

Department of Early Learning  
Chattanooga Head Start/Early Head Start  
Program

[www.chattanoogaheadstart.com](http://www.chattanoogaheadstart.com)

# Parent Handbook





Like us on  Chattanooga Head Start and Early Head Start

**Due to Covid-19, some of the information in this booklet may not apply and may be subject to change. You will be notified of changes as promptly as possible.**

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# WEATHER POLICY

## **Please listen to local newscasts for announcements.**

- ♥ When the Hamilton County School System is closed our Head Start Centers are also closed.



- ♥ When Hamilton County School System times are delayed; Head Start times will also be delayed.



- ♥ Head Start Collaboration sites (not Early Head Start) will follow Hamilton Schools regarding closures and/or delays.
- ♥ Early Head Start families at Collaboration sites should listen to local news reports for school closures at their sites.

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### **Chattanooga Head Start /Early Head Start Expulsion Statement**

**The Head Start/Early Head Start Program will not expel or unenroll a child because of a child's behavior in Head Start/Early Head Start.**

# School Readiness

## **School Readiness**

**Success in school begins well before a child enters kindergarten. Tennessee’s School Readiness Model emphasizes that the state’s children will be ready to succeed in school only when families, communities and schools work together on their behalf throughout the early childhood years. “Readiness” is not solely a condition within a child but is a condition that exists when communities, schools and families collectively create a nurturing environment for child development starting at birth.**

### **The Pledge for Families**

- I understand that I am the most important person in my child’s life, I pledge to support my child’s wellbeing by interacting with them positively and frequently, taking a strong interest in all aspects of their welfare, development and learning.**
- Recognizing that I am my child’s first and most important teacher, I pledge to provide steady and supportive relationships, ensure safe and consistent environments, promote good health, and foster self-esteem, confidence, determination and self-control.**
- I pledge to do my best to be an example for my child through my presence and attention in all aspects of his or her health, development and education.**
- I will talk with my child, read with my child and participate with my child to explore a variety of activities every day.**
- I pledge to lead my child to success in school and in life.**  
**Chattanooga Head Start/Early School Readiness Goals**

### **Social and Emotional Development Goals:**

1. Children will gain a positive sense of self and independence in order to explore in the environment, make decisions, gain skills and interact cooperatively with peers, teachers and other adults in the classroom.
2. Children will demonstrate the abilities to self-regulate and express their own behaviors and needs in ways that are appropriate in a classroom or community setting.

### **Approaches to Learning Goal:**

1. Children will improve and enhance in their ability to focus, engage, show and express interest in activities that address their unique interests, current abilities and emerging skills in the domains of learning.

### **Language and Literacy Goals:**

1. Children will demonstrate gains in their receptive language by listening and responding to activities that range from simple to complex.
2. Children who are dual language learners will demonstrate gains in their receptive language skills by listening and responding to activities that range from simple to complex as their home language and culture is supported within the classroom.
3. Children will demonstrate gains in their expressive language skills as they interact with peers and adults throughout the environment in all domains of learning.
4. Children will demonstrate the recognition of letters and their sounds.
5. Children will recognize letters in print and demonstrate an understanding that letters form words that convey meaning.
6. Children will demonstrate levels of their emerging writing skills thru their work sample.

### **Perceptual, Motor, and Physical Development Goals:**

1. Children will gain knowledge of the significance of health and safety practices as they practice them daily in the classroom.
2. Children will gain large muscle control as they are engaged in activities such as large muscle movement, navigation and balance
3. Children will gain small muscle control as they are engaged in activities such as self-care building and exploring

## **Cognition Goals:**

1. Children will demonstrate their ability to think, reason and use information to acquire knowledge and solve problems.
2. Children will demonstrate gains in the following areas of mathematics knowledge and skills.
  - Number concepts and quantities
  - Number relationships and operations
  - Geometry and Spatial Sense
  - Patterns
  - Measurement and Comparison
3. Children will demonstrate gains in the following areas of science knowledge and skills.
  - Scientific skills and methods
  - Conceptual knowledge of the natural and physical world
4. Children's creative arts expression will be supported and enhanced in the classroom thru teacher and child-directed activities and materials in music, creative music, dance, art and drama.
5. Children's social studies knowledge and skills will be supported and enhanced in the following areas:
  - Self, family, and community
  - People and the environment
  - History and Events

**\*The Chattanooga Head Start/Early Head Start Program School Readiness Goals are specific to each child's level assessment data.**

# Early Head Start

**DEPARTMENT OF EARLY LEARNING  
CHATTANOOGA HEAD START/EARLY HEAD START PROGRAM**

INFORMATION FOR PARENTS OF EARLY HEAD START CHILDREN

Center: \_\_\_\_\_ Phone #: \_\_\_\_\_

Caregiver: \_\_\_\_\_

Child: \_\_\_\_\_

Welcome to the Early Head Start Program! Early Head Start is a comprehensive, federally funded program serving pregnant women and children birth to three from low-income families. We are very happy that your family has enrolled in our program. Together we can make this an enjoyable learning experience for both you and your child or as you get ready to become a mom. Below is a list of some helpful information that you will need to make this transition a pleasant one for you and your child.

- Your child's first day will be \_\_\_\_\_.
- Breakfast, lunch and snacks are provided free of charge to all Early Head Start children. Your child will be fed on demand until he/she demonstrates a readiness for a scheduled meal. Parents who eat in the classroom with their child must eat what is served and at the table with the children. Food cannot be brought into the room except for approved nutrition experiences or activities.
- A transition form will be filled out to get information from you on all of your child's routines.
- Children cannot attend if they are ill. If your child will not be coming to school, please phone the center to let the teacher know. A list will be provided to you about illnesses and rules on exclusion for each in this handbook.
- Dress your child in washable play clothes. Children are involved in fun and messy activities each day and play outside when weather permits. Children unable to go outside for health reasons should remain at home. Toys must not be brought to school, due to children losing them and safety issues. Please leave all toys at home.
- The Brigrance screening will be administered to your child. This will let us know if your child may need extra services. The Cognitive Toy Box will be used as the on-going observation and assessment tool during your child's time in Early Head Start. Results will be discussed with parents during initial conference.
- Parent activities:
  - Monthly Training
  - Home Visits
  - Parent - Teacher Conferences
  - Monthly Take Home Activities
  - Provide input on daily lesson plans
  - Sharing Family Cultures

**Program Year 2022-2023**

**Please listen to local newscasts for announcements.**

- ☼ When the Hamilton County School System is closed our centers are also closed.
- ☼ When Hamilton County School System times are delayed; Head Start/Early Head Start will also be delayed.
- ☼ Head Start Collaboration sites (not Early Head Start Collaboration sites) will follow Hamilton Schools regarding closures and/or delays.
- ☼ Early Head Start Collaboration sites families should listen to local news reports for school closures at their sites.

## Creative Curriculum for Infants and Toddlers

### Philosophy

***Children construct their understanding of the world from their own active involvement with people, materials and ideas and they gain knowledge by actively experiencing the world around them choosing, exploring manipulating, practicing, transforming and experimenting.***

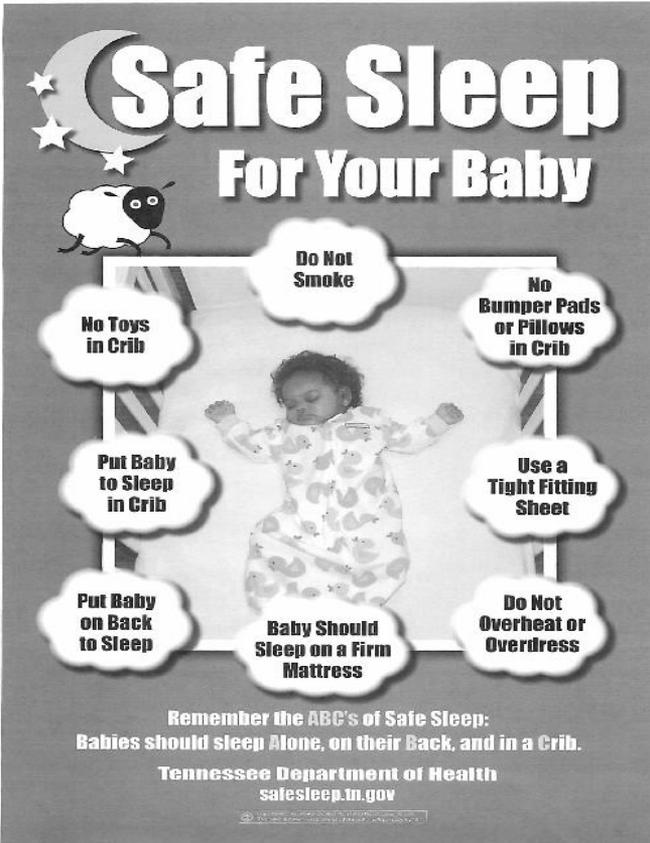
**The framework that meet the needs of infants and toddlers.**

- ★ Knowing Infants, Toddlers & Two's
- ★ Creating a Responsive Environments.
- ★ Consistent, responsive outines.
- ★ Activities that provide learning experiences in all areas of development.
- ★ Caregivers that provide consistency in guiding behavior.

- ★ Caregivers that understand and follow safety procedures.
- ★ Caregivers that provide a healthy environment that includes good nutrition.
- ★ Caregivers that plan individualized activities and experiences that meet the needs of each child.
- ★ Partnering With Families
- ★ Planning and evaluating for each child's development.

### Ongoing Assessment System

Screening Assessment	Goals	Planning	Evaluation	Tracking
<ul style="list-style-type: none"> <li>★ Brigance</li> <li>★ Cognitive Toy Box</li> </ul>	<ul style="list-style-type: none"> <li>★ Cognitive Toy Box</li> </ul>	<ul style="list-style-type: none"> <li>★ Lesson Plans</li> <li>★ Cognitive Toy Box</li> <li>★ Parent Conferences</li> </ul>	<ul style="list-style-type: none"> <li>★ Cognitive Toy Box</li> </ul>	<ul style="list-style-type: none"> <li>★ Lesson Plans</li> <li>★ Anecdotal Notes</li> <li>★ Work Samplings</li> <li>★ Photographs</li> <li>★ Cognitive Toy Box</li> </ul>



### In Our Care

Children under 12 months who are asleep will be:

- ♥ Placed on their back in their individual crib
- ♥ Left uncovered and will have no toys or stuffed animals in the crib
- ♥ Checked every 15 minutes by a light touch to body
- ♥ Will be removed from their crib upon awakening

# Head Start

**CHATTANOOGA DEPARTMENT OF EARLY LEARNING  
HEAD START/EARLY HEAD START PROGRAM**

## INFORMATION FOR PARENTS OF HEAD START CHILDREN

Center		Center Telephone Number	
Teacher		Child	

Welcome to Head Start! We are very happy that your family has enrolled in our program. Together, we can make this a year of enjoyable, worthwhile experiences for both you and your child. Head Start is a comprehensive, federally funded child development program serving 3 and 4-year-old children from low-income families.

Below, we have listed information which should help answer some of your questions and make your child's adjustment to Head Start pleasant and rewarding. Please keep this sheet for reference during the year.

1. \_\_\_\_\_s first day will be \_\_\_\_\_. This week is called phase-in and only a small number of children will be in class that day. Parents and children come to the center together in order to help the children adjust.
2. After this day your child will not come again until \_\_\_\_\_.
3. Your help as a volunteer is needed. Please come to phase-in, and let your child's teacher know what days you can volunteer at the center.
4. Head Start hours for children are from \_\_\_\_ a.m. until \_\_\_\_ p.m. Arrival before \_\_\_\_\_ or departure after \_\_\_\_ may cause a hardship on staff who have other responsibilities at these times.
5. Breakfast and lunch are provided free of charge to Head Start children and parents who want to eat with their child. You must eat what is served in the classroom while sitting at the table with the children. Please do not send or bring other food or snacks. Regardless of what time your child arrives at the center, he or she will be served lunch.  
If you plan to eat with your child, please call or talk to the center clerk before 9:00.
6. Health/Safety Information
  - If your child is to ride home with someone other than his usual ride, please ensure that the person is listed on the authorization slip. A picture ID is required and will be asked for.
  - Please call the center to let us know if your child is unable to attend for any reason.
  - Please do not send your child to the center if he or she is ill or has a temperature of 100° or more.

- If your child becomes ill at the center, you will be contacted so that arrangements can be made to have your child picked up.
  - Please maintain a current emergency contact list. If changes occur please meet with your teacher or family services worker to complete a Request for Change or Change of Release Form.
  - Please bring a change of clothing for your child and replace them as the temperatures change.
  - Please do not bring backpacks for your children.
7. Helpful Request
- When you are talking with your child, please say the teacher's name instead of referring to her/him as "the teacher". This helps the children learn names quickly and feel more comfortable in the group.
8. During phase-in, the following screenings will be completed on your child:
- Brigance
  - Preschool Language Screen 5<sup>th</sup> Edition
9. Parent Education Activities:
- Monthly parent training
  - Home Visits
  - Parent teacher conferences
  - Home connections and parent engagement activities
  - Curriculum planning
  - Volunteering in the classroom
  - Sharing family culture
10. When you bring your child to school, please park and walk your child into the classroom. You must sign your child in each time you drop off or pick up your child.
11. **Chattanooga Head Start/Early Head Start follows the Hamilton County School System policy for inclement weather.**  
**Please listen to local newscasts for announcements.**
- ♥ When the Hamilton County School System is closed our centers are also closed.
  - ♥ When Hamilton County School System times are delayed; Head Start will also be delayed.
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  - ♥ Early Head Start families at Collaboration sites should listen to local news reports for school closures at their sites.

### Creative Curriculum System for Preschool

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

#### **The goals of our curriculum address four areas of development for children.**

**Social/Emotional:** to help children develop independence, self-confidence, and self-control; follow rules and routines; make friends; and learn what it means to be part of a group.

**Physical:** to increase children's large muscle skills—balancing, running, jumping, throwing and catching---and to use the small muscles in their hands to do small tasks like buttoning, stringing beads, cutting

**Cognitive:** to acquire thinking skills such as the abilities to solve problems, to ask questions, and to think logically---sorting, classifying, comparing, counting, and making patterns---and to use materials and their imagination to show what they have learned.

**Language:** to use words to communicate with others, listen to and participate in conversations with others, understand the purpose of print, recognize letters and words, and begin writing for a purpose.

**Through the activities we plan and the way we organize the classroom, select toys and materials, plan the daily schedule, and talk with children, we seek to accomplish the goals of our curriculum and give you're a successful start in school.**

## Individualization

### Implemented in all Head Start and Pre-K Classrooms

The information below shows the system we use to plan individual goals for children and to track their progress in achieving these goals. Goals are identified from the screenings and assessment instrument as well as goals that are requested by parents.

Screening Assessment ➔	Goals	Planning	Evaluation	Tracking
Brigance Preschool Language Screen 5 <sup>th</sup> Edition (Speech and Language Screen) Cognitive Toy Box Review of screenings with Parents	Fall, Winter and Spring Parent/Teacher Conferences Transition into Program	Lesson Plans	Cognitive Toy Box	Lesson Plans Anecdotal Notes Work Samples



# **Personal Safety Curriculum**

## **Child Protection Unit**

We are using the **Second Step** program in your child's learning environment. The **Second Step** program teaches children important skills for getting along with others and doing well in school. It also helps our school be a safe and supportive place where everyone can learn.

To help our school be even more safe and supportive, we are also going to use the **Second Step Child Protection Unit**. In these lessons, children will learn three types of skills:

- **Personal Safety.** Children will learn important safety rules, such as safety with guns, sharp tools, and fire, and when riding on wheels or in cars. They will also learn ways to help them decide if something is safe or not.
- **Touching Safety.** Children will learn about safe, unsafe, and unwanted touches, and rules about touching private body parts. They will also learn to say no to unsafe or unwanted touches, and to tell a grown-up if someone breaks rules about touching private body parts.
- **Assertiveness.** These lessons will also give children a chance to practice asking a grown-up for help, telling a grown-up about an unsafe situation, and being assertive to get out of unsafe situations. Your child will bring home simple, fun activities called Home Links that will help you understand what he or she is learning about safety at school and give your child another chance to practice safety skills.

To keep your child safe and protected, everyone at school needs to be involved. So all our staff will get special training in how to:

- Recognize and report suspected child sexual abuse
- Respond to and support children who have been abused or who are facing other challenges
- Use strategies that promote a safe and supportive climate for learning.

If you have any questions about the Child Protection Unit or the Second Step program, please talk with your child's teacher. For more information on our school's child-protection policies and procedures, you can also talk to your child's teacher or school's director.

Go online to **SecondStep.org** and log in with the activation key **CPUE FAMI LYGE** to get more information about what your child is learning in the Second Step program.

# City of Chattanooga Department of Early Learning Head Start/Early Head Start Program

## Child Protection Unit Weekly Themes and Schedule

Weekly Theme:	Children will Learn:	Week of Lessons:
<b>Weekly Theme 1: Ways to Stay Safe</b>	Grown-ups should take care of you and keep you safe. There are Ways to Stay Safe. <ul style="list-style-type: none"> <li>• Stop and think: Is it safe? What’s the rule?</li> <li>• Say words that mean no.</li> <li>• Tell a grown-up.</li> </ul> There are rules you follow to stay safe. Following the Always Ask First Rule helps you stay safe.	<b>January 9-13, 2023</b>
<b>Weekly Theme 2: The Always Ask First Rule</b>	Always ask a parent or the bigger person in charge first: <ul style="list-style-type: none"> <li>• When you’re not sure if it’s safe</li> <li>• When someone asks you to go somewhere or do something or asks to give you something</li> </ul> Following the Always Ask First Rule helps you stay safe.	<b>January 23-27, 2023</b>
<b>Weekly Theme 3: Safe and Unsafe Touches</b>	Safe touches help you feel cared for and loved. Unsafe touches hurt your body. You can say words that mean no to any kind of touch you don’t want.	<b>February 6-10, 2023</b>
<b>Weekly Theme 4: The Touching Rule</b>	A bigger person should never touch your private body parts except to keep you healthy. (Touching Rule) Remembering the Touching Rule helps you stay safe. It is never your fault if someone breaks the Touching Rule.	<b>February 13-17, 2023</b>
<b>Weekly Theme 5: Practicing Staying Safe</b>	Never keep secrets about touching. It’s never too late to tell someone about a touching secret. Keep telling until someone helps you.	<b>February 27-March 3, 2023</b>
<b>Weekly Theme 6: Reviewing Safety Skills</b>	Remembering Safety Rules and using the Ways to Stay Safe will help you stay safe. A bigger person should never touch your private body parts except to keep you healthy.	<b>March 6-10, 2023</b>

## School Readiness

Learning begins at home. You are your child's first and most important teacher. These five easy steps will help you prepare your child for success in kindergarten. But, remember, the most important thing you can give your child is your UNCONDITIONAL LOVE AND SUPPORT--starting in kindergarten and continuing all the way through high school graduation. Nothing is more important to a child's success in school than a home full of love and support.

### Step 1:

Tennessee State law requires that a child entering kindergarten shall be five (5) years of age on or before August 15th. A child entering first grade shall be no less than six years of age. Kindergarten is required prior to first grade enrollment.

Each of the following items must be provided in order for school registration to be completed:

- state certified copy of the child's birth certificate (not mother's copy)
- child's social security number
- immunization record
- physical examination record

The birth certificate is needed at the time of pre-registration. The immunization record and physical examination must be a part of your child's record before school begins in the fall. The Health Department or a personal physician will provide the forms needed for the medical history.

Tennessee State Rules and Regulations mandate that students be developmentally screened for school entry. The purpose of this screening is to serve as a tool for planning an individualized and self-paced program for each child and to determine if further assessment or diagnostic testing is needed. In Hamilton County, students are screened during the spring or summer prior to the kindergarten year or in the fall of the kindergarten year. Schools will inform parents of the scheduling arrangements for the developmental screening of each student.

In the fall, you will receive a handbook for parents or guardians of kindergarten students explaining the phase-in period, report card format, skills to be covered, parent involvement tips, and the answers to many more of your questions. The principal and kindergarten teachers at your child's school are available to answer your questions.

### Step 2:

Encourage independence. Children enter kindergarten with different abilities and skills. Your child's kindergarten teacher will not expect all children to be at the same place developmentally and socially. However, there are certain basic skills that each child is expected to know how to do. Your child needs to know his/her name, address, and telephone number. Your child needs to be able to use the bathroom by him/herself and button and zip his/her clothes. These skills will encourage your child's independence and self-confidence. Also helping your child be able to share and play with other children will help them to adjust to a busy kindergarten classroom.

### Step 3:

Establish routines to help prepare your child for kindergarten. Routines put us all at ease. One way to get ready for kindergarten is to get in the habit of following the schedule you will follow once school starts. For example, practice waking up and getting dressed in time for school, eating a good healthy breakfast together, and being prepared to leave your home in time to arrive at school on time.

Prepare a study "spot" for your child and supply it with crayons, construction paper, scissors and other kindergarten "tools". Set aside a time each day for your child to spend time there reading or drawing. Once school starts this will become a time and place your child does his/her homework. Set a limit to the amount of TV your child watches. When possible, watch TV with him/her and talk about what you've seen.

### Step 4:

Enjoy reading together. Reading is a basis for education. Your child is not expected to be able to read when he/she enters kindergarten; however, you can help him/her develop a love of reading by making reading a regular, enjoyable activity. Take time to read with your child every day. Use reading to develop your child's imagination. Have him/her predict what will happen when reading a new story or create a new ending to a favorite tale. Use reading to stimulate your child's memory. When you finish reading a book talk about what happened.

### Step 5:

Explore the world around you. Help your child turn everyday activities into learning experiences so his/her imagination will soar and he/she will be better prepared for the world of kindergarten. Stimulate your child's mind. Explore the world around you and name the different things you see and experience. Count the number of blue cars you pass on the way to the grocery store. When grocery shopping, compare the color and size of fruits and vegetables. Show him/her that learning can be fun

**Chattanooga Head Start/Early Head Start Program**  
**Kindergarten Readiness Checklist**

<b>Reading Readiness</b>	<b>Motor Skills continued</b>
Remembers pictures from a printed page	Alternate feet walking downstairs
Repeats 6 to 8 word sentence	March
Pretends to read (has been read too often)	Stand on one foot 10 seconds
Identifies first name in writing	Walk backwards for 5 feet
Attempts to print own first name	Throw a ball
Answers questions about a short story	Paste pictures on paper
Looks at pictures and tells a story	Clap hands
Understands words are read left to right	Button clothes
Familiar with the letters of alphabet	Build with blocks
Knows some nursery rhymes	Complete simple 5 piece puzzle or less
Knows the meaning of simple words	Draw or color beyond a simple scribble
<b>Time</b>	Zip clothes
Understands day and night	Control pencil and crayon well
Knows age and birthday	Handle Scissors
<b>Recognizes Colors &amp; Shapes</b>	Cut and draw simple shapes
Recognizes primary colors	<b>Social-Emotional</b>
Recognizes triangle, circle, square & rectangle	Expresses self verbally
<b>Numbers</b>	Looks forward to going to school
Counts to 10	Recognizes authority
Can count objects	Shares with others
<b>Listening &amp; Sequencing</b>	Helps with classroom chores
Follows simple directions	Works independently
Pays attention	Identifies other children by name
Recognizes common sounds	Can take care of toilet needs independently
Retells a simple story in sequence	Cares for own belongings
Repeats a sequence of sounds	Dresses self
Repeats a sequence of numbers heard	Brushes teeth
<b>Size, Position &amp; Direction</b>	Can be away from parents for 4 to 6 hours
Big and little	Joins in conversation
Long and short	Carries a plate of food
Up and down	Maintains self-control
In and Out	Gets along well with others
Front and back	Talks easily
Over and under	Meets visitors without shyness
Hot and cold	Puts toys away
Empty and full	<b>Knows</b>
More and less	Body parts
Fast and slow	First and last name
Top and bottom	Parents names
<b>Motor Skills</b>	Home address
Run	Home phone number
Walk a straight line	When to use Kleenex
Jump	Own sex
Hop	

# The ABC's of Kindergarten Readiness

<b>Alphabet Knowledge</b>	Identifies some letters, uses some letter-sound associations, and may begin to recognize that letters make up words.
<b>Books</b>	Enjoys being read to, explores and discusses books, draws pictures related to story and talks about drawing.
<b>Concepts</b>	Knows concepts like over, under, though, etc.
<b>Draws</b>	Copies vertical and horizontal lines, cross, square, circle; draws a person with five parts.
<b>Environmental Print</b>	Recognizes signs, billboards, labels, business logos.
<b>Fine Motor Skills</b>	Grasps small objects correctly (ex. crayon, pencil, and paintbrush), strings beads, works puzzles, and cuts with scissors.
<b>Gross Motor Skills</b>	Climbs, walks, jumps, hops, kicks and catches a large ball, pedals a tricycle.
<b>Healthy Habits</b>	Practices personal hygiene routines; knows what foods are good for him/her.
<b>Independence</b>	Shows confidence, is not fearful, and cleans up after self.
<b>Jobs</b>	Understands that people work in jobs; names community helpers.
<b>Knowledge About The Community</b>	Discusses weather, plant and animal life, vehicles, and sounds heard in environment.
<b>Listening</b>	Follows two-step directions, responds when others speak, waits for own turn; is able to sit for up to 10 minutes.
<b>Money</b>	Identifies penny, nickel, and dollar bill; understands that money buys things.
<b>Numbers</b>	Understands that numbers represent quantity (quantities to 5); counts to 20.
<b>Oral Communication</b>	Asks for help when needed, uses appropriate volume; is coherent, uses complete sentences.
<b>Phonological Awareness</b>	Recognizes sounds in language, some sounds at beginning of words; nursery rhymes, rhyming words.
<b>Questions</b>	Answers "who," "what," "when," "where," "why," questions.
<b>Respect For Others</b>	Plays with and accepts others, their cultures, special needs, property; uses appropriate social and classroom behaviors; shows community responsibility, fairness.
<b>Self-help</b>	Cares for own things; eats with little assistance; manipulates zippers, buttons, and other fasteners.
<b>Technology</b>	Identifies technology used in daily life; shows positive attitude about computers, uses mouse appropriately.
<b>Unite</b>	Parents unite with school and support school by volunteering in child's class, joining PTA, and participating in Parent Education.
<b>Vocabulary</b>	Uses and understands many words; identifies and sorts pictures in categories.
<b>Writes</b>	Explores writing some upper- and lower-case letters, numerals, own name, exploratory writings (pretend writing during play) and/or invented spelling.
<b>Xylophone</b>	Appreciates music and performs rhythmic movements, uses instruments.
<b>Youthful Enthusiasm</b>	Shows awareness of the feelings of others, initiates interactions with peers.
<b>Zest for learning</b>	Explores new interests; seeks assistance in solving problems; shows pride in performance or products created; eager to learn new things.

# Roles of Parents in Head Start

<b>ROLES</b>	<b>RESPONSIBILITIES</b>
PARTICIPANT	Participate in Head Start planning activities, such as Parent Committee Meetings, classroom activities, educational, recreational, and social events.
LEARNER	Observe in classrooms, sign up for GED or college classes, sign up for ESL classes, attend workshops or conferences
CONTRIBUTOR	Volunteer in various aspects of the program; contribute ideas and thoughts for the program
SUPPORTER	Get other parents to participate; recruit families for the program services; recruit staff when needed
EVALUATOR	Participate in Self-Assessment process
PLANNER	Plan Parent Committee meetings or other events and activities
DECISION-MAKER	Participate in Policy Council
PRIME EDUCATOR	Work with your child to reinforce what he/she has learned in Head Start
CHILD ADVOCATE	Understand your child's needs and work to meet them; protect your child from bodily harm; know and protect your child's rights; be an advocate for your child and other children in the community
LEADER	Become involved in the community; use any leadership skills you have learned in or outside of Head Start



## **Mental Health Services**

Social emotional skills must be taught just as any other skill and that parents play a vital role in the development of their child's social emotional development. The Chattanooga Head Start/Early Head Start Program implements initiatives to educate parents on how to strengthen their child's social emotional development. The program also implements several different proactive tools in the classroom that will promote social emotional development. The Back Pack Connection Series, Second Step Curriculum, and the Center on the Social and Emotional Foundations of Learning (CSEFEL) curriculum are all proactive tools used in the classroom. The tools and initiatives utilized by the Head Start program focus on developing the following skills for children and parents.

### **Parents**

- How to Use positive Language to Improve Your Child's Behavior
- How to Help Your Child Understand and Label Emotions
- How to Plan Activities to Reduce Challenging Behavior

### **Children**

- Skills that promote working and playing with his/her classmates
- Skills that promote successfully functioning in a community or group
- Skills that teach how to take turns/share
- Skills that teach appropriate language to express thoughts, emotions, and feelings



### **Individualized Services**

The Chattanooga Head Start/Early Head Start Program addresses each child's needs on an individual basis. Our program understands that each child develops differently and that some children may need additional individualized support. The

Program offers the support of a Licensed Mental Health Professional that in partnership with the parent will develop a Positive Behavior Support plan for children who need additional support. A Positive Behavioral Support (PBS) is a comprehensive, research-based proactive approach to behavioral support that is developed to generate comprehensive change for students who are displaying unsafe or dangerous behaviors in the classroom or at home. Another additional service provided by the Chattanooga Head Start/Early Head Start Program when addressing social emotional development is the coordination and connection of outside community resources. Our program provides information and referrals to community agencies for children and families who may need specialized services

## 2022-2023 CHATTANOOGA HEAD START/EARLY HEAD START EXCLUSION/ILLNESS POLICY

*Parents should contact the child care program or school when their child is sick and describe the illness and symptoms. If the health care provider makes a specific diagnosis, (such as strep throat, conjunctivitis- pink eye or chicken pox) let the program staff know so other families can be alerted.*

There are four reasons to keep (exclude) sick children from child care or school:

1. The child does not feel well enough to participate comfortably in usual activities, (such as extreme signs of tiredness, unexplained irritability or persistent crying).
2. The child requires more care than program staff is able to provide without effecting the health and safety of the other children.
3. The illness is on the list of symptoms or illness for which exclusion is recommended.
4. If a child has Ringworm of the scalp (tinea capitis) and returns with a topical treatment (cream, shampoo) ordered by his/her healthcare provider, child may return to school with proof that treatment has been started. If lesion does not improve after topical treatment has been administered for the time ordered, child may have to return to his/her healthcare provider and return **only** when oral treatment has been ordered and proof that treatment has been started.

Children with the following symptoms or illness should be kept (excluded) from child care or school: \*If more than one condition is observed then child must have Doctor Statement to return to school.

Condition	Symptom	Teacher Action	Teacher/Parent Return Responsibility When Child May Return
Children with the following symptoms or illness should be kept (excluded) from child care or school. *If more than one condition is observed then child must have a Dr. statement to return to school.			
Fever	Temperature 100 or above. Axillary (under the arm)	Notify parent and send child home.	Child is fever free for 24 hours without medication – no Dr. statement needed. If sent home more than twice must have Dr. Statement.
Diarrhea	An increased number of abnormally loose stools in the past 24 hours, or fever in conjunction with one abnormally loose stool.	Notify parent and send child home.	Child is symptom free for 24 hours without medication – no Dr. statement needed.
Severe or Uncontrolled coughing	Child gets red or blue in the face; makes high pitched croupy or whooping sound after he coughs; with or without fever	Notify parent and send child home. Child should be seen by Dr. as quickly as possible.	With Dr. statement
Difficult rapid breathing	May or may not have a fever, especially important in an infant under 6 months of age.	Notify parent and send child home. Child should be seen by a Dr. As quickly as possible.	With Dr. Statement
Yellowish skin or eyes, stool gray or white, urine tea colored	May or may not have a fever.	Notify parent and send child home.	With Dr. statement

Condition	Symptom	Teacher Action	When Child May Return
Pinkeye	Tears, redness of eyelid lining, irritation, followed by swelling or discharge of pus.	Notify parent and send child home	24 hours after treatment and/or with Doctor statement.
Infected skin patches	Crusty, bright yellow, dry, or gummy areas of skin.	Notify parent and send child home - may return after on antibiotic for 24 hours.	24 hours after treatment with Doctor statement.
Sore throat or trouble swallowing	If child has a fever or swollen glands	Notify parent and send child home.	With Dr. Statement.
	If no fever-symptoms persist 48 to 72 hours see Dr.	Notify parent to observe.	Follow Dr. recommendations. No Dr. statement needed.
Unexplained spots or rashes	Unexplained spots or rashes.	Notify parent and send child home.	With Doctor statement.
Ringworm	Skin Lesions: ring shaped, raised border of lesion, usually intense itching	Send child home if the area is oozing; send child home if the area is larger than a Band-Aid can cover; If there is no improvement in 5-7 days, child <b>must</b> see a doctor.	Parent may use over-the-counter meds; Must bring proof of use to center (i.e. box top of medication used for treatment).
Ringworm of the scalp	Scalp: Pink or gray patches with raised borders/ itchy scaly rash/ small patches of baldness/ white dusting -all can lead to hair loss.	Send child home if the area is oozing; send child home if the area is larger than a band-aid can cover; If there is no improvement in 5-7 days, child <b>must</b> see a doctor.	Needs Doctor statement and proof of treatment
Head Lice	Live lice noted on the scalp or hair.	Notify parent and send child home. Provide parent information on treatment of head lice.	Proof of lice treatment (i.e. box top/bottle/receipt of purchase). Parent will continue to work on nit removal.
Scabies	Rash and intense itching on the body may be scabies.	Notify parent and send child home.	Needs Doctor statement.
Vomiting	Two or more episodes. If child has fever that persists more than 36 hours must have Doctor's statement and be symptom-free.	Notify parent and send child home. Check with your doctor.	No vomiting for 24 hours without medicine.
Nose drainage	Large amount of yellow-green nasal discharge for greater than 7 days or cold lasting longer than 10 days.	Notify parent and send child home.	With Doctor statement
Appearance & Behavior	Child looks or acts differently, unusually tired, pale, no appetite, confused, irritable.	Notify parent and send child home.	When symptom free or with Doctor statement.

**COVID-19 EXCLUSION POLICY**  
**CITY OF CHATTANOOGA HEAD START/EARLY HEAD START**  
**(For the Parents) (Revised 7/11/22)**

Situation	Return to School	Required Documentation	Comments
Covid-19 symptoms and no testing (No exposure)	The individual has completed isolation for 10 days AND had resolution of fever (without fever-reducing medications) AND improvement in COVID-19 symptoms for at least 24 hours	<u>No medical evaluation or proof of a negative Covid-19 test is required.</u>	
Covid-19 symptoms AND negative Covid-19 test after symptom onset (No exposure)	The individual may return to school if fever has resolved without fever-reducing medications and other symptoms have been improving for at least 24 hours	Medical evaluation and/or proof of a negative test is required.	
Covid-19 symptoms with confirmed alternative diagnosis	If an individual who was ill with symptoms of COVID-19 have written documentation from their medical provider confirming their illness was not due to COVID-19 because another explanation was identified (alternative diagnosis)	Proof of alternative diagnosis from a medical provider.	Examples of acceptable alternative diagnoses would include fever due to urinary tract infection, strep throat confirmed by a positive strep test, rash from poison ivy, etc. Diagnoses of respiratory and viral conditions such as upper respiratory tract infection (URI), pneumonia, pharyngitis without positive strep test, seasonal allergies, allergic rhinitis, viral illness, etc. DOES NOT exclude the diagnosis of COVID-19 and should not be considered adequate to authorize return to school until another criterion is met or a negative test for Covid-19 is provided.
Close contact (within 6 ft for a total of at least 15 minutes within 24 hrs, either consecutive or cumulative) (Exposure)	The individual has remained asymptomatic and has completed a minimum of 10 days in quarantine.	<u>No medical evaluation or proof of a negative Covid-19 test is required.</u>	

Positive Covid-19 test (with or without symptoms)	After completing isolation of minimum of 10 days and have resolution of fever (without fever-reducing medication) and improvement of symptoms for at least 24 hours.	<u>No medical evaluation or proof of a negative Covid-19 test is required.</u>	
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- Clearance to Return with a negative COVID-19 test: If the household provides a copy of a negative PCR (or other molecular) test result for the symptomatic individual(s) showing the name, date of test and date of result, then the household will be cleared to return and the ten (10) day exclusion period will not apply. Antigen tests (rapid diagnostic test) will NOT be accepted for this clearance option.
- Clearance to Return from a Medical Provider: If a medical provider assesses the symptomatic individual and provides acceptable clearance to return, then the individual will be cleared to return and the ten (10) day exclusion period will not apply. Clearance to return will be acceptable if a medical provider confirms in writing that: a) the individual has tested negative and can return when fever-free for at least 24 hours (without use of fever-reducers) and symptoms are resolving, b) there is an alternate diagnosis causing the COVID-like symptoms and the individual has tested positive for a confirmed non-Covid microbiological diagnosis, or negative for COVID-19 using a molecular or antigen test for SARS- CoV-2, or c) there is an alternate diagnosis causing the COVID-like symptoms. Patients presenting with symptoms of an upper respiratory illness, or ear, nose or throat infection, must provide clearance to return pursuant to options a or b above, and option c will not be sufficient. Any unspecified diagnosis is presumed to be COVID-19 and the exclusion will continue.
- Clearance to return after quarantine period: If an individual (child) has COVID-like symptoms, and the parent refuses to comply with the previous clearances to return, then the parent must keep the individual home for a 10 day quarantine period.
- An individual (child) who tested positive for COVID-19 with a viral test within the previous 90 days and has subsequently recovered and remains without COVID-19 symptoms does not need to be quarantined. However, close contacts with prior COVID-19 infection in the previous 90 days should:
- Strict supervision and encouragement by the teacher to wear a mask indoors.
- Monitor for COVID-19 symptoms and isolate immediately if symptoms develop.
- Consult with a healthcare professional for testing recommendations if new symptoms develop.
- All Clearances to Return must be reviewed and approved by the Lead Teachers in the centers, Family Support Supervisors, the nurse or the Health Coordinator.

COVID Resources:

- <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/child-care-guidance.html#mask-use>
- [https://eclkc.ohs.acf.hhs.gov/physical-health/article/face-masks-head-start-programs?utm\\_medium=email&utm\\_campaign=Navigating%20Conversations%20About%20the%20COVID-19%20Vaccine%20and%20Mask%20Requirements&utm\\_content=Navigating%20Conversations%20About%20the%20COVID-19%20Vaccine%20and%20Mask%20Requirements+CID\\_51cc33d4318e02b7897b66608fa431da&utm\\_source=CM%20Eblast&utm\\_term=Face%20Masks%20in%20Head%20Start%20Programs&cid=51cc33d4318e02b7897b66608fa431da](https://eclkc.ohs.acf.hhs.gov/physical-health/article/face-masks-head-start-programs?utm_medium=email&utm_campaign=Navigating%20Conversations%20About%20the%20COVID-19%20Vaccine%20and%20Mask%20Requirements&utm_content=Navigating%20Conversations%20About%20the%20COVID-19%20Vaccine%20and%20Mask%20Requirements+CID_51cc33d4318e02b7897b66608fa431da&utm_source=CM%20Eblast&utm_term=Face%20Masks%20in%20Head%20Start%20Programs&cid=51cc33d4318e02b7897b66608fa431da)

## Health & Safety

- Children shall be checked upon arrival and observed for signs of communicable disease during the day.
- Symptomatic children shall be removed from the group until parents are contacted and health issues are resolved.
- At least one staff with certification in first aid and one certified in CPR on duty at all times.
- The agency, in consultation with appropriate local authorities, shall develop a written plan to protect children in the event of disaster.
- All home/work contact numbers for parents shall be readily available to all staff.
- Impetigo and diagnosed strep shall be treated appropriately for 24 hours prior to readmission to the center.
- Children diagnosed with scabies or lice shall have proof of treatment and be free of live lice prior to readmission.
- Serious injuries or signs of serious illness shall be reported to the parent immediately to arrange for emergency treatment.
- Accidents, injuries, and every sign of illness shall be reported, or a reasonable attempt made to report, to the parent as soon as possible, but no later than the child's release to the parent or authorized representative.
- All medications, prescribed and non-prescribed, shall be received from the parent by a designated staff person or management level staff person.
- Medication shall never be handled by children or administered in bottles or infant feeders unless authorized by a physician.
- All medications shall be inaccessible to children.
- Unused medication shall be returned to the parent.
- Smoking is not permitted in the presence of children, view of children or in the perimeter of HS/EHS buildings.
- The use of alcoholic beverages is not on the premises of HS/EHS buildings and grounds.
- Firearms shall not be on the premises of a child care agency, in any vehicle used to transport children or in the presence of a child.
- Staff's personal belongings (purses, backpacks, coats, etc.) shall be inaccessible to children at all times.
- For the protection of children and adults, the Centers for Disease Control guidelines for handwashing and diapering procedures shall be followed.
- If older children are enrolled who lack independent toileting abilities, rules regarding diapering of preschool children shall apply; they shall be changed in a location designated for that purpose and which provides privacy from other children and adults.
- In order to avoid the spread of airborne diseases children shall be positioned on mats in a face to feet alternating pattern during naptime.
- All staff, substitute staff, volunteers are required to immediately report any reasonable suspicion of child abuse or neglect.

## Health Services

### What are Health Services in Head Start?

Health and physical development are crucial for early learning opportunities that require children to fully explore and experience their environment. Head Start programs provide safe and healthy learning experiences indoors and outdoors. All children receive health screenings and nutritious meals, and programs connect families with medical, dental, and mental health services to ensure children are receiving the care and attention they need.

- **Dental Services:** We recognize that it can be difficult to find pediatric dentists for very young children. Nevertheless, dental care is very important for our students so we ensure every child has at least one dental check per year. With the permission of the parents, we offer dental screening for all our children. We then report any findings to parents and assist with any necessary follow-up appointments. If a family simply needs a dental home, we can provide them with a current list of pediatric dentists in our community and, if they need, we will help them with their initial appointments. We also ensure that teachers assist and model tooth brushing at least once a day in the classroom.
- **Height and Weight Screenings:** We perform heights and weights on each child in order to measure size and follow growth patterns. If parents have any concerns, we ensure they are referred to service best suited for their needs.
- **Nutrition Services:** We serve every student in our program well-balanced, nutritious meals while they are in our care. All children are served breakfast and lunch. Many of our students also will enjoy an afternoon snack. Not only will our students eat healthfully during the day, they will also learn about healthy foods and practice healthy options as part of the Color Me Healthy curriculum used in our classrooms. Our students benefit from classroom food activities that spark curiosity, learning, and healthy eating habits.

- **Immunizations and Physicals:** We realize that it can be difficult to keep up with the recommended immunization and physical schedule. Our health team along with your Family Support Advocate, will help parents keep their children up to date and are here to answer any questions they may have. We maintain a current list of pediatricians and can help parents find the best medical home for their children.

## **Health Services Advisory Committee (HSAC)**

### **What is a Health Services Advisory Committee?**

As required by the Head Start Program Performance Standards, the Health Services Advisory Committee (HSAC) is an advisory group that brings together staff, parents, and local health care providers to talk about the planning, operation, and evaluation of the health services in each Head Start program. Each HSAC determines how to best meet the needs of children and families in its community.

### **Why Should You Join Our HSAC?**

As a Head Start parent, joining your local HSAC allows your voice to be heard on the issues that are important to you in the area of health, including nutrition, medical, mental and dental care. As a local health services provider, joining your local HSAC is a way of connecting with the members of your community to provide the best and most appropriate services to your clients. The HSAC provides you with a forum to communicate your views and concerns about issues that affect the services you provide.

\*Emergency policies and plans are individualized for each center. Check your child's classroom for posted information. (fire, tornado, emergency preparedness)

## CHATTANOOGA HEAD START/ EARLY HEAD START



### Safe Parking Lots, Safe Kids, Safe Families

1. Always park in a designated parking space and within the lines.
2. Double parking is not allowed, it disrupts the smooth and safe flow of traffic.
3. Always slow down when entering the parking lot and watch for families and vehicles exiting the lot.
4. Ensure that your vehicle is turned off and leave no child in the car unattended.
5. Children are growing and learning language, let's make sure that when they are on our premises they only hear appropriate language.
6. Always hold your child's hand in the parking lot.
7. Everybody loves music, but when entering the parking lot please turn your music down.
8. Always be courteous and respectful to others, we are in this together.



## Active Supervision

**Active supervision** is a set of strategies for supervising infants, toddlers, and preschool children in classrooms, on playgrounds, during transitions that happen throughout the day.

### **Develop a regular routine, for drop-off and pick-up times**

- Hold your child's hand
- Talk about safety in the parking lot, holding your hand, watching for cars
- Be alert and communicate potential child wanderings as needed to the center director.
- Anticipate your child's behavior and give your child any needed additional support, especially at the beginning of the school year.

**\*\*Children who wander off or lag behind are more likely to be left unsupervised.**

**\*\*If you are not holding your child's hand in the parking lot or in the building a staff member may remind you.**

**Transitions** are often the most challenging times for staff to supervise children. To prevent children from being supervised our teachers plan specific strategies for managing transitions throughout the day.

### **To prevent children from being left unsupervised:**

- Explain to your child why it is important to stay with their teacher and their group throughout the day.

### **Reaffirm to children what teachers expect during transitions**

- Listen to your teachers
- Stay with your group
- Hold hands

# Child Pedestrian Safety

Children are particularly vulnerable to pedestrian death because they are exposed to traffic threats that exceed their cognitive, developmental, behavioral, physical and sensory abilities. This is worsened by the fact that parents often overestimate their children's pedestrian skills.

## WHAT PARENTS NEED TO KNOW

- Parents often think their children are able to handle traffic safely by themselves before they are actually ready.
- Children are impulsive and have difficulty judging speed, spatial relations, and distance. Auditory and visual acuity, depth perception and proper scanning ability develop gradually and do not fully mature until at least age 10.
- Boys are much more likely than girls to be injured or killed in traffic, on average boys take more risks.
- Bicycles are vehicles. Children should not ride bikes in the road until they fully understand traffic rules and show they can follow them.
- Children often act before thinking and may not do what parents or drivers expect.
- Children assume that if they see the driver, the driver sees them.
- Children can't judge speed and they think cars can stop instantly.
- Children are shorter than adults and can't see over cars, bushes, and other objects.
- Many children are hit by cars when running into the street.
- Hold your child's hand so she/he doesn't run into the street.
- Nearly one-third of children killed by motor vehicles are on foot. They are hit by cars most often when playing near home. They tend to run into the street in the middle of the block, where drivers don't expect them.

## WHAT ARE KIDS THINKING

### Fantasy vs. Reality

- Until approximately age 7, children don't always distinguish between fantasy and reality. For example, when they are in a crosswalk, they may believe they are completely safe.

### Visual Skills

- A child's peripheral vision is only 2/3rds that of an adult. Peripheral vision, along with depth perception and the ability to judge speed and distance do not fully develop until at least age 10.

### Hearing

- Children can't always locate the source of a sound. They may hear a car, but not know where it is coming from.

### Judgment

- The ability to anticipate hazards, understand cause and effect, and think about more than one thing at a time are skills that develop with age and experience.

## LEARNING TO BE TRAFFIC SMART

Preschool children are learning to become independent. They enjoy walking, riding bikes, and playing outside. They don't have the judgment to cope with traffic by themselves yet, but they can begin to understand safety rules.

This is why the rules below are vital to keeping your child safe.

- ♥ Do not cross the street alone if you're younger than 10 years old.
- ♥ Do stop at the curb before crossing the street.
- ♥ Don't run, across the street, walk.
- ♥ Cross at least 10 feet in front of a school bus.
- ♥ Do walk facing traffic.
- ♥ Make sure drivers see you before crossing in front of them.
- ♥ Do look left, right, and left again before crossing.
- ♥ Wear white clothing or reflectors when walking at night.
- ♥ Do cross at corners, using traffic signals and crosswalks.
- ♥ Do not play in driveways, streets, parking lots or by the street.

For more information, contact [www.imsafe.com](http://www.imsafe.com) 270A © 1999-2003  
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# School Bus Safety

## Rules for getting on and off the school bus.

### Getting on the school bus

- When waiting for the bus, stay away from traffic and avoid roughhousing or other behavior that can lead to carelessness. Line up away from the street or road as the school bus approaches.
- Wait until the bus has stopped and the door opens before stepping onto the roadway.
- Use the hand rail when stepping onto the bus.

### Behavior on the bus

- When on the bus, find a seat and sit down. Loud talking or other noise can distract the bus driver and is not allowed.
- Never put head, arms or hands out of the window.
- Keep aisles clear – coats or jackets can be tripping hazards and can block the way in an emergency.
- At your stop, wait for the bus to stop completely before getting up from your seat. Then, walk to the front door and exit, using the hand rail.

### Getting off the school bus

- Make sure that the driver can see you.
- Wait for a signal from the driver before beginning to cross.
- When the driver signals, walk across the road, keeping an eye out for sudden traffic changes.
- Do not cross the center line of the road until the driver has signaled that it is safe for you to begin walking.
- Stay away from the bus's rear wheels at all times.

### Correct way to cross the street

- Children should always stop at the curb or the edge of the road and look left, then right, and then left again before crossing.
- They should continue looking in this manner until they are safely across.
- If students' vision is blocked by a parked car or other obstacle, they should move out to where drivers can see them and they can see other vehicles -- then stop, and look left-right-left again.

## **Booster Seats---**

### **What Caregivers, Policymakers & Kids Need to Know**

By Joseph M. Colella, Traffic Safety Projects

*Past generations of child passengers would often lie across back seats, sit in floor wells, lie across cargo areas, or even ride unbuckled in front seats. Kids who were buckled up would usually be in lap-only seatbelts—and perhaps sitting on encyclopedias or telephone books to see out the window. Is it any wonder that many of these children—now the parents or grandparents of kids who have outgrown more accepted car seats with harnesses—don't understand the value of boosters?*

#### **THE FACTS**

A child is not fully protected by a seat belt until it fits correctly on the strong, bony parts of the body. It's not intuitive that a booster seat – easily viewed as merely a platform or shell – raises the child and guides the lap and shoulder belts to their correct positions. Research on real-world crashes proves that booster use prevents injuries to the abdomen, internal organs, head, neck, spine and even lower extremities. Data also confirm that:

- Fewer than 20% of children ages 4 through 7 use boosters.
- Twenty-two percent of 4- to 7-year-old children ride completely unrestrained.
- The likelihood of injury is 59% lower for children ages 4 through 7 using belt positioning boosters than it is for those using seat belts alone.
- Premature graduation of younger children to seat belts yields a 350% risk of significant injury and a 400% risk of head injury, when compared to appropriately restrained children.

#### **CORRECT FIT**

Correct seat belt fit is likely to occur between ages 8 and 11, and depends on both a child's body proportions and the specific vehicle's design. To see if the belts fit correctly:

- Ask the child to sit all the way back on the car, truck or van seat.
- Buckle and adjust the lap and shoulder belt for a snug fit.
- Assess whether the child's knees bend naturally over the seat edge, the lap belt is snug across the leg or hip bones, and the shoulder belt lies against the chest and shoulder.
- If the seat belt does not fit correctly, or the fit cannot be maintained for the entire ride, a booster seat is needed.

#### **AWARENESS**

This information needs to reach not only caregivers, policy-makers and community supporters, but the children themselves. Children between ages 4 and 8 have increasing influence over how and where they ride, so they need to understand the value of booster seats and how to assess seat belt fit in each specific vehicle or seating position.

## THE BEST SAFETY SEAT

- The best protection for your child requires a coordinated effort—using a safety seat that fits your vehicle, fits your child, and that you will use correctly every time.
- Second-hand or old safety seats may not be as safe.

**Read the manufacturer's instructions** and check for an expiration date. Carefully inspect seats that are more than five years old. Destroy seats that are more than ten years old. Do not purchase a used seat. Contact a CPS Technician or Fitting Station to learn about safety seat programs in your area (see [www.nhtsa.dot.gov](http://www.nhtsa.dot.gov)).

## FITTING YOUR CHILD

- **Read and follow the car seat manufacturer's instructions.**
- For babies, the safest seat is a rear-facing, semi-reclined seat (no more than 45°) until the child is at least one-year old AND weighs 20-22 lbs. Keeping a child rear-facing up to 30-35 lbs. is highly recommended if your child's safety seat instructions allow it.
- Children can ride in a forward-facing seat after one year and 20-22 lbs., and up to 40-80 lbs. (depending on the model).
- Children who exceed the limits of forward-facing seats (40-80 lbs.) are safest in a booster seat, until they are 4'9" tall and vehicle's safety belts fit correctly (usually between 8-12 years old).

## FITTING YOUR VEHICLE

- **Check your vehicle owner's manual and any tags on the safety belts in your car before purchasing a car safety seat.**
- Keep your receipt. You can check the fit of the safety seat in the parking lot and return it for another one if the fit isn't right. If you buy a convertible seat, check the fit both rear- and forward-facing.
- The rear seats are the safest place for children. Never install a safety seat in front of an air bag.
- Install your rear- or forward-facing car seat snugly enough so it moves less than 1 inch to the sides and toward the front of the vehicle when you pull on it. **Read the safety seat instructions and the vehicle owner's manual for correct installation information.**
- There are many different types of safety belt systems. The system in your vehicle may require a locking clip or a belt-shortening clip to secure the safety seat. **Check the vehicle manufacturer's instructions or contact a CPS Technician for more information.**

## A CAR IS NOT A PLAYGROUND

- Teach children not to play in or around a parked car. A vehicle is not a place to hide.
- Keep your vehicles locked. Make sure your children do not have access to your keys.
- Never leave children unsupervised in or around a vehicle, even for a quick errand. See [www.KidsAndCars.org](http://www.KidsAndCars.org).

## Anti-Bias Approach

Chattanooga Head Start/Early Head Start Program implements an anti-bias curriculum approach to empower children to value and respect the likenesses and differences among races, boys and girls and disabled children. During the seasons a variety of traditional religious and secular celebrations are planned by neighborhoods and the communities in which our children and families live. Often as adults we want our children to share in our fond memories of trick-or-treating, family dinners on Thanksgiving, and gifts left by Santa Claus on Christmas morning, but what we must remember is that the classroom is not an appropriate place to celebrate religious or secular holidays. Every child enrolled in the Head Start/Early Head Start Program has the right to attend their classroom every day and gain the skills needed to transition into kindergarten.

What we must remember:

- Our program serves a diverse population. Within each classroom there are hundreds of celebrations and holidays recognized by the various cultures, ethnic groups, and races. We cannot celebrate them all.
- Within each classroom, we implement activities that maintain each child's identity and dignity while they are acquiring developmentally appropriate skills. A child's identity is directly related to their religion, family traditions and the holidays that are celebrated in their families and communities.
- A curriculum driven by the holidays reflects the traditions and values of the specific adults; not the needs and interests of children and not the cultural diversity that exists among families in the Head Start/Early Head Start Program.
- The program curriculum will not celebrate or implement activities based on any holiday because it always involves excluding one or more children due to their religious or cultural beliefs. Excluding children affects their self-esteem and attitude toward school. Providing activities that are culturally sensitive promotes the healthy development of each child's self-esteem.
- No parent should have to make the decision to keep their child out of school because of a celebration that conflicts with their beliefs or values.
- The program is committed to fairness and implements alternative activities around traditional holidays that are respectful and meaningful to the development of the children in all classrooms.

The program is devoted to ensure every Head Start/Early Head Start child is socially competent and possesses the necessary skills in their physical and cognitive development to succeed in school and life. All activities that are planned and implemented should be based on the interests and educational needs of the children enrolled in each individual classroom. Individual plans for each child focus on their physical development (fine and gross motor), cognitive development (math, science, problem solving, logical thinking, representation and symbolic thinking), social emotional development (sense of self, responsibility for self and others, and pro-social behavior), and language development (listening and speaking, reading and writing).

## **The Head Start Multicultural Principles**

- ♥ Every individual is rooted in culture.
- ♥ The cultural groups represented in the communities and families of each Head Start program are the primary sources for culturally relevant programming.
- ♥ Culturally relevant and diverse programming requires learning accurate information about the cultures of different groups and discarding stereotypes.
- ♥ Addressing cultural relevance in making curriculum choices and adaptations is a necessary, developmentally appropriate practice.
- ♥ Every individual has the right to maintain his or her own identity while acquiring the skills required to function in our diverse society.
- ♥ Effective programs for children who speak languages other than English require continued development of the first language while the acquisition of English is facilitated.
- ♥ Culturally relevant programming requires staff who both reflect and are responsive to the community and families served.
- ♥ Multicultural programming for children enables children to develop an awareness of, respect for, and appreciation of individual cultural differences.
- ♥ Culturally relevant and diverse programming examines and challenges institutional and personal biases.
- ♥ Culturally relevant and diverse programming and practices are incorporated in all systems and services and are beneficial to all adults and children.

## Parents Are First Teachers

# Learning About Learning

The following are four important areas of learning that are heavily influenced by parents and other involved adults:

### 1. Skills

All preschool children can acquire the following skills:

■ Social skills (getting along with others, being in a group) ■ Communication skills (expressing oneself, understanding others) ■ Motor skills (body control, physical ability) ■ Thinking skills (problem solving, memory, comparing and contrasting)

As children become competent in these four skill groups, they become ready to acquire academic (school) skills. It's important to remember that thinking skills are not the same as academic skills. Many parents want their young children to get a head start on academic skills such as reading and math before they go to kindergarten. There is no evidence that children who are taught to read and do math early are better at it over time. In fact, what often happens is that when children work too soon and too much on academic skills, they can lose their curiosity and motivation.

Therefore, just because a child can learn a skill at a young age doesn't mean he or she should learn it. Earlier is not better in many areas. The best measure of whether children are ready to learn new skills is their enthusiasm, motivation, and persistence to learn.

### 2. Knowledge

Young children, through their experiences with people and objects, acquire a great deal of knowledge about the world. Children learn very early to name objects and to understand their functions (for example, keys open doors and start cars, dogs bark, cat's meow). Children use this background knowledge to approach new learning experiences and to acquire more knowledge. Families are important in expanding a child's understanding of the world.

Many people disagree about what knowledge and skills children should learn during the pre-school years. A good rule of thumb for judging what is most appropriate for young children is to ask: *What knowledge helps them make better sense of their own experiences and environment?*

When children are presented with knowledge that is "over their heads," they may become confused or they may learn to hide their questions and doubts in order to appear as though they know more than they do.

### 3. Attitudes about Learning

Attitudes about learning are often adopted from role models, particularly parents and other primary caregivers. The child observes how adults handle learning tasks or approach opportunities to learn, and imitates this behavior.

The habits of learning a person acquires as a child may well remain for a lifetime. Therefore, parents play a critical role in modeling effective learning habits.

Adults also play a key role in making opportunities available for children to practice effective learning habits, such as:

### 4. Feelings

Learned feelings are the emotional associations children make with learning. Parents cannot teach feelings to a child. However, their attitudes and behaviors toward the child can strongly affect the feelings that a child acquires. Children who have positive feelings about learning obviously are more willing to take the risks that learning requires. A child's feelings about himself or herself also affect the ability to learn. For learning to happen, a child needs to:

■ Feel comfortable with some people outside the immediate family and away from home. ■ Feel confident. ■ Feel generally accepted by other children.

Based on the work of Lilian Katz, professor of early childhood education at the University of Illinois  
*Parents Are First Teachers*

# 10 Things Every Parent Should Know About Play

## National Association for the Education of Young Children

### 1. Children learn through their play.

Don't underestimate the value of play. Children learn and develop:

- cognitive skills – like math and problem solving in a pretend grocery store
- physical abilities – like balancing blocks and running on the playground
- new vocabulary – like the words they need to play with toy dinosaurs
- social skills – like playing together in a pretend car wash
- literacy skills – like creating a menu for a pretend restaurant

### 2. Play is healthy.

Play helps children grow strong and healthy. It also counteracts obesity issues facing many children today.

### 3. Play reduces stress.

Play helps your children grow emotionally. It is joyful and provides an outlet for anxiety and stress.

### 4. Play is more than meets the eye.

Play is simple and complex. There are many types of play: symbolic, socio dramatic, functional, and games with rules—to name just a few. Researchers study play's many aspects: how children learn through play, how outdoor play impacts children's health, the effects of screen time on play, to the need for recess in the school day.

### 5. Make time for play.

You are the biggest supporters of your children's learning. You can make sure they have time to play as possible during the day to promote cognitive, language, physical, social, and emotional development.

### 6. Play and learning go hand-in-hand.

They are not separate activities. They are intertwined. Think about them as a science lecture with a lab. Play is the child's lab.

### 7. Play outside.

Remember your own outdoor experiences of building forts, playing on the beach, sledding in the winter, or playing with other children in the neighborhood. Make sure your children create outdoor memories too.

### 8. There's a lot to learn about play.

There's a lot written on children and play. Here are some [NAEYC articles and books about play](#). David Elkind's *The Power of Play* (Da Capo, 2007 reprint) is also a great resource.

### 9. Trust your own playful instincts.

Remember as a child how play just came naturally? Give your children time for play and see all that they are capable of when given the opportunity.

### 10. Play is a child's context for learning.

Children practice and reinforce their learning in multiple areas during play. It gives them a place and a time for learning that cannot be achieved through completing a worksheet. For example, in playing restaurant, children write and draw menus, set prices, take orders, and make out checks. Play provides rich learning opportunities and leads to children's success and self-esteem.

Written By: Laurel Bongiorno

**TENNESSEE DEPARTMENT  
OF  
HUMAN SERVICES  
SUMMARY OF LICENSING  
REQUIREMENTS  
FOR  
CHILD CARE CENTERS**

# TENNESSEE DEPARTMENT OF HUMAN SERVICES

This summary is a guide for parents of children in licensed child care agencies. It outlines some of the requirements child care agencies must meet in order to be licensed. The Department of Human Services licenses child care agencies with five (5) or more unrelated children operating for three (3) or more hours per day unless exempt. The purpose of licensing is to help maintain healthy, safe, and developmentally appropriate environments for your child. Questions about these requirements or concerns about an agency's compliance should be referred to the local DHS office. You may ask your agency to see the complete set of licensure rules for child care agencies or you can access the rules through the Department's website at: <https://www.tn.gov/humanservices/for-families/child-care-services.html>

## Ownership, Organization, and Administration

- General liability, automobile liability and medical payment insurance coverage shall be maintained on the operations of the child care agency's facilities and vehicles.
- Enrollment of children less than six (6) weeks of age is prohibited.
- Children shall not be in care for more than twelve (12) hours in a twenty-four (24) hour period except in special circumstances.
- Written documentation that the parent performed an on-site visit to the agency to review the agency's facility and parent engagement strategies prior to enrolling the child (not required for children of homeless families).
- Child care agencies shall establish a drug testing policy for all staff having direct contact with children. • A copy of the agency's policies, procedures, and the Department's Summary of Licensing Requirements shall be supplied to the parent upon admission of the child.
- Parents shall be permitted to see the professional credential(s) of staff upon request.
- During operating hours, parents shall be permitted immediate access to their children, unless legal documents prohibit or restrict access.

## • Children's Records

- ¶ Written consent for emergency medical care.
- ¶ Written plan stating to whom the child shall be released.
- ¶ Written transportation agreement between parent and the center regarding daily transportation.
- ¶ Daily attendance that includes time in and time out for each child.
- ¶ Prior written permission of parent for each off-site activity.
- The agency or agency staff shall not disclose or knowingly permit the use by other persons of any information concerning a child or family except as required by law.
- The child care agency's current license and agency report card shall be posted near the main entrance.
- Written expulsion policy clearly shared with parents and staff.

## Staff

- Family and group home child care agencies must notify parents in advance of the person in charge during primary educator's absence.
  - A staff member shall be designated in charge in the absence of the primary educator / director and the name of the person in authority shall be posted.
  - At all times, one (1) adult educator with at least a high school diploma shall be on the premises.
  - Pre-service training for all staff prior to assuming duties.
  - Substitutes providing services for more than 36 hours in a calendar year shall meet background check requirements and have a physical exam prior to beginning duties.
  - Volunteers cannot be counted to meet the adult: child ratios and shall never be left alone with children.
- ## Criminal Background Check
- Criminal background checks are required for all staff at least every five (5) years.

## Record Keeping

- A record for each child shall be maintained within the child care agency.
- Written plan of action must be endorsed by a physician for a child with life threatening allergies.
- Parent must provide written consent for emergency medical care/treatment.
- Written statement must be on file that lists to whom the child shall be released
- Written transportation agreement between parent and the child care agency regarding daily transportation.
- Maintain daily attendance records that include the full name and time in and time out for each child.
- Written permission slips from the parent for each field trip prior to the activity.

- Each child shall have a written transition plan for moving from one age group to another.
- The records of any child who is five (5) years old in an agency which lacks approved kindergarten status shall include a signed acknowledgment by the child's parents that recognizes that the child's attendance does not satisfy the mandatory kindergarten prerequisite for the child's enrollment in first grade.
- Children of homeless families and/or children in state custody may receive care for up to sixty (60) days prior to providing documentation of immunizations and well-child examinations.

**Incident Reporting**

- Incidents, accidents, injuries and signs of illness shall be reported to the parent no later than the child's release on the date of occurrence.
- Incidents, accidents, injuries and signs of serious illness to children shall be documented immediately and must include: child's name and date of birth, name of person writing report, date & time of occurrence and completion of incident report, description of incident and circumstances, and actions taken by agency.
- The child care agency shall notify the Department of all serious incidents the same day of the incident by contacting the Complaint Hotline at 1-800-462-8261.

**Duty to Report Child Abuse and Neglect**

- Every operator, owner, licensee, director, primary educator or staff member of, or substitute staff member or volunteer in, a child care agency licensed by the Department of Human Services is individually responsible and required to immediately report any reasonable suspicion of child abuse or neglect to either the Department of Children's Services and/or local law enforcement or the judge of the juvenile court in the county of the child's residence, pursuant to T.C.A. §§ 37-1-403 and 37-1-605.
- All child care agency staff shall receive annual training regarding proper procedures to report child abuse and neglect.

**Supervision**

- All areas of the building and grounds shall be visually inspected after closing the child care agency for the day to ensure no children have been unintentionally left in any part of the child care agency's facilities.
- Children shall be released to only the child's parent, or other person authorized by the parent in accordance with child care agency's policies.
- Child care agencies shall maintain a daily sign-in and sign-out sheet that includes each child's printed full name, date, time of entry, time of departure and space for the printed name and signature of parent or authorized representative.
- Educators providing supervision to children during meal and snack times are prohibited from performing activities/duties unrelated to food service.
- Child care agencies shall develop, follow and post a written mealtime supervision plan.
- Child care agencies shall develop and follow a written playground supervision plan.
- During field trips, the adult:child ratios shall be doubled and attendance shall be checked upon departure and arrival at each destination and at the beginning and end of each activity (in family and group homes the adult:child ratio shall be increased by one (1) during field trips).
- When children are engaged in activities in or near a body of water, the following requirements shall be met:

**Age Group Adult:Child Ratio**

6 weeks–12 months	1:1	
13 months – 35months	1:2	
Three (3) years	1:4	
Four (4) years	1:6	
Five (5) years	1:8	
School-age (Kindergarten and above)		1:10

- One (1) adult present shall have a current certificate in advanced aquatics lifesaving skills and shall supervise above the level of the swimmers.
- Safe sleep supervision procedures must be followed to prevent suffocation and deaths in infants:
  - Infants shall sleep in cribs or play yards.
  - Infants shall not sleep on a sofa, soft mattress, adult bed, in a car seat, swing or other restraining devices.
  - Bibs shall be removed prior to placing a child in a crib for sleeping.
  - Soft bedding, mobile toys and other toys that attach to any part of the crib are prohibited.
  - Infants that arrive asleep in car seats or fall asleep in any piece of equipment other than a crib must be immediately removed and placed on their back in a crib.
- Any practice that is an exception to the Department's safe sleep supervision procedures shall not be used without written authorization from a physician.

## Health and Safety

- Children shall be checked upon arrival each day for signs of illness and injury.
- The receiving educator shall document any obvious marks or injuries and shall note any comments from the parents pertaining to the marks or injuries.
- A child showing signs of illness shall be cared for apart from other children to the extent that supervision can be maintained for all children, and the parent shall be contacted and arrangements made for pick up.
- At least one staff with certification in first aid and one certified in CPR on duty at all times.
- Impetigo and diagnosed strep shall be treated according to a licensed medical professional's instructions prior to readmission to the child care agency.
- Children diagnosed with scabies or lice shall have proof of treatment prior to readmission.
- All medications and preventative products such as nonprescription diaper cream, sun screen and insect repellent, shall be received from the parent by a designated staff person and administered by a designated staff person.
- Unused medication shall be returned to the parent.
- Medication shall never be handled by children or administered in bottles or infant feeders unless authorized by a physician.
- All medications shall be inaccessible to children unless a physician's authorization for the current school year is on file that allows a school-age child to have self-administered medication.
- Smoking is not permitted in any indoor area or vehicle of the child care agency at any time.
- The use of alcoholic beverages is not permitted in a child care agency during the hours of operation.
- Firearms shall not be on the premises of a child care agency, in any vehicle used to transport children or in the presence of a child. (In a private residence, these items must be locked, out of sight and inaccessible to children).
- All items labeled "keep out of reach of children" shall be stored so that they are inaccessible to children.
- Personal belongings of residents and staff (purses, backpacks, coats, etc.) shall be inaccessible to children at all times.
- Children's diapers should be checked throughout the day to determine if they are wet or soiled.
- Educators shall provide rich social interchanges and engaging eye contact during diapering.
- Educators shall utilize sanitary diapering procedures.
- Pre-school and school-age children requiring assistance with toileting needs, shall receive assistance in a location designated for that purpose which provides privacy from other children and adults.
- Staff members with signs of a communicable disease shall not be present.

## Food and Food Service

- Educators and children shall wash their hands with soap and water.
- At mealtime, children shall be seated at tables and chairs of appropriate size, and an educator shall be near any table or high chair where a child is eating.
- Educators shall ensure that infants have completed feeding and swallowed all milk/formula prior to being laid down.
- Bottles shall not be propped or given to a child while lying flat.
- Children shall not be permitted to carry a bottle with them throughout the day.
- Children shall not have food or drink while in beds, cots, cribs or on mats.
- In order to prevent injuries related to bottle warmers and microwaves:
  - Crock pots are prohibited as bottle warmers.
  - Crock pots shall be kept in kitchen and inaccessible.
  - Microwave ovens and surrounding area, including cords, shall not be accessible to children.
  - School-age children shall use microwaves only under direct supervision.
- In order to prevent choking:
  - Solid foods, including cereal, shall not be given in bottles or infant feeders to children with normal eating abilities unless written authorization from doctor.
  - Food shall not be accessible/served until cut, chopped, diced, mashed for each child's age, chewing and swallowing ability.
  - Educators shall check to ensure that no food is left in the mouth of a child prior to placing down for nap.
  - Educator is prohibited from performing classroom duties unrelated to food service during mealtime.
  - Children shall not wear teething necklaces, pacifiers, or any item around their neck or attached to their clothing.
- All contents remaining in bottles after feeding shall be discarded immediately after feeding.
- Frozen breast milk shall be labeled with date expressed and name of child.
- Food, formula, milk or breast milk brought from home shall be labeled with the child's name; the date received and shall be refrigerated immediately.
- Previously opened baby food jars shall not be accepted in the child care agency.

- If food is fed directly from the jar by the educator, the jar shall be used for only one feeding and discarded.
- If the child care agency provides food, it shall be in accordance with the USDA's Child and Adult Care Food Program (CACFP) nutritional guidelines.
- Breakfast shall be provided to children who arrive before 7:00 a.m. and have not had breakfast at home. (Not required if received at school)
- Children shall be given adequate time to eat.
- Food shall not be used as a reward and should not be forced or withheld.
- Each child's food allergies shall be posted where food is prepared and served.
- For a child with life threatening allergies, a written plan of action should be posted where the educator has immediate access.
- Staff shall support and facilitate a parent's decision to continue breast feeding.
- Home preserved food and raw milk are prohibited.

#### Equipment for Children

- Developmentally appropriate equipment and furnishings shall be available for each age group.
- All indoor and outdoor large and heavy equipment, appliances and furnishings shall be secured to prevent falling or tipping over.
- Electrical cords and cords on window blinds or curtains shall be inaccessible to children.
- Indoor equipment, materials, and toys shall be available to provide a variety of developmentally appropriate activities so that each child has at least two (2) choices during play time.
- In infant/toddler rooms, equipment and a safe space shall be provided for climbing, crawling, pulling up and exploring without the use of confining equipment.
- Trampolines are prohibited.
- Climbers, swings and other heavy equipment that could cause injury if toppled shall be securely anchored.
- Climbers and swings shall have a protective fall zone surface recognized by CPSC as a shock absorbing, resilient material maintained at a minimum depth of six (6) inches. (Effective for family and group homes by 7/30/2019).
- Portable equipment shall be securely anchored or rendered immobile if required by manufacturer.
- A quiet rest area and cots or mats shall be available for all children who want to rest or nap.
- For health and safety reasons each crib, cot, bed or mat shall be labeled to assure that each child naps on his/her own bedding.

Cribs and play yards must comply with CPSC requirements.

- Mattresses and foam pads shall fit the crib without any gaps or spaces.
- A blanket or covering shall be available to each child age thirteen (13) months and older.

#### Program, Language and Literacy

- The educator(s) shall give individual attention to each child throughout the day (activities are specified for infant/toddler, pre-school, and school-age children). These activities include, but are not limited to, reading to infants, toddlers and preschool age children individually or in a group daily.
- Every child should have an opportunity to participate in program activities.
- Upon arrival, infants and toddlers shall be removed from car seats immediately.
- Child shall never be left unattended in any restraining device and shall not be kept in any restraining device longer than fifteen (15) minutes, except when eating while in a high chair.
- The use of electronic media and other electronic devices is prohibited for children less than two (2) years of age.
- Programs, movies, computer games, and music with violent or adult content shall not be permitted in children's presence.
- Child care agencies shall inform parents in writing of any scheduled media program viewing.
- Other activity choices shall be available to children who do not wish to participate in media time.
- An opportunity for outdoor play shall be extended to children of all ages who are in care for more than three (3) daylight hours unless outdoor play is prohibitive or dangerous.
- Children of all ages who are in care more than three (3) daylight hours shall have a daily opportunity for outdoor play when the temperature range, after adjustment for wind chill and heat index, is between thirty-two (32) degrees and ninety-five (95) degrees Fahrenheit and not raining; children shall be properly dressed and the length of time outside adjusted according to the conditions and the age of the child.
- During outdoor play educators shall be alert for signs of weather related distress such as, dehydration, heat stroke, etc.
- Children in care for more six (6) hours or more shall have an opportunity for a reclining rest period.
- No child shall be forced to lay down/nap or stay on a cot/mat for an extended period of time.

- Nap areas shall have adequate lighting to allow the educator to see each child with a quick glance and respond appropriately to the child's physical and emotional needs.
- If music is played in areas where children sleep, it should be soothing and soft enough so children can be heard.
- Potentially shaming, humiliating, frightening, verbally abusive, injurious discipline methods/techniques that isolate children are prohibited.
- Discipline shall not be related to food, rest, or toileting.
- Spanking and all types of corporal punishment are prohibited.
- Staff shall not restrain a child by any means other than holding and then for only as long as necessary for the child to regain control.
- Toilet learning shall be done in cooperation with the parents, and communication with parents maintained throughout the process.
- Activities shall be intentionally planned based upon the developmental age of the child.
- Infants, less than six (6) months of age shall have direct supervised tummy time every day when they are awake.
- For ages three (3) through school-age, a personal safety curriculum shall be provided annually.
- For school-age children the curriculum shall include instruction on reporting physical, verbal or sexual abuse.
- Parents shall be consulted in developing a plan to meet the individual needs of a child with special needs.

#### Physical Facilities

- All facilities shall annually pass an inspection verifying compliance with all applicable state and local fire and environmental requirements.
- At least one (1) working telephone shall be available in the agency and the number made available to parents.
- Outdoor play areas shall contain a minimum of fifty (50) square feet of usable play space for each child using the area at one time.
- The outdoor play area shall be enclosed by fence or barrier at least four (4) feet in height.
- Pre-play inspection of outdoor play area prior to use.
- Children shall not be present if an adequate water supply is not available.
- Children shall not be present if the sewage system is not operating.
- All rooms used by children shall be maintained at a temperature of between 68 to 78 degrees by means of heating, cooling or ventilation sources approved for use.
- Children shall not be present if indoor temperature cannot be maintained between 68 to 78 degrees.
- Unvented fuel burning heaters and portable heaters are prohibited.
- Swimming pools made inaccessible to children by use of fences and locked gates.
- Swimming is prohibited in drop-in care.
- Swimming pools and/or wading pools shall not be used without prior approval by the Health Department.
- If animals or birds are kept in classrooms as pets, they shall be caged away from the food storage and preparation area, and cages kept clean.
- Reptiles and amphibians shall not be kept as pets.

#### Transportation

- Child care agencies shall not transport children without prior written approval by the Department.
- Vehicle emergency evacuation drills conducted quarterly. • Use of cell phones and texting is prohibited while driving.
- Routine transportation is limited to forty-five (45) minutes each way (does not apply to field trips for school-agers).
- Maintain documentation of daily inspections and necessary repairs
- The interior temperature of the vehicle shall be monitored during extreme weather to ensure child safety.
- An adult must be in the vehicle whenever a child is in the vehicle.
- A passenger log with the first and last name of each child shall be used to track the loading and unloading of children during transport.
- If the child was loaded from home, the parent or other authorized person will additionally sign the log indicating that the child was placed on the vehicle.
- The log shall be updated as children are released from the vehicle.
- When the child is released to a parent or other authorized person, that person must sign the log indicating the release of that child to them.
- Immediately upon unloading the last child the driver must walk through the vehicle to confirm that all the children are off the vehicle.
- A staff person designated as reviewer shall walk through the vehicle to confirm that all the children are off the vehicle. The reviewer shall have no other responsibilities during the walk through of the vehicle.

Family and group homes with a single educator shall develop a Department approved alternative system for ensuring all children are off the vehicle.

- When children are transported to school, they shall be unloaded only at the location designated by the school and only at the time the school is officially open with staff present to receive them.
- Drivers must submit to an annual health examination and pass a drug screening test.
- Drivers and monitors shall hold current certification in CPR and First Aid.
- The following equipment shall be maintained in the vehicle and stored in a manner which is not readily accessible to children: fire extinguisher, emergency reflective triangles; first aid kit; seat-belt cutter or similar device manufactured and designed to immediately release the vehicle’s child restraint system(s) in an emergency; blood borne pathogenic clean-up kit; and working flashlight.
- All child care vehicles designed to carry ten (10) or more passengers must conform to the Federal Motor Vehicle Safety Standards for school buses.
- All child care vehicles designed by the manufacturer to carry ten (10) or more passengers must be inspected by the Department of Safety.
- Child passenger restraints must be used in accordance with state law and federal law.
- Signage that includes the agency name, phone number and the Department’s toll-free Child Care Complaint phone number must be on child care vehicles.

**Emergency Preparedness**

- The agency, in consultation with appropriate local authorities, shall develop a written plan to protect children in the event of disaster.

**Specific Requirements For Family Child Care Homes**

- Adult:Child ratios shall be maintained at all times.
- Licensed capacity shall not be exceeded.
- Family Child Care Home Ratios and Group Size Chart

<b>Maximum Number of Children and Ages (Including children “related” to the primary educator under nine (9) years of age)</b>	<b>Educators Required</b>
Seven (7) or fewer children; and no more than four (4) under two (2) years	1
Seven (7) or fewer children; and five (5) or more under two (2) years	2
More than seven (7) children; and no more than four (4) under two (2) years	3
More than seven (7) children; and five (5) or more under two (2) years	3

- Effective 7/30/2018, primary educators receiving an initial license shall have a high school diploma or equivalent.
- The primary educator shall not be employed or engaged in any other full-time activities during hours of operation.
- A qualified educator shall be on site any time the primary educator is not on site during child care operating hours.
- Ongoing training required in specific health and safety topics.
- The maximum number of children present inside a physical space shall be determined by minimum square footage requirements.
- If the number of children exceeds seven (7) at one time or care is provided in one room of the home, the area shall provide thirty (30) square feet per child of usable play space. Specific Requirements For Group Child Care Homes • Adult:Child ratios shall be maintained at all times.

- The maximum number of children present shall not exceed twelve (12). Exception: Three (3) additional school-age children may be in care before/after school, school holidays/snow days and during summer vacation.
- Group Home Ratio and Group Size Chart:

Number of Children	Ages of Children	Educators Required
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	No more than twelve (12) children three (3) years of age or older	1
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	Up to nine (9) children under three (3) years of age; and no more than four (4) present under two (2) years of age	2
Twelve (12) – Fifteen (15) (any number over twelve (12) must be school-age)	Ten (10) or more under three (3) years of age	3

- If school-age children are enrolled, a school-age program shall be provided.
  - If four (4) or more infants/toddlers attend a group child care home, they shall have a separate and distinct space and their own educator.
  - When children are sleeping or resting, there shall be at least one (1) adult awake and supervising and adult to child ratios shall be maintained.
  - Primary educators shall have a high school diploma or equivalent.
  - Owners who are employed elsewhere shall ensure that a primary educator is always on-site.
  - The primary educator shall not be employed at any other job during the hours of operation unless the Department has approved the primary educator's employment in an official capacity in a program sponsored or recognized by the Department.
  - An educator shall be on-site any time that the primary educator is not on-site during child care operating hours.
  - Ongoing training required in specific health and safety topics.
  - A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
  - The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.
- Specific Requirements For Child Care Centers
- Adult: child ratios must be maintained at all times.
  - When more than twelve (12) children are present on the premises a second adult must be physically available on the premises.
  - Child Care Ratio and Group Size Charts

Age of Children	Adult:Child Ratio	Maximum Group Size
6 weeks – 15 months	1:4	8
12 months – 30 months	1:6	12
24 months – 35 months	1:7	14
3 years	1:9	18
4 years	1:13	20
5 years	1:16	20
School-age (Kindergarten and above)	1:20	No max

Age of Children	Adult: Child Ratio	Maximum Group Size
6 weeks – 30 months	1:5	10
2 years – 4 years	1:8	16
2 ½ years – 3 years	1:9	18
2 ½ years – 5 years	1:11	20
2 ½ years – 12 years	1:10	10
3 years – 5 years	1:13	22
4 years – 5 years	1:16	24
5 years – 12 years	1:20	No max

Ratio Chart first/last hour and one-half (½) of each day only:

Age of Children	Adult: Child Ratio	Maximum Group Size
2 ½ years – 5 years	1:10	10
3 years – 12 years	1:15	15
4 years – 12 years	1:20	20

Each child must be on roll in a defined group and assigned to that group with a specific caregiver(s).

- Infants shall never be grouped with children older than thirty (30) months, and a separate area shall be provided for them.
  - Children shall not be promoted to a new group until required based upon the age and developmental needs of the child.
  - Groups, excluding infants & toddlers may be combined for short periods for a special activity of no more than sixty (60) minutes duration per day as long as adult:child ratios are met.
  - Each group must have a designated classroom with enough space for the entire group.
  - Child care centers shall provide written lesson plans for each group of children.
  - When more than twelve (12) children in first grade and above are present, a separate educator, group, space and program shall be provided for them.
  - Ratios can be relaxed during naptime and nighttime care but one (1) adult must be awake and supervising the children in each nap/sleeping area (infant/toddler ratios must be maintained).
  - Ongoing training required in specific health and safety topics.
  - The director of a single site child care center shall be at least twenty-one (21) years of age.
  - The assistant director of a single child care center shall be at least eighteen (18) years of age.
  - Each group of children shall have at least one (1) educator present who has a high school diploma or equivalent.
  - The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.
  - A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
  - Each nap room shall contain a minimum of thirty (30) square feet of floor space per child.
  - Individual lockers or cubbies, separate hooks and shelves or other containers, placed so that children may reach them, shall be provided for each child's belongings.
  - In an infant or toddler room with more than one educator, each educator shall be responsible for providing consistent care for a specific infant(s)/toddler(s) which includes but is not limited to: planning, and record- keeping for the child, communication, general interaction with and routine care of the child.
  - Following the issuance of an annual license, a child care center may operate without an on-site director for a period of not more than sixty (60) days total within the licensing year.
- Specific Requirements For Drop-In Child Care Centers
- Before accepting a child for care, the parent shall provide a statement regarding the estimated amount of time that the parent anticipates that the child will be in attendance.

- The child care agency shall familiarize staff with personal safety material and be prepared to discuss those materials with parents.
- The drop-in center shall have an on-site director and the director shall be at least twenty-one (21) years of age.
- The director shall have earned a high school diploma or its equivalent and one (1) year of full-time work experience with children in a group setting.
- Ongoing training required in specific health and safety topics.
- Each educator who is used to meet the minimum required adult:child ratio shall have a high school diploma.

Age Grouping:	
Age of Children	Adult:Child Ratio
Six (6) weeks –Fifteen (15) months	1:4
Twelve (12) months – Thirty (30) month	1:8
Two (2) years	1:12
Three (3) years	1:15
Four (4) years	1:18
Five (5) years (not in Kindergarten)	1:20
School-age (Kindergarten and above)	1:22

Majority Age of Children Present	One Infant	Two Infants
12 months – 30 months	1:8	1:6
2 years	1:10	1:8
3 years	1:12	1:10
4 years	1:15	1:12
5 years (not in Kindergarten)	1:17	1:13
School-age (Kindergarten and above)	1:19	1:15

- Children shall be placed in age appropriate groups and with adequate adult educator supervision:
- The adult:child ratio for a multi-age group containing infants:
- If the child care agency provides food, it shall be in accordance with the USDA’s Child and Adult Care Food Program nutritional guidelines.
- The maximum number of children who may be present inside a physical space shall be determined in accordance with the minimum square footage requirements.
- A minimum of thirty (30) square feet of useable indoor play space shall be provided for each child.
- Each nap room shall contain a minimum of thirty (30) square feet of floor space per child.
- Staff shall have documentation of all children’s allergies and how to deal with any allergic reaction.
- Staff shall review emergency preparedness and fire procedures and shall physically walk through the evacuation process every year.
- Prohibited activities include swimming, transportation and the provision of specialized services.

You can access the Department's website at: <http://tn.gov/humanservices>  
A wealth of child care information can be found on the Department's website.  
You can:

- Learn more about the rules
  - Learn more about the types of regulated care
  - Locate a child care provider
  - Learn more about the Report Card and Star Quality Program
  - Locate the local child care licensing office
  - Review the current personal safety curriculum
  - Read about new initiatives in child care
  - Locate the nearest child care certificate office
  - Find info on choosing child care
  - Locate a resource and referral center
- And much more!

Report Card and Star Quality Program  
<http://tnstarquality.org>

Child Care Resource and Referral Centers  
Currently, there are eight (8) CCR&R service delivery areas located throughout the state. Child Care Resource and Referral helps parents find the type of care that is best for their child / children. These community resources also give providers technical assistance to better serve the children in their care. Contact information for the CCR&R centers can be found on the Child Care Services website.

Child Care Complaint Hotline  
NASHVILLE AREA: (615) 313-4820  
TOLL FREE: 1-800-462-8261

If you have a concern about an existing child care agency or wish to report an illegal operation call the Department's complaint hotline.  
Department of Children's Services Hotline  
Report Child Abuse or Neglect  
1-877-237-0004

Information about child health, education, and development as well as available state services:  
<https://www.kidcentraltn.com/>

**Use this link for access to current childcare licencing rules:**

<https://publications.tnsosfiles.com/rules/1240/1240-04/1240-04.htm>

## Chattanooga Head Start/Early Head Start Program

### MAIN SITE LOCATIONS AND PHONE NUMBERS

Center	Address	Phone Number
Avondale	2302 Ocoee Street Chattanooga, TN 37406	423-643-6533/6503
Cedar Hill	4701 Divine Ave. Chattanooga, TN 37407	423-643-6640/6648
Daisy	9531 Ridge Trail Road Soddy Daisy, TN 37379	423-643-6473/6460/6462

**\*\*Contact one of the main sites listed above to find out information about enrolling at one of our Head Start/Early Head Start Partnership sites.**