

HAWKEYE CHILD DEVELOPMENT CENTER updated 1/8/2024
TRI-COUNTY CHILD & FAMILY HEAD START

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Operational Guidelines

We appreciate your interest in Hawkeye Child Development Center and Tri-County Child and Family Head Start. The following policies and procedures govern the operation of the Hawkeye Child Development Center.

PURPOSE:

The Hawkeye Child Development Center (HCDC) is a non-profit child care center and is open to Hawkeye students, faculty, staff, and the general public to leave their children in a safe, healthy and caring environment. Children enrolled in the Center will be receiving educational development experiences and quality programming. HCDC serves as an educational laboratory for HCC students in the Early Childhood Education program.

NAEYC Accreditation (National Association for the Education of Young Children):

Hawkeye Child Development Center has achieved accreditation by the National Association for the Education of Young Children (NAEYC). NAEYC was granted on May 1, 2019.

Iowa QRS (Iowa’s Quality Rating System):

Hawkeye Child Development Center participates in Iowa Quality Rating (QRS) receiving Level 5 rating granted on July 6, 2022.

PHILOSOPHY:

HCDC staff teaches developmentally appropriate practice in the classrooms to match the way children develop and learn. HCDC staff recognizes the uniqueness of each child by providing a developmentally appropriate, child-directed learning environment in which the child can construct his/her own knowledge through teacher guided, hands-on experimentation and exploration in the areas of social, emotional, physical, and cognitive development.

Children will learn developmentally and culturally appropriate practices through daily opportunities and interactions with their environment. The Staff will provide a safe, nurturing, and supportive environment meeting the needs of the whole child and encourage children to experiment, explore and pursue their own interest. The staff will positively promote social-emotional, intellectual, cognitive and physical development. The children will experience positive interactions with children and staff through play, exploration, and learning times.

Hawkeye Child Development Center also recognizes and respects the importance of family and their involvement and encourages active participation in working together in their children’s education and development. The staff will work together as a team with each family and their child to make sure their learning and experiences are developmentally appropriate.

MISSION:

Our Mission at HCDC is to focus on the whole child and their family by providing quality education to children and families we serve, and provide a safe and nurturing environment that our children and families feel welcome and comfortable to learn and succeed.

Head Start Mission:

The Mission of Tri-County Child and Family Development Council, Inc., in partnership with the community, is to prepare children and their families for health, school, and life success.

CURRICULUM:

Hawkeye Child Development Center educational approach is **The Creative Curriculum**. Teachers are influenced by the major theories behind developmentally appropriate practice and **The Creative Curriculum**. (Abraham Maslow: Basic Needs and Learning, Erik Erikson: The Emotions and Learning, Jean Piaget: Logical Thinking and Reasoning, Lev Vygotsky: Social Interaction and Learning, Howard Gardner: Multiple Intelligences, Sara Smilansky: The Role of Children’s Play in Learning) **As stated in The Creative Curriculum -Inside the classrooms the HCDC teacher’s goals and objectives:**

- Meet the basic needs of the children (physiological, safety, belongingness, esteem)
- Create an atmosphere in which children are safe, feel emotionally secure, and have a sense of belonging
- Create an atmosphere to be modified to reflect the values, beliefs, and the experiences of families

- Create an atmosphere to be modified to reflect the languages spoken by families in the program
- Know and develop a positive relationship with each child
- Follow a consistent schedule
- Carry through on announced plans and promises
- Set up an environment where children can find and return materials on their own
- Provide appropriate play materials that support and challenge children's abilities
- Help children express their feelings in constructive ways
- Provide appropriate real-world responsibilities and jobs
- Encourage children to see tasks through to completion
- Offer children opportunities to make choices
- Provide children with ample opportunities for creative expression
- Allow children freedom to explore the environment
- Permit children to get messy during play
- Encourage children to work independently
- Value children's ideas
- Promote problem solving and appropriate risk taking
- Varying the complexity and levels of prompts, choices, comments, and questions for individual children
- Observing and documenting what children do and say
- A place where learning takes place through positive relationships between and among children and adults-a community
- Provides opportunities for every child to pursue his or her special talents and demonstrate areas of strength
- Develop the children's strength and skills necessary to deal with adversity
- Help children to control their behavior, both physically and verbally in order to conform to a set of rules and compromise
- Use real or pretend objects to play out the role
- Provide a positive respectful interactions and environment

AGES:

Children from 6 weeks to 5 years of age will be accepted.

DAYS AND HOURS:

The Center will be open Monday through Friday 7:00 a.m. to 5:00 p.m. The Center will be open on regular attendance days of the College. Normal holidays and term breaks will be observed. If the College closes or opens late due to the weather, then the Center will also close or open late. Please check the college's weather line 296-4444 for updates.

ENROLLMENT CONTRACT:

1. All clients must follow their contracted hours or be dismissed from the Center. If a child has frequent absences the Center reserves the right to discontinue services.
2. **Early Head Start and Head Start core hours are:**
HS (6.5 hours) - 9:00-3:30 or 8:30-3:00 (no later than 9:00)
EHS (6 hours) - 9:00-3:00 or 8:30-2:30 (no later than 9:00)
****These are the times your child needs to be here to meet the core hours required. If you need different times due to class schedule or work scheduled hours, please discuss with the Director.**
3. Parents who receive funding must turn in Decision of Notice and billing forms from the funded agency at orientation or by the first week of child care otherwise parents are responsible to pay weekly or be dropped from the Center.
4. Parents who are students need to turn in a printed copy of their class schedule.
5. Parents need to notify us by 9:00a.m. if your child will not be here for the day.
6. If your child is absent with no call or no show then we will stop the order for your child's lunch until we are contacted to let us know when your child will start back then lunches will be ordered effective that day.
7. **Whenever your child is going to be absent from the Center, it is required that the PARENTS PHONE the Center by 9:00 a.m. at 296-4245, their child's room phone number or Procure for communication and planning of the day.**
8. **EARLY HEAD START AND HEAD START:** It is **federally mandated that they come to school when scheduled and maintain an 85% attendance rate.** Because of the need for Head Start services, and because frequent absences interrupt the learning process, **we cannot hold a spot for a child who has frequent absences** unless there are certain emergency situations, such as illness or significant family problems.
9. **Please pick up your child promptly.** Children build trust by knowing you arrive on time. If your child is not picked up by the closing time of the Center, the staff will contact people on your child's emergency cards. **If the staff has not reached any contacts by 15 minutes after the Center closes, HCC public safety officer, the local police department and DHS will be notified.**
10. Change of Address and/or Phone Number for your child's safety, it is very important that you notify the Center immediately if your address, phone number or emergency numbers change. We must have a current number where you or the emergency contact person may be reached. Please notify the Center of any phone number or address changes.



CLASSROOM SIZE AND STAFF/CHILD RATIO:

Infant – 2’s - Staff/Child ratio 1/4 (8 children per classroom)

Preschool – Staff/Child ratio 1/8 (16 children in classroom)

Staff/Child ratio will always be maintained throughout the day during regular classroom time and during early morning/late afternoon times when transitioning children to rooms. The youngest age in the classroom will determine staff/child ratio.

The Center follows the school age state law when deciding children entering preschool room. The child has to be 3 by September 15th to be able to attend in the preschool room. Depending on the child’s interest and developmental needs depends on what type of transitioning the staff will implement a plan for a smooth transition moving to another classroom.

The Center acknowledges best practice and will take in all consideration to keep infants, toddlers and twos together with the same teaching staff for the entire academic year. Our goal is to keep continuity care for the children along with keeping friendships together and transitions together along with considering each child’s individual abilities and needs, and his or her cultural background.

Transition Services:

We want to have a smooth transition for the family and child when the child begins in another classroom. Transition is the process of moving from one place to another. Teachers and Family Workers will be working with your family to help you and your child plan for program changes. We will put a transition plan in place for your child when your child is age and/or developmentally ready to be transition to the next classroom. We will make sure you we have your agreement and are very aware and involved with the transition.

GENERAL POLICIES: (Families will have an orientation to the Center before enrolling their child/ren to the Center to go over policies/enrollment forms and schedules/activities. Families will be given a tour of the Center and will be introduced to their child’s Lead Teacher)

**If parents need assistance in language, reading, translation, the parents need to inform the Director/Lead Staff to ensure they have full access to information and clearly understand.

The following policies and procedures have been established for the well-being of your child and to comply with state standards for Child Care.

1. Each child must have a medical exam preceding attendance at child care and must provide the Center with a report of this examination. The child must have required immunizations documented by a doctor on the State Immunization Form before they may use the Center. If the child does not have all required immunizations then they need to receive all required immunizations before they use the Center and if they do not receive certain immunizations then they will need to have proof of Certificate of Immunization Exemption to put with immunization record. If your child is under-immunized (has not received the recommended

number of types of vaccines for his or her age according to state immunization regulations) then your child will be promptly be excluded if he/she is under-immunized of the current vaccine-preventable contagious disease to which he/she are susceptible occurs in the program.

2. Parents need to sign Consent for Emergency Medical Care and a Consent and Release Statement for accident liability. In case of an accident, parents of the child will be contacted immediately. Staff will administer first aid such as cleansing and bandages. Accidents will be documented on Accident Reports. In more serious cases, a child may be taken to a local hospital or dentist for treatment and the parents will be notified as soon as possible. During emergencies, if a parent cannot be reached, the child's emergency contacts will be notified. Please keep the center up to date with all the phone numbers and the emergency contacts.
3. Permission forms signed by the parents authorize the staff to transport and take their child on field trips/out of Center activities and to take pictures of their child at the center and during special events such as field trips/special activities.
4. If your child requires medications, they can be administered at the Center. Only lead staff who has been trained will administer medications. All medicine must be in the original container. If it is a prescription, it must have the pharmacy label on it. Please ask the teacher for the form necessary for authorization when you bring the medicine. ONLY MEDICATION AUTHORIZED IN WRITING MAY BE GIVEN. This includes sunscreen. If your child has a special medical management procedure specified by a physician then an adult/staff trained in the procedure must be on-site whenever the child is present. If specialized training is an option for the director/lead staff/family support worker since there is no nurse on-site, then who are trained, at least on of the trained staff will be made sure to be on-site whenever the child is present.
5. Hawkeye Child Development Center participates in the USDA Child and Adult Care Food Program. Under the Program all meals and snacks served must meet USDA nutritional guidelines-please refer to handout - Food Brought from Home policy when bringing in treats for holidays or birthdays. An application for Free and Reduced-Price day care meals form and the Food Program Enrollment form must be filled out during orientation.
6. Parents are asked to provide a complete, labeled, change of clothing in case of accidents. Nap time toys and security blankets may be brought. Parents are responsible for laundering these weekly. All belongings must be marked to prevent loss.
7. The Child Development Center will be adequately equipped with materials and toys. Please refrain from bringing these from home. However, we do encourage children to bring nature hunt or other items relating to topics discussed according to Center's themes, which can be shared with the whole group. The Center cannot assume responsibility for items brought from home.

Please refrain from bringing aggressive toys that promote aggressive behavior and pose risks to children and adults. All staff members will not allow any aggressive/harmful behavior in the Center or aggressive/harmful toys to be brought in to the Center.

8. Children are to be brought to the classroom and the staff on duty is to be informed of their arrival and a staff will greet you to ensure the safety of your child's arrival in the room along with addressing specific procedures and communications need to be taken for the day, and inform staff who will be picking up at the end of the day. The staff on duty is to be informed before any child leaves to ensure the safety of your child and this gives the staff the opportunity to communicate with you and talk about your child's day.

Each child needs to be signed in and out (by the parent/legal guardian) daily by the adult which is located outside of each child's classroom by the door.

*No child will be allowed to leave the center with an undesignated person who is not on the pick-up permission form. Picture identification will be required from any person picking up a child or the child will NOT be allowed to leave with unidentified ID person even if child recognizes that person. ***Unless Hawkeye Child Development Center has a court order stating the biological parent cannot pick up we are legally obligated to hand a child over to either biological parent. The other parent will be called immediately in this case.* Also we will not release any child/ren to adults appearing to be under the influence of alcohol or other substances.

9. **Parents need to notify staff in advance if child care is needed for earlier or later hours than scheduled or if needed more or less days than scheduled to ensure staffs are available to accommodate changes.**
10. **MANDATORY POLICY:** Child care badges or student ID cards are a **requirement** for the safety and security of children, families, and employees. **YOU ARE REQUIRED TO BRING YOUR BADGE DAILY/EVERYTIME TO GET IN!** Each parent will have their picture taken and put onto a badge at registration/orientation of child care or at the College Business Office. Two badges per family will be given. After two badges then you will be responsible to pay for badges. Child Care ID badges or student cards that are lost, stolen, or found unattended must be reported and/or replaced immediately. Any stolen or lost ID badges that needs replacement incurs a \$5.00 charge payable by the individual that requires the replacement ID badge. This charge will be added to your child care account/student account. You need to make sure you do not lose your badge to have to use for each semester because the College will charge badge replacement fee of \$5.00.

For the safety and security of the Center, **do NOT let anyone in the Center!!** Each person/family **needs** to use their card or call for a **lead staff** to be let into the Center! If no card, please follow instructions by the phone. Thank you for keeping the Center safe!!

11. Parents need to sign an Informed Consent form to state they have read all the Center's forms and policies and they understand and agree to obey Hawkeye Child Development Center's policies and forms.

EMERGENCIES:

Please refer to the Emergency Guidelines packet for emergency policies, procedures and plans-at parent information corner in hallway or at each classroom entrance.

FACILITY MAINTENANCE:

Daily inspection of the building and equipment will be done by the Director. Maintenance repairs and construction is monitored by the Director and a work order will be submitted to Hawkeye Community College maintenance department. The maintenance coordinator will assess the repairs/construction to decide if maintenance employees will be able to repair or if outside contractors will need to be involved.

CHILD CARE DROP OFF/PICK UP PARKING AREAS:

Child care drop off/pick up parking areas are ONLY for short periods of time for dropping off and picking up your child. After this, your vehicle needs to be parked in regular HCC parking spots. If you keep your vehicle in drop off/pick parking areas for a long period of time, you will receive a parking ticket from HCC Public Safety.

Also, you are discouraged leaving your vehicle idling when dropping off or picking up your child. Not only for your safety of no one getting into your vehicle or drive off, it is an environment safety. An exception is if your vehicle needs to idle in extreme heat or cold to maintain interior or engine temperatures.

TRANSPORTATION:

Field trips are the only transportations the Center will provide. Please see below for field trip policy.

With parent's approval and planning arrangements, the Center will allow other agencies to pick up or drop off a child at the Center. The transportation vehicle has to be able to park in the parking lot up to the sidewalk in front of the Center to be able to allow transportation and this is to ensure the safety of the child and staff.

If the child has disabilities that would affect transportation, the parent needs to plan arrangements for accurate transportation as needed for the child and address specific procedures needed to be taken with Center staff and the driver of the agency doing the transporting.

FIELD TRIP/OUT OF CENTER ACTIVITIES POLICY:

Field trips and other activities are an important part of our curriculum. One way to help children build observation skills and increase their knowledge of the outdoors is to take walks and field trips to places where they can observe nature and the world around them.

Parents will be notified (in writing with a permission form and also verbally) before each activity/field trip. Certified drivers will transport the children and teachers in Hawkeye Community College vans to and from location. Parents are welcome to participate at any time.

PURPOSE/PROCEDURES:

To make sure all staff/volunteers are aware of all that is needed to prepare and the steps needed to be taken to go on a field trip and continue throughout the field trip or an activity out of the Center.

- Permission slips with information about each field trip/activity will be given to each parent to sign their consent prior to each field trip/activity
- Lead teacher/Director will keep a list of the children and adults attending event
- Lead Teacher/Director will be certified in CPR/First Aid
- First Aid Kit and Emergency contact numbers will go along on the field trip
- Director/Lead teacher will have a cell phone and Emergency contact numbers folder to contact parents/authorities in case of an emergency
- Each driver will have their chauffeur license and will bring along their license when driving
- Documentation of as least monthly vehicle maintenance is available at the College maintenance department
- Lead Teacher/Director carry out daily pre-trip inspections of vehicles and correct any unsafe conditions, including unsatisfactory air pressure in tires-also see Regulations and Rules on Vehicle Request/Checkout and Trip Ticket
- Lead Teacher/HCC maintenance worker/Director will be the only staff allowed to drive vans
- Each van will have at least two staff/volunteers to help in van when transporting-Driver and at least one/two other to help as needed and to supervise and will always meet staff/child ratio in van and on field trips/activities (18 months-2 years-1/4 ratio and 3-5 years-1/8 ratio) Driver is not included in ratio.
- The driver shall not play the radio loudly or use ear phones to listen to music or other distracting sounds while children are in the vans operated by the facility and will drive the speed limit and will stop at yellow lights. Drivers will be cautious drivers.
- Cell phones are NOT to be used only when the van is stopped and in emergency situations only
- Parents will provide their child's car seat and will properly install them into the vans and will sign a form of proof that they installed their child's car seat in the van and Lead Teachers/Director will place children in their car seat to make sure seat belt is secured
- Seat belts always stay fastened until van is turned off and child need to stay in their seat until a staff is out to help the children off the van and then lined up at a safe area with another staff
- Each staff will have a list of children in their group and will frequently take count of children
- All staff will regularly count children on a scheduled basis, at every transition time, and whenever leaving one area and arriving at another, to confirm the safe whereabouts of every child at all time.
- There will be a staff at the beginning line and at the ending line of the children to make sure they all stay in the group
- Van driver will take head count on van before leaving to and from the location making sure every child is out of the way of a moving vehicle and no child is left behind. Lead teachers will take head count when getting off the van and, in the classroom, to make sure no child is left behind.
- Alternate transportation arrangements will be made if there is a problem with the transportation vehicles during the trip-HCC Maintenance Dept. to make alternate arrangements

*****Hawkeye Community College vehicles are insured in accordance with applicable federal and State of Iowa laws. Certification of licensing and insurance is located on-site at Hawkeye Community College Maintenance Department****

CHILD ILLNESS POLICY:

HANDWASHING: Each child AND staff must wash hands when arriving at the Center to eliminate outside germs and the spread of germs.

Children who are ill should not be brought to the Center. Children should be able to participate in daily activities and not compromise the health and safety of other children. If your child becomes sick while at the Center, parents will be notified, and the child will be taken to a quiet area to rest (either in the child's classroom designated area away from children or in the Director's office where Director will supervise) until the parent can pick up child. If your child is or has been ill, please consult with your health care provider on our child's health and health needs. Please inform us of your health care provider's recommendations (written note from the health provider) to be sure the staff may meet your child's needs and understand what the child was diagnosed.

PURPOSE AND PHILOSOPHY:

To protect the health of children and staff at the Hawkeye Child Development Center

GENERAL POLICIES:

Children will be checked daily for health status. Signs of illness will constitute a formal evaluation by center staff and the director. Sick children are not to be brought to the center and shall not be allowed to remain at the center. Certain illnesses (see the following list) will necessitate the temporary removal of a child from the center.

PROCEDURE:

A. Child illness

1. Teachers will observe each child's physical condition for symptoms of illness as he/she arrives at the center and periodically throughout the day.
2. If the child exhibits any of the symptoms of illness in the exclusionary policy section listed below, he/she will not be allowed to attend the center. If the child develops these symptoms during the day, the child will be removed from the classroom and lay down in the office or somewhere supervised in the classroom away from the children and the parent will be contacted to pick up child. **The child cannot return until symptoms (diarrhea, vomiting, or fever) free for at least 24 hours.**
3. Children with a **fever of 100.4** or higher will be sent home from child care. If your child is experiencing other symptoms (chills, wanting to lay down and not join in, headache, etc) before reaching 100.4, they will be sent home to be monitored for 24 hours before returning to the center.

ILLNESS EXCLUDE RETURN TO CENTER:

ILLNESS

EXCLUDE

Chicken Pox

YES

RETURN TO CENTER

When all blisters are crusted with no oozing (usually 6 days) and resolution of exclusion criteria.

COVID-19

YES

RETURN TO CENTER

10 days after symptoms start and 24 hours with no fever and improved symptoms OR 10 days after positive test (if no symptoms).

Diarrhea (infectious)

YES

RETURN TO CENTER

(there are special exclusion rules for E.coli 0157.H7, Shigella and cryptosporidiosis). When diarrhea stops and health care provider and public health official states the child may return (written note is required by the health provider) 24 hours symptoms free

Diarrhea (non-infectious)

YES

RETURN TO CENTER

Only if stool can be contained in the diaper.

Vomiting

YES

RETURN TO CENTER

Unless it is due from coughing/phlegm or gagging on food-etc. After 24 hours symptoms free

Fifth Disease

NO

RETURN TO CENTER

Unless child meets other exclusion criteria. If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.

Hand and Mouth

NO

RETURN TO CENTER

Unless child meets other exclusion criteria. Or is excessively drooling with mouth sores or open sores that cannot be covered. If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.

Impetigo YES

RETURN TO CENTER

Exclude if blisters can't be covered. After child has been seen by the doctor, after 24 hours on antibiotic, and blisters are covered.

Influenza YES

RETURN TO CENTER

When child is fever free for 24 hours and resolution of exclusion criteria.

Molluscum Contagiosum NO

RETURN TO CENTER

Unless child meets other exclusion criteria. Or unless blisters and open sores that cannot be covered. Skin disease similar to warts. Do not share towels or clothing and use good hand hygiene.

MRSA NO

RETURN TO CENTER

Unless child meets other exclusion criteria. Wounds should be kept covered and gloves worn during bandage changes. Do not share towels or clothing and use good hand hygiene.

Otitis Media (ear infection) NO

RETURN TO CENTER

Unless child meets other exclusion criteria. If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.

Pertussis (Whooping Cough) YES

RETURN TO CENTER

Child may return after 5 days of antibiotics and resolution of exclusion criteria.

Pink Eye (Conjunctivitis) NO

RETURN TO CENTER

Return after 24 hours of antibiotics. Child does not need to be excluded unless health care provider or public health official recommends exclusion. Resolution of all exclusion criteria.

Ringworm NO

RETURN TO CENTER

Needs to be able to cover. Unless child meets other exclusion criteria. Treatment of ringworm infection maybe delayed to the end of the day if able to cover. Child may be readmitted after treatment has begun. Cover lesion(s) if possible. Do not share clothing, bedding or personal items.

Strep Throat YES

RETURN TO CENTER

When resolution of exclusion criteria and after 24 hours of antibiotic. When fever and vomiting has resolved after at least 24 hours and resolution of exclusion criteria.

Unexplained Rash YES

RETURN TO CENTER

Child may return with a medical note stating what the rash is and/or the rash is not contagious.

Strep Throat YES

RETURN TO CENTER

When resolution of exclusion criteria and after 24 hours of antibiotic. When fever and vomiting has resolved after at least 24 hours and resolution of exclusion criteria.

RSV YES

RETURN TO CENTER

When child is fever free for 24 hours and with no symptoms such as lethargic, irritability, poor feeding, wheezing and able to actively participate.

B. Contagious disease notification

1. Parents will be notified of their child's exposure to a contagious disease through written notices that will be sent home (procare app) and posted in the classroom/hallway and/or verbal notices.
2. Notification will include information about date of exposure and disease.
3. Parents should notify the center if their child contracts a contagious disease. A medical notice will be posted at the Center main entrance for other parents to read and watch for these symptoms. Please refer to our Illness Policy handouts/posted.
4. The Center Director will notify Department of Health and Health Consultants at Child Care Resource and Referral of NE IA regarding reporting any communicable diseases as needed. As needed, all communicable diseases will be reported to Black Hawk County Health Department: (31)291-2413 and to Child Care Resource and Referral of NE IA health consultants: (319)233-0804

C. Return Policy

1. Return policies for specific illnesses are explained above.
2. If a child is on antibiotics, the child must have been on this medication for at least 24 hours before returning to the center.
3. When a child is removed from the center, the parent will be informed of the return policy based on the child's illness.
4. The child will need a medical note to return depending on the illness and symptoms.
5. Any child who attends the Center must be well enough to participate in all program activities, both inside and outside.

Medication Policy: (All medication are kept in a locked container!)

All medication needs to be administered at home when able and ONLY unless times needed are during scheduled times at the Center.

- All medication must be in the original prescription container. All prescription medication must be labeled with specific directions, the child's name, date and physician's name. Medication prescribed for a sibling will not be administered.
***If written instructions from child's physician are not included, then the Director will contact child's physician to confirm instructions of administering medication.
- All medications, refrigerated or unrefrigerated, shall have child resistant caps, will be kept in an organized fashion, and stored away from food at the proper temperature, and will be inaccessible to children.
- Medication shall not be used beyond the date of expiration.
- Parents (**not a staff member**) must complete a signed medication permission form before medication will be administered with specific instructions. The child's name, the name of the medication, the dates to be administered, the dosage and the time it is to be given must be noted. The time must be specific. We will not administer medication "as needed". The form must be signed and dated by the parent each time they bring the medication in.
- Only Lead Teachers and/or Director will administer children's medication. Hands need to be washed/gloves on before touching medication and giving the medication to the child. (Right Person, Right Medication, Right Dose, Right Time, Right Route, Right Reason, and Right Documentation) Hands must be washed again after administering medication.
- The Lead Teacher/Director will complete the medication authorization form, noting the time the medication was administered so that if we are late giving medication, you can adjust your schedule for administering the next dosage accordingly.

- The Center does not provide or administer over the counter products. If the child needs over the counter products (lotions, diaper cream, etc), Staff cannot administer without a physician's statement. Non-prescription medication must be kept in the original container as sold by the manufacturer and labeled with the child's name by the parent and the date medication was brought to the Center. Non-prescription medication must be administered according to label directions and age appropriate, unless other instructions are approved in writing by the child's physician. (Families MUST request that the pharmacy divide the medication into a home bottle and a child care bottle.) ***If written instructions from child's physician are not included, then the Director will contact child's physician to confirm instructions of administering medication or parent will need to obtain.

Emergency Medical Procedures

In the case of emergencies (illness or accident) involving a child, the Lead Teacher will contact the Director. The Director will then contact the parents, or designated emergency contact person. If parents or designated person cannot be reached within 10 minutes and the emergency appears serious, the Director will determine whether the child should be taken to the Emergency Room of a hospital. Transport will be made by ambulance. Emergency treatment may be provided in accordance to the wishes of the parents as expressed in the Authorization or Emergency Medical Treatment found in the child's folder (Emergency Folder). If parents or designated person cannot be located, the Lead Teacher, or person familiar to the child, will accompany the child for emergency treatment. All Lead Teachers are certified in American Heart Association CPR and First Aid Training. Please see Emergency Guidelines displayed in each classroom by attendance clipboard

Insurance

Parents are responsible for health and accident insurance that would cover any sickness or accident the child might incur while attending Hawkeye Child Development Center.

Smoke Free

Smoking, use of chewing tobacco, use of alcohol, use or possession of illegal drugs, over-use or inappropriate use of prescribed drugs, or unauthorized potentially toxic substances are prohibited in, on and close vicinity of the Center's property. During all times when Staff are responsible for the supervision of children, including times when children are transported and during field trips, smoking is prohibited. At all times smoking is not allowed for anyone (staff, parents, volunteers, and family members/guardians/students) on Hawkeye Child Development Center premises. The Program will help provide information to Staff and parents about available drug, alcohol, and tobacco counseling and rehabilitation and Staff and parents assistance programs.

Nap/Rest Time:

The Center provides a mat/cot and a blanket for afternoon naps. The Center will launder these weekly or as needed. Nap time toys and security blankets may be brought. Parents are responsible for laundering these weekly. All belongings must be marked to prevent loss.

All children will have a scheduled rest/nap time during the day. The children are encouraged to nap/rest during times allotted in the daily schedule (please refer to daily classroom schedule for times in each classroom). During nap/rest time, a child tried to rest/nap and indicates he/she is not tired then he/she will be allowed to look at books then do a quiet activity away from the children who are resting until rest/nap time is over.

SAFE SLEEP POLICY (Infants younger than 12 months): BACK TO SLEEP-TUMMY TO PLAY

If your infant requires an alternative way than sleeping on it's back, we will need to obtain a physician's note with explanations of why and with the alternative sleeping position that is required for your infant.

- If your infant arrives to the Center asleep, or fall asleep, in equipment not specifically designed for infant sleep, the infant is removed and placed in his/her designated crib.
- Infants younger than 12 months will always be placed to sleep in his/her crib on his/her back without the use of infant sleep positioners, unless ordered by a physician. (Examples sleeping bolsters, wedge-style positioners, rolled up blankets place under the infant, or elevated crib mattress).
- We will use a firm sleep surface, such as a mattress in a safety-approved crib, covered by a fitted sheet.
- Infants will always sleep in same room where there is staff to monitor.
- There will be no blankets allowed in the crib. If an infant needs a blanket, he/she will use a sleep sack provided by the Center.
- There will be no soft objects, toys, crib bumpers, and loose bedding in your infant's crib or in an infant sleep equipment. (Such as blankets, quilts, pillows, soft toys, and comforter)
- Infants will not be allowed to have an attached to a string pacifier in the crib.
- Room temperature will not be too warm. Room temperature is comfortable for a lightly clothed adult. We do not want to let your infant get too hot during sleep.

We will allow supervised tummy time. Tummy time is a part of the infants normal growth. It promotes healthy physical and brain development, plus strengthens neck, arm, and shoulder muscles. Tummy time helps prevent flat spots on the back of infant's head. Lack of tummy time may slow infant's developmental progress.

Owlets Smart Socks: The Owlet Smart Sock is a health and wellness tool to monitor heart rate and oxygen level. This monitor does not replace safe sleep practices. The Owlet Smart Sock will be worn by all children birth through 12 months of age. Each child will be assigned an Owlet Smart Sock. The Owlet Smart Sock is worn by infants to track their oxygen level and heart rate. Parents are alerted if the levels fall outside of range. Each parent will sign an Owlet Smart Sock waiver consent/permission form. Any parent who wishes to not have their child wear an Owlet Smart Sock must discuss it with the Director to confirm.

Physical Activities: Physical activity affects learning. Movement stimulates connections in the brain. A well-balanced of plenty exercise support healthy brain growth. Children are active learners. Daily exercise and time outdoors are essential for health and well-being. Children's shoes must allow safe participation in activities.

At least 1 hour of outside play period occurs each day (weather permitting) or 1 hour of indoor play period occurs each day for physical activity

NUTRITION:

Hawkeye Child Development Center participates in the USDA Child and Adult Care Food Program providing well-balanced meals and snacks to all children served family style meals when appropriate. Under the Program all meals and snacks served must meet USDA nutritional guidelines. Please refer to classroom daily schedules for times of meals served. Menus will be sent home on Procure app with your child explaining breakfast, lunch and afternoon snack meals. **Please let staff know if your child must eat or avoid any foods for religious or other reasons (food allergy or intolerance). We will provide food substitutes if a completed diet modification request form is on file with a doctor's signature.**

- **DAILY REPORT SHEETS OR ON PROCARE APP NOTIFICATIONS:** For children two years and under (and for any child who has special feeding needs) will have a daily report completed explaining and documenting the type of food the child consumed. Infants and for any child who has special feeding needs will also have it explained on the daily report the quantity of food the child consumes. The daily report is on the Procure app. that sends it immediately to the parents AND also will be discussed with parents at pick up time.

Oral Health Policy and Procedures: (Dental exams for all Head Start children must be signed and dated.)

All children at the Center will have oral hygiene as a part of their daily activity.

Infants who do not have any teeth yet, will get gums wiped with a washcloth and infants who have teeth (under 12 months), Staff will help brush their teeth. Children one year or older shall have developmentally appropriate oral health education that includes information on how and why we need to take care of our teeth.

Hawkeye Child Development Center Staff encourages first dental visit when the children start getting teeth or whenever there is a question of an oral health problem, but no later than 3 years of age.

Oral health/brushing teeth is part of our daily schedule. Brushing teeth procedures includes:

- Staff wiping and sanitizing tables before and after brushing teeth.
- Children have their own labeled toothbrush and own storage compartment that does not touch any other tooth brush

- There will be a very small amount of child appropriate toothpaste on top of cup to get with their toothbrush.
- The children are given a glass with a small amount of water in it to dip their tooth brush in when brushing.
- The Staff have a big mouth with teeth and a big toothbrush to demonstrate proper brushing and while the children are brushing their teeth.
- When finished the children hand their toothbrush to a Staff. The Staff will rinse each tooth brush under running water before storing.
- The cup of water will get dumped out and thrown in garbage.
- At the end of the week, the tooth brushes will be placed in the dishwasher to sanitize for the next week
- Toothbrushes will be replaced if another child touches, gets dropped on floor, or worn.
- Tables are washed and sanitized when finished.

Weather (refer to the Child Care Weather Watch Chart posted in each classroom)

Watching the weather is just part of our job as a child care provider. Planning for playtime, field trips, or weather safety is part of the daily routine. The changes in weather require the staff attend to the health and safety of children in their care.

What clothing, beverages, and sun screen are appropriate:

- Dress children to maintain a comfortable body temperature (warmer months-lightweight cotton, colder months-wear layers of clothing) Make sure children wear clothing that is dry and layered for warmth in cold weather.
- Drinking beverages helps the body maintain a comfortable temperature. Water or fruit juices are best. Avoid high sugar content beverages.
- Sunscreen may be used year around. Use a sunscreen labeled as SPF 15 or higher that is applied to exposed skin(only with written parental permission to do so-should be a permission form in each child's file in office) Apply sunscreen generously and frequently. Read the label of the sunscreen product. You can use sunscreen to block harmful rays from the sun. Use sunscreen with UVB and UVA ray protection.
- Have children play in shaded areas or create shade in the play area.

Exposure to sun is needed, but children must be protected from excessive exposure. The playground provides sunlit areas and shaded areas. Individuals who suffered severe childhood burns are at increased risk for skin cancer. It can take less than 10 minutes for a child's skin to burn. Practicing sun-safe behavior during childhood is the first step in reducing the chances of getting skin cancer later in life.

- Staff shall check children's extremities for maintenance of normal color and warmth at least every 15 minutes when children are outdoors in cold and hot weather
- If signs of injury due to weather parents need to be called immediately and emergency arrangements will be made.

Insect-Borne Disease

When public health authorities recommend use of insect repellents due to a high risk of insect-borne disease, only repellents containing DEET are used, and these are applied only on children older than two months. Staff apply insect repellent no more than once a day and only with written parental permission. (Permission form is located in each child's file in the office)

If a child has a severe insect allergy where an EPI is needed to keep on hand at the center, the parent needs to sign an authorization medication form to stay with the EPI pen and will be locked in the classroom medication box.

TEACHERS:

A proper ratio of adults to children will be maintained to give maximum attention and supervision. Qualified staff and assistants will be responsible for the children enrolled. Staff will meet Department of Human Services (DHS) standards, trainings and certifications. All lead staff will have either their AAS or BA in early childhood education or elementary education or related field. Each staff completes:

- DHS State Record Check and National Fingerprinting Record Check
- Universal Precaution Training
- CPR
- First Aid
- Mandatory Reporter of Child and Adult Abuse Training
- Medical Examination
- TB screening
- Essentials trainings

Lead Teachers and their Assistants meet DHS training regulations and are educated in Early Childhood Development topics monthly/yearly. All staff has monthly meetings for update, communications and training and the Lead Teachers meet at least once a week to go over classroom observations and always have ongoing communication and work together as a team.

DHS record checks (National Fingerprinting and State Record Checks) are completed stating they are approved to work in a child care setting along with hiring/enrollment forms are completed before start work. New teachers and assistants will never work alone with the children until they have received full orientation to the program including classroom management/positive guidance and reinforcement policy, necessary training and a tour with introductions to all staff members, job responsibilities, introductions to the children and parents and routine and schedules. A mentor will be put in place for the new teacher to learn from and ask questions as needed. The director/assistant director will check in occasionally, as needed along with meeting with the new teacher to confirm is ready to be on their own.

STUDENTS/AIDES/VOLUNTEERS/SUBSTITUTES/SUPPORT STAFF: (All shall be at least 16 years of age.) All participants will have an orientation and a tour of the Center and introduction to staff, children, and families. Students, Aides, Volunteers and Support Staff will never work alone with children. A lead staff will always be supervising at all times.

All will review and complete before participating in the Center:

- Center’s policies
- State and National Finger Printing record checks
- Medical statement
- Confidentiality statement
- Child abuse and neglect reporting procedures
- Review of DHS regulatory procedures
- Emergency procedures
- Health and safety procedures
- Positive guidance and reinforcement policy
- Classroom Management techniques
- Daily routines and schedules

HCC programmed students participates in field experiences and works closely with the children in the center through carefully planned observations and teaching activities.

PARENT INVOLVEMENT:

Hawkeye Child Development Center has an “open door” policy. Parents are welcome to visit the Center at any time. We strive to build strong positive family relationships and connections, and build respect and trust with each family. Our door is always open during Center’s hours to encourage involvement such as:

- Free play
- Parent/child activities
- Field trips
- Special events
- Volunteer
- Parent/teacher conferences
- Community Helpers-bring their job to our Center
- Celebrations
- Join your child for lunch
- Meetings
- Center evaluation/projects/planning -staff, services, changes/implementations, curriculum, communication, etc.
- Fundraising



HCDC recognizes the importance of family and the development of each child and welcomes the involvement of parents and family members in the program.

HOME VISITS:

Your child’s Teacher will meet with you and will do two home visits and two conferences with you per year. Your Family Worker will also visit you at your convenience four times a year.

Purpose of home visits:

- To allow **you** to tell us about **your** child and what **you** want for him/her and your family.
- To give you a chance to learn more about your child’s day and progress at school.
- To provide a time for you to ask questions.
- To give you information and resources to meet your goals for your family.

FAMILY FUN EVENTS

These events are held monthly at various locations. During these events, parents and Family Workers discuss things that are going on in the classrooms, in the program, and parents have a chance to make suggestions about the program. We also have guest speakers, discussions and activities for children and families together. Parents set meeting times and help run the events. Incentives are also offered to parents that attend many or all of their center's FFEs.

A schedule for the themes of this year's events will be available at the parent kickoff event. **Please see your Family Service Worker with questions.**

POLICY COUNCIL

Policy Council is made up of Head Start parents, as well as community people. Center Base parents elect members of the Policy Council. Policy Council meets the 2nd Thursday of each month to discuss agency-wide issues, act on these issues, and discuss any community concerns that may impact their family's lives.

INKIND

Making a Difference



Parents are key in helping children stay in school!

The federal government gives the school money. But did you know we have to make a certain amount of in-kind?

In-kind is like money. It is a form of money that you are giving back to the school for your child to have a good education.

In-kind is donated time, space or services that are provided by parents and the community.

Without enough in-kind, we get less money next year and this will happen each year until there is no more money and no more program!!

For every \$1.00 of federal money we get, we are required to get 20 cents match of in-kind.

Help Us Get the In-kind We Need

- Help staff plan Family Fun Events at your school
- Volunteer in the classroom
- Read to the children in your child's class room
- Complete take-home activities and return to the school when finished
- Participate in parent-child activities
- Go on field trips with your child's classroom
- Transport your child to and from their dentist and/or doctor appointments
- Work on your child's goals at home
- Serve on Policy Council
- Serve on the Health Advisory Committee
- Join the Parent Involvement Planning Committee



Your child's education depends on in-kind!

Please contact your Family Service Worker or child's teacher for more information on getting involved and making a difference!!

Access Policy

Centers are responsible for ensuring the safety of children at the center and preventing harm by being proactive and diligent in supervising not only the children, but other people present at the facility.

For the safety and security of the Center, do NOT let anyone in the Center!! Each person/family needs to use their card or call for a lead staff to be let into the Center! If no card, please follow instructions by the phone.

1. Any person in the center who is not an owner, staff member, substitute, or subcontracted staff or volunteer who has had a record check and approval to be involved with child care **shall not** have “**unrestricted access**” to children for whom that person is not the parent, guardian, or custodian, nor be counted in the staff to child ratio.
 - *“**Unrestricted access**” means that a person has contact with a child alone or is directly responsible for child care.
 - *It is imperative that centers not allow people who have not had a record check assume child care responsibilities or be alone with children. This directly relates both to child safety and liability to the center.
2. Persons who do not have unrestricted access will be under the direct “**supervision**” and “**monitoring**” of a paid staff member at all times and will not be allowed to assume any child care responsibilities. The primary responsibility of the supervision and monitoring will be assumed by the teacher unless he/she delegates it to the teacher assistant due to a conflict of interest with the person.
 - *“**Supervision**” means to be in charge of an individual engaged with children in an activity or task and ensure that they perform it correctly.
 - *“**Monitoring**” means to be in charge of ensuring proper conduct of others.
3. Center staff will approach anyone who is on the property of the center without their knowledge to ask what their purpose is. If staff is unsure about the reason they will contact their Site Manager or another management staff to get approval for the person to be on site. If it becomes a dangerous situation staff will follow the “intruder in the center” procedures. Non-agency persons who are on the property for other reasons such as maintenance, repairs, etc. will be monitored by paid staff and will not be allowed to interact with the children on premise.

4. A sex offender who has been convicted of a sex offense against a minor (even if the sex offender is the parent, guardian, or custodian) who is required to register with the Iowa sex offender registry (Iowa Code 692A):
 - a. Shall not operate, manage, be employed by, or act as a contractor or volunteer at the child care center.
 - b. Shall not be on the property of the child care center without the written permission of the center director, except for the time reasonably necessary to transport the offender's own minor child or ward to and from the center.
 - i. The center director is not obligated to provide written permission and must consult with their DHS licensing consultant first.
 - ii. If written permission is granted it shall include the conditions under which the sex offender may be present, including:
 - The precise location in the center where the sex offender may be present.
 - The reason for the sex offender's presence at the facility.
 - The duration of the sex offender's presence.
 - Description of how the center staff will supervise the sex offender to ensure that the sex offender is not left alone with a child.
 - The written permission shall be signed and dated by the director and sex offender and kept on file for review by the center licensing consultant.

All parents and any person authorized to pick up a child will have a public background/record check to make sure they have no convictions where it would prevent them to have access to Hawkeye Child Development Center.

COMMUNICATION: (Make sure to sign up for Procure app!! Please see your child's teacher)

Teachers have ongoing communication with families to encourage sharing about their child's day and prioritize to communicate with them daily. Teachers work closely with families to ensure their child has a smooth transition from home to child care. Teachers make sure assessments, activities, and lesson plans are sensitive to family values, cultures and their home language.

Ongoing Communication with Families:

- Daily schedule and activities are posted by door to each classroom
- Monthly newsletters are sent home
- Update and information notes are sent home as necessary
- Daily verbal communication
- Parent/Teacher conferences are scheduled for Fall and Spring semesters and also by parents request
- Daily Report forms/app
- Teachers communicating with each other about information given per child to meet his/her daily needs and family needs
- Note sheet in each classroom for each teacher to leave notes for teachers switching shifts to have consistent care and communication with children, teachers, and families
- Semester evaluation on services at the Center

- Text
- Emails
- Phone calls
- ProCare

Newsletters will be sent home monthly. It is important for parents to read the newsletters as they will serve as an overview of the weekly themes based on developmentally appropriate practices and individual learning styles and needs.

Please feel free to communicate with us with any kind of concern pertaining to your child at the child care center. We want to make sure you feel good without a doubt having your child here at Hawkeye Child Development Center!

In case you cannot get a hold of anyone at the center and you need to reach us please feel free to put my (Penny) cell phone # in your phone and call me. I will have my cell phone with me for this reason because we are at the center but sometimes cannot get to the phone due to being with the children. My cell phone number is 319-231-3875.

Notes and other important communications will be on child's hook or posted on door to room and/or main door to Center.

ASSESSMENT OF CHILD PROGRESS (Identifying children's needs and interest):

After the first two weeks of introductions with the child and family, the Lead Teachers starts their observations and assessments to make sure they are planning accordingly for each child. Assessment is the process of gathering information about children in order to make decisions to support their routine, learning activities planned, identify special needs, program evaluation, monitoring, and for accountability. It is important for teachers to have ongoing conversations with each child's parent about their child to learn from the parents and making sure both parent and teacher are on the same page with the child's background, development, personality, needs and interests. Through assessment teachers obtain useful information about children's knowledge, skills, and progress by observing, interacting, documenting, analyzing, and reviewing children's work over time. This is a way to ensure the staff is meeting the needs of every child. Another important use of the assessments collected is for lesson and activities planning for the group of children or one on one with a child.

As part of our program, teaching staff provide assessments of your child's development. Assessments is very important for teachers to do for planning and making overall classroom and program improvements. Child assessments inform teaching staff what trainings are needed when searching for trainings for professional development. Teaching staff search for needed training through the DHS Training Registry. As part of HCDC Professional Development Plan, teaching staff have been trained annually or as needed to conduct assessments:

- Teaching Strategies GOLD Reliability Certification
- ASQ and ASQ SE assessment training through Tri-County Child and Family Development, Inc. or Child Care Resource and Referral of NE Iowa
- Brigance and Communication Checklist training through Tri-County and Family Development, Inc.

- Iowa Early Learning Standards through Child Care Resource and Referral of NE Iowa
- Creative Curriculum trainings through Tri-County Child and Family Development, Inc. or Child Care Resource and Referral of NE Iowa

Lead Teachers provide assessment of your child's development on an ongoing basis throughout the year in group and individual/one on one (teacher/child) activities:

- Observations
- Interactions
- Individual documentations
- Iowa Early Learning Standards
- Teaching Strategies GOLD (assessing language, cognitive, physical (gross and fine motor) and social and emotional development)
 - Individual goals
 - Developmental goals
 - Family goals
- ASQ and ASQ-SE:
 - Social and Emotional Development

If a Lead Teacher has a concern in your child's development through their assessments, interactions and observations, the teacher will meet with you to discuss this concern and with agreement will complete a referral form to AEA (Central Rivers) Agency, Early Access or Child Care Resource Referral or other resources pertaining to the concern. The specialist will come to center to observe and evaluate your child. After assessment is completed, the specialist will contact you, and if there is a concern, he/she will set up a meeting with the family and teacher to go over assessment and set up strategies, plans and goals to work towards child's progress.

Parent/teacher conferences are scheduled twice a year to go over assessments and families are provided with written reports about their child's development and learning. During this time, families have the opportunity to raise questions or concerns about how the assessment methods meet their child's needs.

- Fall
- Spring

Also, families can arrange a time to meet with the teacher to address questions and concerns and to discuss how their child is assessed to meet the child's needs and to look at their child's file and portfolio and to discuss your child's progress at any time.

ASSESSMENT PLAN:

The Lead Teachers and Director have been trained to use Creative Curriculum Assessments by Child Care Resource and Referral staff members along with individual/group trainings during staff meetings and other agency meetings. This training explained how to use the assessments and to interpret the results of each child progress and develop a plan to help each child reach his/her goals with help from staff members and family members. This will be discussed in family meetings and parent/teacher conferences.

The Creative Curriculum Developmental Continuum is the tool to help teachers identify where a child is in relation to each of the curriculum's objectives/goals and individualized learning. The Developmental Continuum supports the next step in the child's development. Teachers will make assessments of the child's skills in all areas of development:

- Social/Emotional Development
- Gross Motor and Fine Motor Development
- Cognitive Development
- Language Development

The summaries of the developmental areas will give teachers a good idea of the child's overall development. Teachers will have a clear picture of what the child has accomplished and where his/her skills are just emerging. This knowledge will help the teachers to think about the activities and instructional supports to further the child's growth and development. Another important use of this information the teachers have collected in the assessment process is to plan for the group. Teachers can think about when and where to teach these skills (large or small group settings). The assessments and teaching tools let the teachers learn about each child so they can plan for individual children and the group.

Teaching staff meet at least weekly to interpret and use assessment results to align curriculum, lesson plans, and teaching practices to the interests and needs of the children. Also the purpose of assessments is to review the program's overall improvements in the curriculum, teaching styles, professional development for teaching staff, instructional practices and program resources. The teaching staff meet during nap times away from the classroom in the office.

INDIVIDUALIZED LEARNING AND ADAPTING TEACHING PRACTICES:

As teachers develop strategies and activities, they will be able to judge how children respond and which strategies seem to work best in which situation. Observing children in the classroom will give teachers insight about their level of understanding, development, skills, and their interests. These strategies help teachers recognize the uniqueness of each child by providing a developmentally appropriate environment to match the ways each individual child learns and strives. Teachers will adjust their teaching strategies and style accordingly to how each child learns. Observations and interactions will help teachers promote individualized learning and also create centers/activities to challenge their thinking and to enhance their learning.

DEVELOPMENTAL SCREENING:

Arrangements for developmental screening once approved and agreed on with the family will be processed in this order with AEA(Central Rivers) Agency and/or Early Head Start/Head Start specialist:

- Individual Observations
- Individual Interactions
- Lead Teacher's documentations and assessments
- Communication with Family
- AEA 267 referral form completed with agreement/consent from Family
- Referral Form given to AEA (Central Rivers) contact person
- Parent Meeting with AEA (Central Rivers) coordinator to sign forms

- Child is assigned to an AEA (Central Rivers) specialist
- AEA (Central Rivers) specialist observes and evaluates child using their data collection form to confirm a concern/need
- Team meeting with Lead teacher, family and AEA specialists to go over evaluation/assessments to develop an IFSP or IEP for the child and make goals and implementations
- Monthly/Weekly team meeting with Director and Lead teacher and AEA specialist to discuss child's progress, any updates, and consistent communication
- Arrangements of developmental screenings for :
 - Vision (Center sets up yearly with AEA (Central Rivers) and Lions Club to take snap shots of child's eyes/pupils and sends in for results on each child. Families will receive the results)
 - Hearing (Center sets up yearly with AEA (Central Rivers) Agency and Early Head Start nurse)
 - Dental (Center sets up fluoride varnish with Head Start Nurse and encourages dental exam from a Dentist)
 - Language (Center sets up as needed after observations/interactions)
 - Other Developmental areas as needed (Center sets up with AEA 267(Central Rivers) as needed after assessments and observations)

PROGRAM AND CURRICULUM ADAPTATION/ IMPROVEMENT/EVALUATION:

Teachers use multiple sources of information to make adjustments and implementations to their curriculum and classroom environment to match the way children develop and learn and overall program improvements. HCDC teachers recognizes the uniqueness of each child and addresses individual needs by providing a developmentally appropriate, child-directed learning environment in which the child can construct his/her own knowledge through teacher guided, hands-on experimentation and exploration in the areas of social, emotional, physical, and cognitive development.

- Reports
- Observations
- Screening
- Evaluations
- Culture
- Experiences
- Skills
- Children's needs and Interest
- Abilities
- Family Values
- Learning Environment
- Assessments
- Daily Routine
- Interactions
- Children's Work

CONFIDENTIALITY:

Your child's file, assessments, and any other information are confidential and filed in a locked cabinet. Your child's file and all forms will be updated quarterly to keep current on any updated information and changes. Your child's file is immediately available to you (parents or legal guardian). Certain parents who legally stand in the place of parents will also have the right to inspect the child's records or portions of the child's records. Please respect our need to verify your status as a parent or other qualifying individual before allowing inspection. The children's and family's privacy and feeling comfortable here at Hawkeye Child Development Center are important to the staff. Director, Lead Teachers, Regulatory Authorities and the Head Start Family Support Worker are only allowed to look in children's files unless given written permission from parents/families for other educators to have access to their child's records. Requests for release of information to other agencies will be honored only if made in writing and with the permission from the parents or legal guardians.

POSITIVE GUIDANCE AND REINFORCEMENT POLICY: (Hawkeye Child Development Center complies with federal and state civil rights laws. Page 37.)

The Hawkeye Child Development Center pledges to provide a caring, nurturing environment where every child feels secure and confident. The Center will provide interesting and challenging learning activities to help each child become more emotionally and physically mature in facing and solving the challenges of his/her daily living.

Our Staff is willing to work with each family to provide every child with a positive classroom experience. Our program will provide experiences for children's mental, social, physical, and emotional development and will strive to promote the following goals:

- 1) Develop a sense of responsibility as an individual and member of a group.
- 2) Recognize the rights of other, wait for turns, listen when others are speaking, share equipment and the teacher's time.
- 3) Enjoy music and literature.
- 4) Speak with spontaneity and confidence.
- 5) Improve fine and gross motor skills.
- 6) Explore the world through field trips, walks, observance of holidays and seasonal changes.
- 7) Achieve familiarity with appropriate concepts and skills.

The Hawkeye Child Development Center children are expected to follow a few simple classroom rules:

- Keep hands and feet to self.
- Respect others.
- Use walking feet and inside voices in classroom.
- Listen when others are speaking and taking turns.
- Clean up after yourself.

Hawkeye Child Development Center follows the Policy that is required by the Iowa Department of Human Services. Our Positive Guidance and Reinforcement Policy is as follows:

- 1) No verbal abuse or threats-instead will use a calm, kind, but firm voice when disciplining.
- 2) No corporal/physical punishment will be used.
- 3) Set limits or behavior expectations which are developmentally appropriate.
- 4) Be consistent.
- 5) Act with confidence, fairness, and patience in disciplining.
- 6) Praise and encourage good behavior.
- 7) State suggestions or directions in a positive form.
- 8) Consequences for misbehavior will be immediate and of short duration, and be related to the act, reasonable and respectful-logical and/or natural consequences (ex. Take out things/put them away, cutting in line/go to the back of the line, spill/wipe it up...)
- 9) Choices will be given to redirect negative behaviors.
- 10) Punishment which is humiliating or frightening shall not be used.
- 11) Will not withhold nor threaten to withhold food as a form of discipline

This means that, when disciplining a child, staff will never:

- Use physical punishment
- Use psychological abuse
- Use of force or threatening harm
- Use coercion

Examples of these **inappropriate types** of discipline that staff will NEVER use include:

- Physical punishment: shaking, hitting, spanking, slapping, jerking, squeezing, kicking, biting, pinching, excessive tickling, and pulling of arms, hair, or ears; requiring a child to remain inactive for a long period of time
- Psychological abuse: shaming, name calling, ridiculing, humiliation, sarcasm, cursing at, making threats, or frightening a child, ostracism, withholding affection, seclusion
- Coercion: Rough handling (shoving, pulling, grasping any body part); physical restraint - forcing a child to sit down, lie down or stay down-except when restraint is necessary to protect the child or others from harm; physically forcing a child to perform an action (such as eating or cleaning up)

Staff at the Hawkeye Child Development Center and Tri County Head Start use positive reinforcement to guide appropriate behavior. Occasionally, a child will decide not to follow rules. He/She will be given a choice to change their behavior or he/she may need some thinking time away from the group to problem solve and to decide what needs to be changed and why. When the child is ready to come back to group/activity then he/she may when he/she is ready.

If a child exhibits persistent and serious challenging behaviors, the staff will assess the function of the behavior to see what is targeting this behavior. The staff will explore all possible steps and document all steps taken to address such problems, and facilitate the child's safe participation in the program. The staff will use these strategies to help the child learn needed skills such as how to self-regulate and self-control along with helping child to appropriately express his/herself:

- “FLIP IT” –Four Supportive steps to help young children learn about their feelings, gain self-control and reduce challenging behaviors (Feelings-Limits-Inquiries-prompts)
- “PBIS” –Positive Behavioral Interventions and Support
- “Conscious Discipline” -Dr Becky Bailey-Seven Skills to help children learn about social emotional feelings to help self-regulate, self-control and brainstorm. (Composure-Encouragement-Assertiveness-Choices-Empathy-Positive Intent-Consequences) Staff are being mindful and showing children that we value how we act and respond and when we're practicing it, we're noticing situations instead of blindly judging and reacting to them.

All steps are taken before a decision of exclusion may occur: If the Staff are needing more support after trying all these strategies along with communicating and working with the parents, then with parents’ agreement, such steps must include, at a minimum, engaging a mental health consultant and/or Central Rivers AEA specialists or Child Care Resource and Referral specialist: (Exclusionary measures are not considered until all other possible interventions have been exhausted, and there is an agreement that exclusion is in the best interest of the child.)

- If the child has an individualized family service plan (IFSP) or an individualized education plan (IEP), HCDC staff must consult with the agency responsible for the IFSP or IEP to ensure the child receives the needed support services.
- If the child does not have an IFSP or IEP, HCDC staff must collaborate, with parental consent, with the local agency responsible for implementing to determine the child’s eligibility for services.
- If, after HCDC staff has explored all possible steps and documented all steps taken as described above, HCDC, in consultation with the parents, the child’s teacher, the agency responsible for implementing the plan, and mental health consultant, determines that the child’s continued enrollment presents a continued serious safety threat to the child or other enrolled children and determines this program is not the most appropriate placement for the child, then HCDC must work with such entities to directly facilitate the transition of the child to an alternative placement and accessing services.

Our goal of our Positive Guidance and Reinforcement Policy is helping each child to gain self-control through learning appropriate behaviors. This Policy is intended to provide a happy, safe, and caring environment for all children at the Hawkeye Child Development Center. Also, the goal of this policy is to limit or eliminate the use of suspension, expulsion and other exclusionary measures (Seclusion will never be used at the center).

BITING POLICY: Biting is a very common behavior among children birth to three years. It is important to think positively of children who bite. Biting is a form of communication, as biting is almost always a response to the child’s needs not being met or coping with a challenge or stressor. If we label children as “biters”, we will harm children’s self-perceptions and intensify biting behaviors (Zero to Three, 2010)

Proactively understanding the developmental stages of children at the Center, and their individual needs, can prevent biting behaviors. Center Staff should first respond proactively by providing caring relationships and supportive environments that prevent challenging behaviors. Supportive, nurturing and responsive relationships between Staff and the children in care are critical. Also essential to preventing biting is developmentally appropriate environments including schedules, activities, routines, and transitions. (e.g., enough toys for the group; not requiring group time).

Five broad causes of behaviors include (1) the developmental stage of the child, (2) individual differences, (3) the environment; (4) the child does not know something yet, (5) unmet emotional needs. Young children might bite if they:

- Are not provided developmentally appropriate care and guidance
- Do not have a strong attachment with a consistent, responsive caregiver
- Have too many transitions throughout the day
- Are cared for in large groups (maximum of 8 is recommended)
- Are in large open/undefined spaces
- Lack the language skills necessary for expressing needs or strong feelings
- Are overwhelmed by the sounds, light or activity level in the setting
- Are experimenting to see what will happen
- Need more active playtime, choices, and access to materials
- Are over-tired
- Are teething
- Have a need for oral stimulation (Zero to Three, 2010)

Primary care (the assignment of one staff to three or four children) offers the likelihood that a child and staff will develop a healthy relationship. Within small groups this system better enables the staff to recognize each child's needs and to adjust the routines of the day to individualized care. Staff can anticipate behaviors that are likely to occur and patiently redirect toddlers to help guide them toward controlling their own impulses and behavior (Copple & Bredekamp, 2009). Families and primary staff have better communication by sharing information about the child's well-being. Infants and toddlers feel more secure when they can easily see their primary staff and get a reassuring glance or hug.

The center will respond to individual biting incidents and episodes of ongoing biting: The responsive staff can begin to anticipate when a bite might occur. When observing signs that a child might be on the verge of biting, the staff may be able to act immediately and prevent the biting behavior (e.g., distraction, redirection, close physical presence of the staff). If a biting incident does occur, appropriate staff responses should include the following:

- Staff should keep their feelings in check and not express frustration or anger to the child
- Ensure all children are safe
- Staff should (in a firm, calm voice) address the child that bit in a short simple and clear way
- Staff should shift their attention to the child who was bitten and show concern and support for that child
- Go back and talk with the child (if child is verbal and able to talk about the experience) and the different strategies s/he can use next time, instead of biting

- Help the children move on. Do not make them play with one another, unless they want to (Zero to Three, 2010)

Note: Discharging a child without first addressing the underlying causes of biting behaviors and meeting the needs of the child is not an appropriate response to biting or other challenging behaviors.

The Center will assess the adequacy of the staff supervision and context and environment in which the biting occurred: Children bite to fulfill a need or cope with a challenge (Zero to Three, 2010). Rather than focusing on the child as needing “discipline”, it is the Center’s responsibility to observe the child and determine the child’s needs that are not being met. This can be done through assessing (Hunter & Hemmeter, 2009):

- Quality of relationships between child and primary staff
 1. Does the primary staff have a nurturing relationship with the child?
 2. Does the primary staff know the child’s needs, interests, routines and preferences?
 3. Does the primary staff need further professional development?
- Environmental influences on the child’s behavior
 1. Does the environment prevent large groups and reduce disorder?
 2. Are there long waits and not enough duplicate toys?
 3. Are the centers (dramatic play, quiet space, etc.) organized to minimize confusion and Stress?

Is there a quiet place where children can go when overwhelmed?
- Targeted social-emotional supports
 1. Are children provided safe and secure daily routines?
 2. Are transitions managed effectively?
 3. Do caregivers routinely assist children with identifying feelings and learning to calm themselves?

The purpose of the assessment is to identify the potential external causes for the challenging behavior, which in this case is biting, so that further incidents can be prevented. When biting occurs, the staff must seek “to understand the meaning of the child’s behavior” and discover together with the child “more effective means for communicating needs, wishes, and desires” (Hunter & Hemmeter, 2009).

The staff should:

- Observations of all children should complement the child’s portfolio for planning and assessments purposes.
- Observe the child and document observations, including behaviors and context (where, when, how, who-adults and children) both before and after biting occurs to identify functions of the behavior. It is also helpful to know when the behavior is absent.
- Use the data to find patterns and potential solutions
- Respond immediately to any unsafe behaviors
- Meet with the family to collect information about the child’s behavior at home, share information, and demonstrate a commitment to working together to address the child’s needs (Hunter & Hemmeter, 2009)

The Center maintains an emphasis on proactive purposeful planning of environments and opportunities to develop healthy relationships within the care environment through Director support, staff teamwork, and professional development including both training and consultation.

The Center will respond to the individual child or staff who was bitten: When a biting incident occurs, the child who was bitten should be immediately cared for and shown concern and support. The child with the challenging behavior should be taught in a caring and firm way that the behavior is not acceptable as well as alternative behaviors. The Center should also examine the needs of the child, including potential changes to the environment and routines, to prevent future incidents. If a child is provided developmentally appropriate and individualized care in a purposefully planned environment, discharging a child is needed only in rare, extreme situations. Consultants and other resources are available to support you in meeting the needs of the children in your care.

The Center's process of notification to parents of children involved in the incident and documenting the incident: The Center should provide confidential reports to parents of involved children. Incidents will be documented to assist the staff with identifying patterns and preventing future incidents through changing the environment and intentional teaching strategies. A confidential copy of the incident report should be maintained in child's file, and a confidential behavior chart would be useful if the biting is not an isolated incident. Further analysis of the environment is even more important if multiple children are exhibiting challenging behaviors.

The Center will protect confidentiality: When informing parents that their child has been bitten or bit another child, the Center staff and volunteers should maintain the confidentiality of the other child.

The Center's first aid procedures used to biting incidents:

First aid for bites involves cleaning the area and applying ice for pain relief. Bites generally do not bleed a large amount, but, if they do, put direct pressure on the area for 10 minutes, which should stop the bleeding. Elevation of the injured area above the level of the heart may also help stop bleeding and prevent swelling of the wound.

- Keep cleaning simple: Run large amounts of cool clean water over a wound.
- It is best to leave the wound uncovered until checked by the doctor.
- Apply ice for pain relief: Wrap some ice in a towel and apply it to the area. This will ease the pain and help keep the swelling down. Do not apply ice directly on the skin because it may freeze the skin.

A bite that just causes bruising or only scrapes the top layer of skin will not require much more than cleaning with water and ice.

PET POLICY AND PROCEDURES:

If the Center decides to have a pet in the Center, each family and staff will be contacted to make sure their child/ren do not have any allergies pertaining to the pet and will receive information about the pet before getting one for Center.

- Any pet or animal present at the facility, indoors or outdoors, shall be in good health, show no evidence of carrying any 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 meets these conditions
- All contact between animals and children shall be supervised by a staff who is close enough to remove the child immediately if the animal show signs of distress or the child shows signs of treating the animal inappropriately.
- The staff 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)
- Potentially aggressive animals shall not be in the same physical space with the children
- Staff will check with parents to make sure their child does not have a pet allergy
- The Center shall care for all pets as recommended by the health department and receive information on a pet before getting one for the Center and check with families on pet allergies
- Staff and children need to wash their hands after handling animals, animal food, or animal wastes, as specified in hand washing

Reptiles will not be allowed as a classroom pet because of the risk for salmonella infection.

REPORTING CHILD AND ADULT ABUSE: (It is mandatory that all staff takes the 4-hour Mandatory Reporter of Child and Adult Abuse training and is certified.)

The Hawkeye Child Development Center and Tri-County Child and Family complies with Section 232.69 of the Iowa Code, which states: “It is mandatory for the employees, owner, or director in charge of a child care center to report immediately to the Department of Social Services, when in the course of working with a child the director or employee has reason to believe that the child has suffered sexual abuse, physical abuse or neglect. This report should be both oral and written.”

We are Mandatory Child and Adult Abuse Reporters. It is required for staff to report all suspected incidents of child abuse, neglect, or both by families, staff, volunteers, or others to the appropriate local agencies. The first step in reporting suspected child abuse is to report it to the director and the director will the local Department of Social Services (319)291-2441 or call toll-free anytime, day or night, 1-800-362-2178-if the child’s life is in immediate danger. An oral report must be made also.

Staff who report suspicious of child abuse or neglect where they work are immune from discharge, retaliation, or other disciplinary action for that reason alone unless it is proven that the report was malicious-intended to do harm.

It is a legal responsibility to report any suspicion of child abuse encountered in the course of one's professional duties. The responsibility to report those suspicious applies not only to individuals directly involved with the children, but to any volunteers, students or support staff who have contact with the children.

Policies and procedures need to be followed if a staff member is accused of abuse or neglect of a child in the program that protect the rights of the accused staff person as well as protect the children in the program. Procedures shall be followed: (complaints and documentation is confidential)

- Complaint form must be completed in order to initiate a formal investigation
- Complaint will be reported to Human Resource Service Office
- All complaints and inquiries shall be promptly investigated
- While waiting for results, rights of the accused staff person as well as the child will be protected
- The result of the investigation shall be reported to the Coordinator at Human Resource Services for review and final decision.

Any information related to suspicion or report of child abuse is confidential between the person(s) directly involved, the person making the report. Discussing any information related to a situation of suspected child abuse with the parents of the other children in case is a Breach of Confidentiality.

STATEMENT OF INCLUSION:

- Hawkeye Child Development Center is committed to maintaining an educational and work environment in which parents, children and staff can work together in an environment free of discrimination, harassment, exploitation, or intimidation.
- Hawkeye Child Development Center is committed not to discriminate against persons with disabilities with an equal opportunity to participate in the Center's programs and services.
- The Center will not exclude children with disabilities from the program unless the presence would pose a direct threat to the health or safety of others or require a fundamental alteration of the program.
- The Center will make reasonable modifications to the policies and practices to integrate children, parents, and guardians with disabilities into the program unless doing so would constitute a fundamental and financial alteration.
- Hawkeye Child Development Center wants to work together with families to meet the needs of their children.
- Inclusionary special education services are integrated within all of our classrooms and serve identified students who need an individualized education program.

- When a child is enrolled with special needs, the staff is oriented in understanding the child's special needs. Learning ways of working with the child in the group setting along with working with the family and specialists to provide aids and services needed for effective communication with children with disabilities and when doing so would not constitute an undue burden to the Center.

If your language is not English and you need this information in other language please inform us about your language preference and we will try to meet your needs in your language.

HCDC EVALUATION OF SERVICES:

Evaluations are given to families to offer you opportunities to assist in making decisions to improve the program and services. This collaborative and shared decision making will help the staff members to build a positive family/child relationship in making changes/accommodations/implementations as needed and necessary. The staff will use this information to plan professional development and program quality-improvement activities as well as to improve operations and policies.

Mental Health Services:

Mental health services are provided by Tri-County's licensed mental health professional and HCC student services. These services include classroom observations, staff consultations, family consultations, home visits, various trainings and individual observations as requested. The mental health professional assists staff with developing strategies to build social emotional skills, strong attachments and healthy environments. Positive Behavioral Interventions and Supports (PBIS) is a process used to teach children the necessary social and emotional skills to replace challenging behaviors. A PBIS/Positive Solutions for Families parent education series is available. Ask your Family Service Worker and Director for more information.

AFFIRMATIVE ACTION/GRIEVANCE PLAN:

This agency complies with all federal and state requirements and consistent with the objective that no person shall be discriminated against on the basis of race, color, national origin, religion, sex, age, or disability.

A grievance is a complaint by a parent or student where a policy or practice is considered improper or unfair, which results in an unsatisfactory learning environment and/or there has been deviation from, or the misinterpretation or misapplication of a practice or policy.

Hawkeye Child Development Center is committed to maintaining an educational and work environment in which parents, children and staff can work together in an atmosphere free of discrimination, harassment, exploitation, or intimidation. HCDC is committed to working out conflicts by a joint decision making:

- Identify a safe place and time to talk confidentially..... (With the lead teacher, director or administration staff depending on situation and concern)
- Clarify individual perceptions involved in the conflict. ...

- Practice taking an active and empathetic listening stance. ...
- Generate options with the vision of a win-win outcome. ...
- Develop an agreement that works for all....

If a family and program staff cannot come to an agreement then a third-party intervention (administration staff) may need to be involved to professionally help facilitate a negotiated solution.

Hawkeye Community College Nondiscrimination Statement:

Hawkeye Community College does not discriminate on the basis of sex; race; age; color; creed; national origin; religion; disability; sexual orientation; gender identity; genetic information; political affiliation; or actual or potential parental, family, or marital status in its programs, activities, or employment practices as required by Iowa Code §§ 216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681-1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and Title II of the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.). Veteran status is also included to the extent covered by law. Any person alleging a violation of equity regulations shall have the right to file a formal complaint. Inquiries concerning application of this statement should be addressed to: John Clopton (Equity Coordinator and Title IX Coordinator for Employees) or Nancy Henderson (Title IX Coordinator for Students), Hawkeye Community College, 1501 East Orange Road, P.O. Box 8015, Waterloo, Iowa 50704-8015, telephone 319-296-4405, email: equity-titleIX@hawkeyecollege.edu, or the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison, Suite 1475, Chicago, IL 60661, phone number 312/730-1560, fax 312/730-1576.

USDA Nondiscrimination Statement (Revised 5-5-22)

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an

alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. Mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, DC 20250-9410; or
2. Fax: (833) 256-1665 or (202) 690-7442; or
3. Email: program.intake@usda.gov

This institution is an equal opportunity provider.

Iowa Nondiscrimination Statement (Revised 3-21-16)

It is the policy of this CNP provider not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, age, or religion in its programs, activities, or employment practices as required by the Iowa Code section 216.6, 216.7, and 216.9. If you have questions or grievances related to compliance with this policy by this CNP Provider, please contact the Iowa Civil Rights Commission, Grimes State Office Building, 400 E 14th St, Des Moines, IA 50319-1004; phone number 515-281-4121 or 800-457-4416; website: <https://icrc.iowa.gov/>.

COMMUNITY RESOURCES

- Child Care Resource and Referral: (855) 244-5301
- Black Hawk County Health Department: (319) 291-2413
- Department of Human Services: (319) 291-2441
- Family and Children’s Council: (319) 234-7600
- Operation Threshold: (319) 291-2065
- Northeast Iowa Food Bank: (319) 235-0507