Education, Advancement, and Potential (MiLEAP).