

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:**      **Child Health and Safety** P.S.1304.22 (a) (1)

**Subject:**      **Administering CPR**

---

**POLICY:**

When you see a motionless person, Head Start/ Early Head Start staff will administer CPR when necessary.

**PROCEDURE:**

1. Check responsiveness, if no response
2. Activate the EMS for help by asking a bystander to call 911.
3. Roll the victim onto their back.
4. Open the airway using head-tilt/chin lift method.
5. If you suspect a spine injury, do not move head or neck.
6. Check for breathing, if person is not breathing
7. Give 2 slow breaths.
8. Check for pulse
9. Continue until victim starts breathing on his own.
10. If there is no pulse, give CPR
  - a. Find hand position.
  - b. Do 5 compressions.
  - c. Give 1 slow breath.
  - d. Complete 3 more cycles of 5 compressions and 1 breath (takes about 1 minute), then check pulse. If there is a pulse give rescue breathing.
11. Continue CPR until:
  - a. Victim revives.
  - b. Trained help arrives and relieves you.
  - c. You are completely exhausted.
12. Complete accident/Incident report.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22 (a)

**Subject:**      **Administering First Aid**

---

**POLICY:**

When a minor injury occurs, Head Start/Early Head Start staff will administer first aid as indicated.

**PROCEDURE:**

1. Assess the situation, the person, and the injury.
2. Give at once necessary first aid.
3. Have the person lie or sit down.
4. Check for injuries by looking and feeling for deformity, open wounds, tenderness, and swelling (DOTS).
5. Plan what to do.
6. Carry out the indicated procedure:
  - a. Bleeding: Apply direct pressure with gloved hand.
  - b. Shallow wound: Wash with soap and water. Cover wound with band-aid or dressing.
  - c. Remove small objects (thorns, debris, etc.) with the use of tweezers.
  - d. Closed wounds: Apply ice pack for no more than twenty (20) minutes every 2 or 3 hours as needed.
  - e. Bone, joint, and muscle injuries: Rest the injured part, apply ice pack for twenty (20) minutes at a time every 2 to 3 hours as needed, compress the area by applying a bandage to prevent swelling, elevate the injured part above the heart (RICE).
7. Contact the parent or legal guardian of the child.
8. Complete accident/incident report.
9. Have accident/incident report signed completely day of injury.
10. File in file correctly.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22(a)

**Subject:**      **Administration of Medication**

---

**POLICY:**

To safely receive, handle and administer prescribed medication.

**PROCEDURE:**

1. An official Department of Children and Families medication form must be completed by the parent/guardian.
2. The form must be completed with clearly written directions. No Oral instructions will be accepted. The time and amount of medication to be administered must be indicated on the Medication Authorization Form. Directions given must be the same as the directions on the Medication label or the pharmacy label.
3. Medication must be in the original bottle from a pharmacy with the prescription name, number, date, doctor's name, and child's name and dosage to be given.
4. The medication will be left at the center it must be in divided doses from the pharmacy with the original label on the container.
5. No over the counter medication will be given without an official doctor's note.
6. Medication will be administered by a staff member that has completed the medication administration training. That person will be responsible for documenting the amount, date, time that the medication was given as well as initialing the form when the appropriate information is recorded.
7. All medication must be counted or amount noted on the medication receipt form. The form must be signed by the parent/guardian, staff member receiving medication and witnessed by a third party.
8. The Health Services Coordinator and the Center Coordinator have the right to question and investigate the use of medication in the centers.
9. The parent/guardian is responsible for the cost of all medication. Head Start/ Early Head Start does not buy medication.
10. All medications are locked in either refrigerated lockbox or locked box for medication stored out of sight and reach of children.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety P.S. 1304.22**

**Subject:**      **Animals on Site**

---

**POLICY:**

Animals will not be permissible at any Head Start/Early Head Start center unless properly immunized.

(Fish will be permitted)

**PROCEDURE:**

1. Animals must be properly immunized, free from disease, and clean.
2. Parents must be informed in writing of all animals on the premises. Such information may be provided by way of a conspicuously posted notice or bulletin, policy handbook, parent flier, or a statement included on the enrollment form.
3. Documentation of current immunizations must be available for review upon request by the licensing authority.
4. Children must wash their hands after feeding fish.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22

**Subject:**      **Bus Disinfection**

---

**POLICY:**

It is the policy of Tri-County Community Council, Inc. Head Start/Early Head Start to ensure that the buses used to transport Head Start/Early Head Start children are disinfected following accidents by the children.

**PROCEDURE:**

1. Bus monitors will be responsible for cleaning any spills of body fluids by Head Start/Early Head Start children while riding the bus.
2. Bus monitors will carry a bag containing the following items to help with cleaning spills:  
“Vomit Control” absorbent material  
Disinfectant wipes  
Baby wipes  
Gloves  
Hand sanitizing solution  
Plastic bags  
Roll paper towels  
Change of clothes for a boy and a girl  
Emergency contact numbers
3. Using universal precautions, the bus monitor will clean spills on children as soon after the spill as possible. If necessary, the child's clothes will be changed and the soiled ones sent home with the child.
4. The seat and floor will be cleaned by applying absorbent material to the spill as soon as possible.
5. Upon arrival at the destination, the bus monitor will sweep up the absorbent material and wipe all affected areas with disinfectant wipes.
6. All waste material will be double bagged using the bags provided and discarded in the nearest trash receptacle.
7. Using the bus incident form, the bus monitor will notify the Center Coordinator of the spill as soon as possible.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section: Family Partnerships P.S. 1304.22 (i)**

**Subject: Caseload, Family Support, Parent Contacts and Home Visits**

---

**Policy:**

Center/Program Family Service staff will be assigned cases of children within centers/programs. Staff will continue with the cases throughout the enrollment of the children in a center/program. When children are transferred from one center/program to another, the children will be assigned as cases to a Family Service Worker within the new center/program.

**Procedure:**

**Parent Contacts**

Family Service Workers must have five (5) scheduled parent contacts per week. These contacts include meeting with parents in their own homes or in the centers. These are goal directed contacts with parents, and staff must document these contacts on a Family Service Contact Form and placed in the child's file with the Family Partnership.

**DEFINITIONS**

***Home visits*** are defined as any face to face contact with parents/families **in their own homes, in Head Start Centers or in a designated safe location lasting thirty (30) minutes or longer. Visits within the parent's home are the preferred home visits.**

**ADVANTAGES OF HOME VISITS IN THE PARENT'S HOME**

Home visits provide opportunities for the Family Service Worker and Home Visitors to:

- (1) Observe parent/child interactions;
- (2) Observe child's interactions with siblings or other children in the home
- (3) Observe the family's living situation such as housing, and neighborhood.
- (4) Develop positive relationships with parents/families.
- (5) Teach parents to identify learning opportunities in their own home.

**PURPOSE OF THE HOME VISIT**

The focus is on positive interactions between staff members and families. Staff members and parents/families participate in the home visit. The partnership between staff members and parents/families develops and grows during the visits. Each home visit has a purpose. At the beginning of the home visit, staff states the purpose of the visit. If it is the first time the staff person meets the parent/family, the staff person introduces herself giving the Program's name and the reason for the contact. Use Tri-County Early Head Start/Head Start badges and business cards to facilitate staff identification. In subsequent home visits, staff needs to communicate at the beginning of the visit what will happen during the visit and remind the parent about what was agreed to prior to the visit. Listen and observe to see if it is possible to proceed with the agenda, or make changes as necessary. For example, a parent verbalizing that she does not have milk for Her baby requires that the staff person address the parent's needs not continue with the planned purpose saying, "I'm here to do family partnership". Meeting the parent where she is at the moment allows the staff person to gather information about needs, the mother's functioning level, and her problem solving skills. Staff can implement the profile process and meet the parent where she is at the same time. The staff person's ability to change her focus communicates warmth and genuine concern for the family as well as facilitates relationship building.

**BRINGING THE HOME VISIT TO CLOSURE**

At the end of the visit the staff person summarizes what happened during the visit including agreements of what staff and parent will do prior to the next visit. The date, time, and place for the next contact/visit is established with the parent/family as well as the purpose.

01/11bl

## **SCHEDULING VISITS**

**Family Service staff and Home Visitors are to establish regular scheduled appointments with parents/families.**

### ***Scheduled Home Visits***

Home visits are to be scheduled with parent/families in advance either by telephone or letter. Staff will call the parent the day prior to the appointment to confirm that the parent will keep the appointment. Also, appointment letters must communicate to parents that they can change appointment times; and staff will provide the parent with telephone numbers to reach you in case the parent needs to change the appointment. The scheduling process includes the purpose of the home visit, when it is to occur, and where it will occur. If the parent needs to bring something to the home visit or have done something prior to the home visit, staff needs to communicate this to the parent/family at the time of scheduling the appointment. Likewise, staff members need to communicate if she will bring something to the visit or do something prior to the appointment and follow through on that commitment.

***Unscheduled Home Visits*** will occur only when there is:

- (1) An emergency/crisis situation or
- (2) The family has no telephone and attempts to contact by mail are unsuccessful.

## **TIME LIMITS**

The maximum time limit for home visits is ninety (90) minutes, unless there is a sibling, an emergency, or some specific situation requiring more time. For example, a parent is upset about her child's pending surgery and the staff person's supportive help is required longer than 90 minutes. Home visits are a minimum of thirty (30) minutes.

## **SAFETY**

Staff members have the option of making home visits in pairs whenever one staff person has health and safety concerns about the area and situation.

## **RECORDING**

Home visits are to be recorded on the Family Services Contact Form, Home Visitor Form, giving as much detail as is necessary to include what happened during the visit. Notes are not to be taken during the visit except for specific information such as birthdates, clothing sizes, etc., which may be hard to remember accurately. Staff members will make notes immediately after visits to assist them to complete case notes during later recording time.

Family Service Workers and Home Visitors will establish regular weekly recording times-i.e. case notes, Child Plus entries. Given family support work requirements, it may not be possible to record immediately following a visit, so staff members need to establish the best method for meeting recording requirements. If staff members cannot remember what happened during a visit and notes do not help, the staff member needs to make more detailed notes or schedule recording time after each home visit.

Recording tells a story-what, when, where and how. When deciding what to record, staff members need to ask themselves, "Will a new staff person reading my recording know what has happened in the case and be able to continue easily with the family?" If the answer is "No", the staff member needs to provide more information in the record. Recording provides the documentation of what has been done, what is being done, and what is planned for tomorrow. Regularly scheduled weekly recording times will help staff members to keep records current and facilitate case planning and evaluation of case movement.

## **CHILDPLUS**

Family Service workers and Home Visitors will use the Child Plus system weekly to record case notes, referrals, home visits, and other contacts, identified needs, family partnership agreements, etc. Data that is not input into the Child Plus System will be considered non-existent.

The Child Plus system will be utilized to analyze data, compile monthly reports, and monitor service delivery and goal achievement-i.e. enrollment, identified needs, attendance, services received to meet family needs, etc.



**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section: Child Health& Safety**

**Subject: Child Abuse /Neglect 1304.22 (a) (5)**

---

**Policy:**

Child Abuse/Neglect

**Procedure:**

Tri-County Head Start/Early Head Start will follow the Florida Child Abuse/Neglect laws (Florida Statutes 39.201). All Head Start/Early Head Start employees are mandated Child Abuse/Neglect reporters.

In accordance with **Florida Administrative Code Chapter 65C-22(4)**, all staff will receive training on Child Abuse Laws, the identification of Child Abuse and Neglect, and the reporting procedure.

- The Family Service Coordinator will contact the Department of Children & Families in order to assure that the following CA/N training takes place, at program start-up, for all staff.
  - All new staff will receive training within their first week at the center in all of the following:
    1. Child Abuse and Neglect Laws
    2. How to identify children who have been abused or neglected.
    3. The procedure for ensuring that known or suspected cases of child abuse or neglect are immediately reported to the proper authorities.
    4. The Family Service Coordinator can provide refresher CA/N training at the beginning of the year as needed.
    5. The Center Coordinator is responsible for monitoring when staff needs refresher training during the year and assures that staff receives it when needed.
1. All Head Start/Early Head Start employees are identified as mandated reporters of Child Abuse or Neglect. **Any staff** who, in the course of performing his or her duties as a HS/EHS employee, knows, or has reasonable cause to suspect that a child has been abused or neglected shall:
    - a. Immediately contact the Department of Children and Families through the Hotline (1-800-96-ABUSE) or local Law Enforcement. Report exactly what you saw that made you suspect Child Abuse or Neglect.
    - b. Complete the Child Abuse and Neglect reporting form (**see attachment**). Send the Report to the Family Services Coordinator in an envelope marked **CONFIDENTIAL**.
    - c. Place a copy of the Child Abuse/Neglect reporting form in a confidential file (in a locked file cabinet) marked exclusively for Child Abuse and Neglect reports.
    - d. At the end of the child's Head Start career, place any Child Abuse and Neglect reporting forms in the child's family folder.
  2. Tri-County Head Start will follow the Department of Children and Families, Florida Administrative Code. Accordingly, Tri-County Head Start/Early Head Start will not employ anyone who is the subject of a pending criminal charge, or has been convicted of an action that substantially relates to the care of children or activities of the center.
  3. It is the policy of Tri-County Head Start **not** to take pictures or in any other way attempt to "investigate" suspected Abuse or Neglect of a child. Staff must report "suspected" abuse or neglect, according to **FS 39.201**. We are not "investigators". This is the Florida Department of Children & Families, or Law Enforcement's role.
  4. No person making a report under the mandated reporter section of the Florida Statues may be discharged from employment for doing so. Whoever intentionally violates this section by failure to report as required may be fined or imprisoned by the State of Florida. Employees may also be disciplined or discharged for failure to comply with the law.

5. Employees are also responsible for informing all volunteers that have contact with children what appropriate practices are when dealing with children. Suspected instances of abuse or neglect will be reported immediately to the appropriate supervisor.
6. Parents of children enrolled in the Head Start/Early Head Start program will be informed of the programs legal responsibilities and procedures to be followed when abuse or neglect is suspected.
7. Personnel are required by law to allow child protective workers or police officers to conduct an official investigation at any location without permission from the child's parent, guardian, legal custodian if necessary to determine if the child is in need of protection or services. All employees will fully cooperate with law enforcement, social workers, and/or court appointed Guardian Ad Litem or attorneys who are conducting the investigation.
8. Staff will provide support/guidance for other staff members making first-person reports: i.e. The Family Service Worker is the one making the report, the Center Coordinator will provide support. If possible another staff person should be present when one staff person is making the report as support and to prevent misinformation.
9. If the employees at the site have any concerns for the safety of themselves or children, they shall notify Law Enforcement immediately and request protection. They should also notify the Head Start Director of their concern.
10. Whenever a case of Child Abuse/Neglect comes to the attention of staff, management will provide them with the support they feel is necessary to help them comply with the law and agency policy.
11. If employees have questions about a specific incidence of suspected abuse or neglect, it is suggested that the County Protective Service Workers be contacted by phone. The County's Child Protection Worker is usually willing to discuss issues when there is doubt regarding reporting.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:** Child Health and Safety P.S. 1304.22

**Subject:** Child Safety

---

**POLICY:**

Head Start/Early Head Start staff will maintain a safe environment for children.

**PROCEDURE:**

1. The Health Services Coordinator, in cooperation with each Center Coordinator, will insure that medical and dental emergency policies and procedures are in place.
2. A minimum of two staff members per center will be trained in CPR and First Aid and proper emergency procedures to allow them to act quickly and calmly in emergency situations.
3. Written emergency first aid plans will be posted at all Head Start sites and updated annually as needed.
4. An up to date emergency contact form will be easily accessible for each child. Emergency telephone numbers for each center will be posted throughout each center.
5. Center specific evacuation routes and other safety procedures will be posted in the classroom. Home visitors will assist families in developing their own plan for their home.
6. In the event of an emergency, designated staff will notify each child's parent, legal guardian, or an emergency contact person. Consent for Emergency Treatment forms will be signed by the parent or guardian of each child enrolled and kept on file in case the parent or guardian cannot be reached.
7. All electric skillets, toaster ovens, and popcorn poppers will be kept out of reach of the children.
8. No glue guns will be used in the classroom while children are present.
9. All medications will be locked up and out of reach of the children.
10. All cleaning supplies will be locked up and stored out of reach of the children.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:** Child Health and Safety P.S. 1304.22

**Subject:** Dental and Health Follow-ups

---

**POLICY:**

Head Start/Early Head Start will assist each family enrolled in Head Start/Early Head Start to continue to follow the recommended schedule of well child physical follow the EPSDT guidelines.

**PROCEDURE:**

1. The Center Coordinator, Family Service Worker, Home visitor or the Health Services Coordinator will send a letter to parents/guardian informing them of the need to make necessary appointments.
2. The Center Coordinator, Family Service Worker, or Home visitor will communicate with parent/guardian by telephone or letter to verify that appointment was made and assist them if help is needed in making the appointment or arranging transportation.
3. The Center Coordinator, Family Service Worker, Home visitor and Health Services Coordinator will work together to empower parents to seek out and obtain services that are needed.
4. The Center Coordinator, Family Service Worker, Home visitor and Health Services Coordinator will send a request for information along with dental release and medical release forms to the appropriate dentists and physicians to obtain a record of treatment to be filed in the family file.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section: Child Health and Safety P.S. 1304.22 (e) (5)**

**Subject: Diapering and Toileting**

---

**POLICY:**

It is the policy of Tri-County Community Council Head Start/Early Head Start to only allow diapering and toileting in a sanitary area that adequately protects the health and safety of the child. Diapering procedures will take place in a designated area and will occur in a safe, sanitary, and respectful manner. Diapering will occur on an elevated, non-porous surface used only for that purpose. Children will be introduced to toileting as it is developmentally appropriate. Toileting will be conducted in a safe, sanitary, and respectful manner.

Tri-County Community Council Head Start/Early Head Start will provide diapers to enrolled Early Head Start children at no fee to the parent. Accommodations will be made on a case basis according to the documentation from a health care professional that requires the use or avoidance of a specific brand or type.

**PROCEDURE:**

Children's diapering and toileting needs will be responded to immediately. Tri-County Community Council Head Start Staff /Early Head Start Caregivers will talk to the child during the diapering and toileting process. Anything unusual observed in the diapering or toileting process will be documented and communicated to the parents. Toileting accidents in the training process will be treated with respect and as a part of the learning process.

Caregivers will follow these procedures when diapering a child:

1. Assemble all needed supplies within reach for diapering and out of reach of the child.
2. Wash hands with soap and water.
3. Put on disposable gloves for every diaper change.
4. Approach the child from the front and inform him/her that it is time to have his/her diaper changed.
5. Lay the child on the diapering surface and **keep one hand on the child the entire time the child is on the changing table.**
6. Remove soiled diaper and clothes. Put disposable diapers in a plastic bag with a tie and placed in a covered plastic lined receptacle by using the foot pedal to open. Put soiled clothing in a plastic bag to be taken home.
7. Clean the child's bottom with a pre-moistened disposable wet wipe or paper towel. Female children should be wiped front to back to prevent infection. Then dispose of the disposable wet wipe or paper towel in a plastic bag or covered plastic lined receptacle.
8. Apply diaper ointment (**only with physician and parent written permission**).
9. Wipe your hands with a disposable wet wipe or paper towel and dispose of in a covered plastic lined receptacle.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

10. Diaper and redress the child.
11. Wash the child's hands and return to individual or group activity.
12. Clean and disinfect the diapering area and any equipment/supplies that were touched.
13. Cover the surface with a non-absorbent paper liner that is disposed of between each diaper change.
14. Wash hands according to the hand washing policy.

Caregivers will follow these procedures when toilet training a child:

1. Caregivers must provide opportunities for children to learn self-control, autonomy, and responsibility through their toilet training.
2. Caregivers will work with parents and/or primary caregivers to help them understand the biological, physical, and emotional stages of toileting.
3. Caregivers will encourage parents to share information about the child's experiences at home.
4. Caregivers will encourage parents to share their preferences and concerns in order to better plan the approach to and the timing of toilet training.
5. Caregivers will assist children to use a child size toilet or a toilet that is made to accommodate the child.
6. Caregivers will invite children to use the toilet and help them when needed.
7. All Caregivers will positively reinforce each child's effort in toileting regardless of the outcome.
8. Caregivers will ensure that all necessary supplies are available when assisting a child with toileting.
9. Caregivers will wash hands with soap and water prior to the toileting process and will wear latex gloves throughout the process.
10. Caregivers will ensure that the toileting area is clean and sanitized before and after assisting a child with toileting.
11. If a child's clothing becomes soiled, clothes will be changed and soiled clothes will be placed in a closed bag to send home.
12. At the end of the toileting process, the Caregiver will dispose of gloves and wash hands according to the hand washing policy.
13. The Caregiver will assist the child to wash his/her hands.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section: Child Health and Safety** P.S. 1304.22 (a)(2)

**Subject: Emergency Contacts**

---

**Policy:**

Current (up-to-date) family and emergency contact information and authorization for emergency care for each child must be readily available.

**Procedure:**

1. Emergency contact information for each child is found on the Department of Children and Families Child Care Application For Enrollment form and includes:
  - Names & phone numbers of parent(s) at home and work.
  - Names & phone numbers of contacts to whom the child can be released
  - Name of child's medical and dental homes
  - Allergies
  - Custodial parent
  - Permission for medical treatment at named providers
2. This form is completed by the parent and reviewed by staff once the child is accepted for enrollment.
3. The *Emergency Contact* form is updated *as often* as needed. Parents are informed that numbers must be kept updated during enrollment, and at least every 3 months by classroom staff, Family Service Worker, and Home Visitor.
4. The Family Service Worker or Center Coordinator will check the Sign In/Out Sheet against the Emergency Contact form at least once a month to make sure both forms list the same information/signatures.
5. Any changes made by the family and communicated to classroom/home visitor staff will immediately be shared with the Family Service Worker. If the Family Service Worker is informed that changes are made by the family, this information must immediately be shared with classroom/home visitor staff and bus monitors (if monitors on site).
6. *Communication between the classroom staff and the Family Service Worker MUST occur regularly.*

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section: Child Health and Safety P.S. 1304.22 (a) (1)**

**Subject: Emergency Plan**

---

**POLICY:**

Head Start/ Early Head Start will assume responsibility for the initiation of emergency and first aid measures should the need arise.

**PROCEDURE:**

1. The emergency telephone numbers of the local hospital, fire department, sheriff and police departments and the Head Start Administration office will be posted.
2. The emergency numbers for medical emergencies for each county will be posted.
3. A file will be kept with the parent/guardian information for :
  - a. Person to contact in case of an emergency.
  - b. Person to contact in the absence of the parent/guardian.
  - c. Written permission to give emergency treatment.
4. Head Start/ Early Head Start staff will make a decision as to the seriousness of the child's condition. If in doubt, consider it serious.
5. The Center Coordinator or designee will initiate emergency care.
6. A Certified staff member will begin CPR if necessary.
7. The Center Coordinator or designee will contact the parents/guardian and the Head Start/ Early Head Start Director.
8. The Center Coordinator or designee will call 911.
9. The Center Coordinator will assign someone to ride with the child to the hospital
10. EMS will transport the child to the emergency room.
11. The assigned staff member will wait with the child until the parent/guardian arrives to take charge of the child.
12. Accident/Incident form will be completed and filed in the child's folder.
13. If an accident/incident happens while at a home based families home visit, an accident/incident report will be completed by the home visitor and signed by parent/guardian and filed appropriately in the file.
14. If an accident/incident happens while at a socialization, the staff members witnessing the accident/incident will complete form, gather signatures, and file appropriately in the file.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:** Child Health and Safety P.S. 1304.22 (a) (1)

**Subject:** Emergency Preparedness Drill

---

**POLICY:**

It is the policy of Tri-County Community Council, Inc. Head Start/ Early Head Start that organized Emergency Preparedness drills will be conducted yearly by all Head Start/Early Head Start Centers. The drill will be conducted in January and monitored in February by the Health Services Coordinator. For the Early Head Start home based program the Home visitor will complete a Home based Disaster Form with each family within 30 calendar days of entry into the program, during the month of January, and if the family relocates.

**PROCEDURE:**

- 1) Emergency Preparedness drills will be performed a minimum of one time during the program year to ensure staff and children know what to do in an emergency situation. The Health Services Coordinator will schedule drill and will inform the Center Coordinator of time and date.
- 2) All staff and children present at the time of the Emergency Preparedness drill will participate.
- 3) Teaching staff will ensure that all children are accounted for by performing a head count prior to leaving the room and upon arriving at the designated meeting site. Teachers will take their roll book (form) with them when they leave the room. Teaching staff will call roll for their classroom at the designated meeting place.
- 4) The family service worker or the designated staff member will take the file box (or book) containing emergency contact information, the first aid kit, and the center cell phone with him or her when he or she leaves the office. He or She will report to the designated meeting place to assist with the children as needed.
- 5) The cook will ensure that everything in the kitchen is turned off and that there are no children present in the kitchen or dining room prior to leaving the kitchen. The dining room door and the kitchen door will be closed and the cook will then go to the designated meeting place to assist with children as needed.
- 6) The center coordinator or the designated staff member will check all bathrooms and classrooms to make sure all children are out.
- 7) The center coordinator or designated person will observe the Emergency Preparedness drill and record it on the Emergency Preparedness drill record. The record of the Emergency Preparedness drill will be kept in the center coordinator's office or designated visible place. The written record of the Emergency Preparedness drill will include:
  - a. Date of the drill
  - b. Time the drill was conducted
  - c. Number of adults who participated
  - d. Number of children who participated
  - e. Length of time it took to clear all buildings
  - f. Any comments pertinent to the drills
  - g. Initials of the recorder.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

- 8) Any additional staff or visitors at the center will report directly to the center coordinator to receive assignments.
- 9) No staff member or child will be permitted to enter the building until all clear has been issued by the center coordinator.
- 10) All records must be maintained for one year. Records must be accessible at time of DCF inspection. (Documentation produced after the inspection shall not meet the DCF licensing standard or corrective action requirements).
- 11) Home Visitors will assist families in preparing a plan for their family to follow for emergencies such as:
  - \*Fire Drills (To be conducted twice a year, once within 30 days of entry and once during the month of January).
  - \*Intruders (To be conducted once a program year)
  - \*Weather (To be conducted once a program year)
- 12) Home visitors must assist home based families in establishing a disaster plan drills using the Following steps:
  - a. Assist the family in being prepared for a disaster
  - b. Picking safe places in the home if there is a tornado
  - c. Picking safe places in the home if there is an earthquake
  - d. Out of town meeting places/phone numbers
  - e. Do the drill
  - f. Talk about the drill
  - g. Document the drill
  - h. List any comments and initial
- 13) After a fire or natural disaster, the operator must notify the licensing authority within 24 hours as to their operational status in order for the licensing authority to ensure health standards are being met for continued operation.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

1

**Section:** Child Health and Safety P.S. 1304.22 (a) (1)

**Subject:** Fire Drills/Fire Extinguishers

---

**POLICY:**

It is the policy of Tri-County Community Council, Inc. Head Start /Early Head Start that organized fire drills will be conducted monthly by all Head Start/ Early Head Start Centers. Home based families will conduct (2) fire drills in a program year, once within (30) calendar days of (enrollment) entry into the program and once in the month of January (at the end of the program year). If the family relocates during the school year, the home visitor will assist the family in developing a new plan.

**PROCEDURE:**

1. Fire drills will be performed monthly at different times during the program day to ensure staff and children know what to do in different situations. Two (2) Fire drills must be performed during the established nap/rest time and Two (2) must be performed using alternate evacuation routes. One (1) will also be in the presence and at the request of the licensing authority in coordination with the operator or designee.
2. All staff and children present at the time of the fire drill will participate.
3. Teaching staff will ensure that all children are accounted for by performing a head count prior to leaving the room and upon arriving at the designated meeting site outside the building. Teachers will take their roll book (form) with them when they leave the room. Teaching staff will call roll for their classroom at the designated meeting place.
4. If staff and children are in another section of the center and are unable to reach designated place, staff will lead children to an alternate designated place. Once all children are accounted for staff will make contact with the center coordinator and confirm all children and staff is accounted for.
5. The family service worker or the designated staff member will take the file box (or book) containing emergency contact information, the first aid kit, and the center cell phone with her when he or she leaves the office. He or She will report to the designated meeting place to assist with the children as needed.
6. The cook will ensure that everything in the kitchen is turned off and that there are no children present in the kitchen or dining room prior to leaving the kitchen. The dining room door and the kitchen door will be closed and the cook will then go to the designated meeting place to assist with children as needed.
7. The center coordinator or the designated staff member will check all bathrooms and classrooms to make sure all children are out. The center assistant/family service worker will investigate the fire to determine if the fire department will need to be notified, and then proceed directly to the designated meeting place.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

2

8. The center coordinator or designated person will observe the fire drill and record it on the fire drill record. The record of each fire drill will be kept in the center coordinator's office or designated visible place. The written record of the fire drill will include:
  - a. Date of the drill
  - b. Time the drill was conducted
  - c. Number of adults who participated
  - d. Number of children who participated
  - e. Length of time it took to clear all buildings
  - f. Any comments pertinent to the drills
  - g. Initials of the recorder.
  - h. Evacuation route used
  
9. Any additional staff or visitors at the center will report directly to the center coordinator to receive assignments.
  
10. No staff member or child will be permitted to enter the building until all clear has been issued by the center coordinator.
  
11. An evacuation crib must be positioned near the exit for all non-walking infant/toddlers and must be solely for evacuation purposes.
  
12. The Head Start/ Early Head Start facility must properly maintain fire extinguishers at all times.
  
13. Home visitors must assist home based families in establishing a plan for fire drills using the following steps:
  - a. Assist the family in developing a home fire escape plan
  - b. Test smoke alarms
  - c. Assist the family in clearing a path of exit
  - d. Walk through the plan with family members
  - e. Do the drill
  - f. Talk about the drill
  - g. Document the drill
  - h. List any comments and initial

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22(a)

**Subject:**      **First Aid-CPR Training**

---

**POLICY:**

First Aid/CPR training is required for all Head Start/Early Head Start staff.

**PROCEDURE:**

1. All staff will attend First Aid/CPR training. The cost of the classes will be paid by Head Start/Early Head Start.
2. The First Aid/CPR class will be arranged by the Family Services Coordinator or Trainer.
3. First Aid will be renewed every three years.
4. CPR will be renewed every two years.
5. If an employee misses a First Aid/CPR training, he or she is required to arrange for the training themselves and may be required to pay for the training.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22

**Subject:**      **First Aid Kits**

---

**POLICY:**

It is the policy of Tri-County Community Council, Inc. Head Start/Early Head Start to have first aid kits readily available for staff to use in case of an emergencies. These kits will be stocked with all required items per state licensing laws.

**PROCEDURE:**

1. At least one first aid kit containing items will be maintained in each Head Start/Early Head Start classroom. Each kit will be in a closed container and labeled clearly "First Aid Kit".  
Kits will be stored out of the reach of children. A fully stocked first aid kit will be taken on all field trips.
2. Kits will be taken outside.
3. The following items will be in each kit. Other items will be added to kits after approval by the Health Services Coordinator, the Health Advisory Committee, the Head Start Director and the Policy Council:
  1. Liquid soap
  2. Instant hand sanitizer
  3. Band Aids
  4. Disposable latex gloves
  5. Cotton balls
  6. Cotton tipped applicators
  7. Sterile gauze pads
  8. Sterile gauze rolls
  9. Adhesive Bandages
  10. Adhesive tape
  11. Digital Thermometer
  12. Pre-moistened wipes
  13. Scissors
  14. A current CPR and First Aid Resource Guide
4. The designated staff member will inventory and restock each kit at the beginning of each school year. Each center will have one designated staff member to monitor the kits monthly and restock them as needed. As kits get low of supplies a need list will be sent to the Health Services Coordinator.
5. A monthly monitoring report will be completed by the designated staff member and filed in the monitor book kept on site at the center in the center coordinator's office.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22(a) (1) & (2)

**Subject:**      **Hand Washing**

---

**POLICY:**

Each child, staff or volunteer will wash their hands at various times of the day. For instance: upon arrival at Head Start/Early Head Start, after bathroom use, before eating, after use of tissue, after outside play and water play.

**PROCEDURE:**

1. Wash hands with liquid soap for at least 20 seconds.
2. Wash hands thoroughly, paying close attention to germs that may be trapped under nails and in crevices.
3. Rinse well to remove all traces of soap.
4. Dry hands with paper towels.
5. Use a paper towel to turn off the faucet after washing hands.
6. Allow hands to dry thoroughly after cleansing (before making contact with anything).

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:**        **Child Health and Safety** P.S. 1304.22 (e) (3), (e) (4)

**Subject:**        **Handling Body Fluids**

---

**POLICY:**

Head Start/Early Head Start promotes safe and simple universal precautions against transmission of diseases.

**PROCEDURE:**

1. Head Start/Early Head Start considers all body fluids contaminated.
2. All Head Start/ Early Head Start staff/Home visitors or volunteers will wash their hands after coming in to contact with body fluids.
3. Head Start/Early Head Start staff/Home visitors or volunteers will wear non-sterile gloves whenever cleaning up body fluids, blood spills, vomitus, urine, feces, etc.
4. When a spill is discovered, the area will be isolated.
5. When the spill is on non-porous surfaces, the area should be sprayed with a 10% bleach solution. When the spill is on a porous surface alcohol should be used.
6. Allow the spill to sit undisturbed for at least 10 minutes.
7. Cover a vomit spill with vomit powder.
8. Place all of the contaminated materials in a disposable plastic waste bag, and then place in a heavy duty garbage bag, and place outside in the waste receptacle.
9. Dispose of your gloves in an appropriate waste receptacle and wash hands thoroughly.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety** P.S. 1304.22

**Subject:**      **Head Lice**

---

**POLICY:**

Head Start/Early Head Start has a no bug policy due to head lice being so widespread. If a child shows signs of head lice such as nits or lice, that child will be sent home. Upon returning to school the child will be checked again by a designated Head Start/Early Head Start staff, before returning to the classroom.

**PROCEDURE:**

1.      Send a note home to the parents stating that lice/nits were found in the child's hair.
2.      Send instructions on treating head lice to parents
3.      The child must be treated with a recognized lice treatment, available at most drug stores and discount stores and the health department.
4.      The parent must bring child to center and wait while the child is being checked for clearance to return to the classroom.
5.      The parent must provide proof of treatment such as a box top, bottle label or cash register receipt of the solution used to treat head lice or the parent/guardian must sign a form stating treatment was administered to child.
6.      The child is allowed only three (3) days of excused absence for head lice.
7.      Center must treat areas, equipment, toys, and furnishings that the child came into contact with.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:**      **Child Health and Safety P.S. 1304.22**

**Subject:**      **Identification of Medical, Dental, or Developmental Concerns**

---

**POLICY:**

Head Start/Early Head Start staff will identify any new or recurring medical, dental, or developmental concerns through observation.

**PROCEDURE:**

1. Head Start/Early Head Start staff will make periodic observations and record the developmental progress of each child.
2. Staff will note changes in physical appearance of the child and notify the parents of changes.
3. Staff will observe and record emotional and behavioral patterns of the child.
4. Staff will obtain input from the parents and staff through meetings for the child.
5. A referral to the appropriate provider will be made after parental/guardian permission is obtained.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:** Child Health and Safety P.S 1304.22 (e) (1) & (2)

**Subject:** Infection Control

---

**POLICY:**

Head Start/Early Head Start will maintain a safe environment for the children.

**PROCEDURE:**

1. All children, staff and, volunteers will wash their hands before eating.
2. All children, staff and volunteers will wash their hands after using the bathroom.
3. All children will wash their hands after playing in the sand and water areas.
4. Home visitors will carry anti-bacterial soap and wash their hands upon entering and leaving the home.
5. Home visitors will carry latex (sterile) gloves for diaper changes.
6. Tables and chairs will be cleaned and sanitized daily.
7. Floors will be cleaned and sanitized daily.
8. Bathrooms will be cleaned and sanitized daily.
9. Everyone working in the kitchen must wash their hands before beginning food preparation.
10. Everyone serving food will wear gloves and change their gloves after each job completed.
11. All food and beverages stored in the refrigerator will be in a covered container and labeled with the date it was placed in refrigerator.
12. The refrigerator and freezer temperatures will be checked and recorded daily to ensure food is kept at a safe temperature.

**Tri-County Community Council, Inc.**  
**Head Start/ Early Head Start**

**Section:** Child Health and Safety P.S. 1304.22 (a) (1)

**Subject:** Intruder Alerts and Drills

---

**POLICY:**

Head Start/ Early Head Start personnel will make every effort to ensure the safety of children and staff during an emergency situation that involves an intruder, irate parent/caregiver, or any unfamiliar person of questionable character.

**PROCEDURE:**

1. Staff at each center will write a safety plan for their center. A copy of this plan will be submitted to the Head Start Director for quick reference.
2. The center coordinator or a designee will announce via phone or in person that a lockdown is in effect.
3. The Family Service Worker or designee will be directed to call 911 and notify police of emergency and the need for immediate police assistance.
4. In cases of an emergency lockdown, the center coordinator or designee will make the announcement to the classes and staff will follow the following procedure when the following announcement is made:
  - Students and Staff – It is necessary at this time to begin a school lockdown.
  - All students are to remain in class.
  - Teachers will lock their classroom doors.
  - No one is to leave the classroom until an all clear announcement is made by the center coordinator or person in charge.
  - Ignore a fire alarm.
  - If evacuation from the building is needed, an announcement will be made.
5. Head Start/Early Head Start centers will follow the directives of the local school districts.

**Teaching Staff will do the following:**

1. Lock your doors.
2. Turn off the lights.
3. Get the students to go to an area of the room that is away from the door and away from the windows.
4. Have students stay there until an announcement is made. Members of a crisis team will come to your room and update you.

Security/lockdowns drills will be held and documented once (1 time) per school year.

**Tri-County Community Council, Inc.**  
**Head Start/Early Head Start**

**Section:** Child Health and Safety P.S. 1304.22

**Subject:** Involving Parents in Health Care

---

**POLICY:**

Head Start/Early Head Start will involve parents to ensure that each child is receiving appropriate health care services.

**PROCEDURE:**

1. Head Start/Early Head Start will consult with parents/guardians when a health or developmental problem is suspected or identified.
2. Head Start/Early Head Start will explain and familiarize parents with all health and developmental procedures administered through the program.
3. Head Start/Early Head Start will obtain parent/guardian consent before any diagnostic or treatment procedure is done.
4. Head Start/Early Head Start must have written documentation if a parent/guardian refuses to give authorization for health services.
5. Head Start/Early Head Start will share all the results of diagnostic and treatment with the parents/guardians.
6. Head Start/Early Head Start will encourage parents/guardians to become actively involved in the child's health care progress.