

IT TAKES A VILLAGE ACADEMY



Great Start to Readiness Program (GSRP)

**Developed under a grant awarded by the Michigan Department of Education*

IT TAKES A VILLAGE ACADEMY GSRP

2020-2021 Parent Handbook



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****Funding****

Funding for the Great Start to Readiness Program is provided by the State. In the event the funding for this program is not renewed by the State of Michigan as of October 1 of each year, the programming will cease operation. If funding ceases anytime during the school year (October to June) programming will cease operation. When funding is renewed, currently enrolled children will have priority to begin school again.

COVID 19 Preparedness and Response Plan

Developed by guidelines from the CDC (Center for Disease Control) and LARA (Licensing and Regulatory Affairs for the State of Michigan), ITAVA Academy has developed new policies for children, families, and staff for best practices for childcare centers during this health emergency. COVID-19 information and guidance are fluid and change almost daily and therefore this document may change frequently. The policies are designed to protect the health and safety of our families, enrolled children and staff and allow us to continue face to face care in a safe, clean, healthy environment possible.

These policies supersede any other policies that were in place prior to the COVID-19 Pandemic, including the information provided below in the GSRP 2020-2021, EDUCATION CONSULTING SOLUTIONS, Parent Handbook for ITAVA GSRP program. A copy of the current COVID-19 Preparedness and Response Plan is located at www.ittakesavillageacademy.org.

A printed copy will be provided upon request. Updates to the policy will be posted in the main office.

Our program communicates with Wayne County Health Department and Wayne RESA and we collaborate with them for health planning, re-opening, and operating procedures.

ITAVA Academy will take the necessary precautions to contain and prevent the spread of contagious illnesses or diseases. However, ITAVA Academy cannot guarantee that contagious illnesses or diseases will be completely contained or will not be spread to other children. Parents must recognize that, while in care, it is possible that the child may be exposed to a contagious illness or disease.

Current staff will be trained prior to re-opening and new staff will be trained in policies and procedures prior to start of work in everyday preventive actions to prevent the spread of respiratory illness. These actions include:

- Training as needed to include information on special health care needs, medications, infectious disease, and review of COVID-19 signs and symptoms
- Focusing on Handwashing, Handwashing and more Handwashing. Staff and Children [Wash hands](#) often with soap and water. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.
 - Staff: At start of work day and between classrooms
 - Children: At arrival, after sensory activity, after gym/playground
 - Before, during, and after preparing food
 - Before eating food
 - Before and after caring for someone who is sick with vomiting or diarrhea
 - Before and after treating a cut or wound
 - After [changing diapers or cleaning up a child who has used the toilet](#)

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- *After blowing nose, coughing, or sneezing*

- *Staff will [clean and disinfect frequently touched surfaces](#) such as door knobs, light switches, hand railings and drinking fountain every 4 hours.*
- *Staff and Visitors must cover mouth and nose with a [cloth face covering](#) inside the building.*
- *Cloth face coverings should NOT be put on babies and children under age two because of the danger of suffocation. Children 2-4 yrs are encouraged to wear a mask in common areas. Older children must wear a face mask in common areas.*

Sick children and staff are required to stay home.

- *It is important for parents to monitor their child's health at home and to keep sick kids home.*
- *Staff are encouraged to be vigilant for symptoms in themselves and to stay in touch with facility management if or when they start to feel sick.*
- *Children and staff who come to the child care center sick or become sick while at the facility will be sent home as soon as possible.*
- *Sick children and staff will be kept separate from well children and staff until they can be sent home.*
- ***At this time, daycare licensing (LARA) recommends that children who had a fever, be fever free for 24 hours before returning to care (even if other symptoms are not present).***
- ***If a staff member or child exhibits multiple symptoms of COVID-19, you suspect possible exposure, or an individual tests positive for COVID-19, the individual must stay home until:***
 - ***Fever-free for at least 24 hours without the use of medicine that reduces fevers AND***
 - ***Other symptoms have improved AND***
 - ***At least 10 days have passed since your symptoms first appeared.***

Plan for someone who is or becomes sick

A sick child will wait in the office until a family member can pick up. A child over 2 years of age will be encouraged to wear a disposable face mask, provided by the office.

A staff member who becomes ill while at work will be sent home immediately. Office staff will cover the classroom to remain in ratio until the substitute teacher arrives.

Monitor and Plan for Absenteeism Among Staff

- *Office staff will cover classes in the event ill staff need to be sent home. Efforts will be made to hire substitutes to cover regular staff members who need to stay home if they or their family members are sick will be made.*

Monitoring Symptoms of COVID 19 in Children

Staff member will screen children upon arrival.

Fever is the Key indicator for young children. Children who have a fever of 100.40 F (38.00C) or above or other signs of illness will not be allowed to stay at school. Cough and/or diarrhea in addition to fever is suggestive of coronavirus.

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Parents will be encouraged to be on the alert for signs of illness in their children and to keep them home when they are sick. **At drop off parents will be asked:**

- **If their child has been in close contact with a person who has COVID-19. (If yes, the family should self-quarantine for 14 days.)**
- **If their child has felt unwell (If yes, the child must go home with parent)**
 - **persistent cough,**
 - **temperature,**
 - **difficulty breathing,**
 - **cold,**
 - **diarrhea and/or vomiting**
 - **rash**
- *Staff member will also visually check the child for signs of illness, including flushed cheeks, rapid or difficulty breathing, fatigue, rash, or extreme fussiness.*

Teachers will continue to monitor symptoms throughout the day and monitor temperatures when children appear ill or “not themselves.” Staff will check temperatures again after naptime.

Monitoring Symptoms of COVID-19 in Staff

When staff members arrive:

- **Before reporting to work each day, staff will complete the online COVID-19 symptoms screening questionnaire at [Michigan.gov/containcovid](https://www.michigan.gov/containcovid)**
- *Perform temperature checks on staff at arrival.*
- *Screen for cough, shortness of breath, difficulty breathing, change in smell or taste, and diarrhea.*
- *Staff arriving with fever at or above 100.4 F (38 C) or other symptoms must be sent home.*
- *Staff must report contact with anyone outside of work who has had a documented case of COVID-19. Staff will be instructed to self-quarantine if they have been exposed to COVID-19.*

Communication Protocol to Report Symptoms or a Positive Test

Families and staff should report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19, including the child or family members if they or their children experience possible symptoms or have a positive test.

Office staff should be notified the same day this occurs so preventative action can be taken immediately.

The office staff will contact the local health department and daycare licensing consultant for the next steps and the determination on whether to close the classroom or facility is based on guidance from the health department. Parents will be notified immediately by phone if COVID-19 is present in the facility. Confidentiality of the person who has tested positive will be respected.

Physical Distancing Strategies

We will continue to work with our local health officials to determine a set of strategies appropriate for our community’s situation. We will continue using preparedness strategies and consider the following physical distancing strategies:

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- *Childcare classes will include the same group each day, and when possible, with the same teachers.*
- *Classroom Group Sizes will be maintained according to licensing guidelines.*
- *Smaller child use areas will be created when using large spaces to keep children from gathering outside of their group. Seating at tables and during activities and mealtimes will be spaced out so children can sit apart.*
- *Special events such as festivals, holiday events, and special performances will be cancelled or postponed until further notice.*
- *Daily group activities that may promote transmission will be altered or halted:*
 - *Use of water and **sensory tables** will be halted. Each child will have their own individual bag of sensory material.*
 - *Family style **meals** will be halted.*
 - ***Toothbrushing** at school will be halted.*
 - *The mixing of children will be limited, and **playground** times will be staggered.*
 - *When **common spaces** remain in use the space will be disinfected between groups.*
 - *At **nap time**, children's naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Cots will be placed head to toe to further reduce the potential for viral spread.*
 - *Parents will provide a pair of clean **indoor shoes** for each child to be kept at the center for indoor use only.*
 - ***Playground equipment** will be disinfected between class groups. Teachers will take indoor activities outside to the fresh air as much as possible.*

New Parent Drop-Off and Pick-Up Procedures

- *Hand hygiene stations will be set up at the entrance of the facility. But preferably, children will wash hands with soap and water upon arrival. Hand sanitizer will be provided next to parent sign-in sheets.*
- *Sign-in stations will be placed outside or just inside the door. Sanitized pens are provided for each parent. Alternately, a separate sign in document will be prepared for parents to sign and return at the end of the week.*
- *Arrival and drop off times will be staggered and direct contact with parents will be limited as much as possible. **Only staff and children can enter classrooms.***
 - *Childcare providers will greet children in the foyer as they arrive.*
 - *A staff member will walk child to his classroom, and at the end of the day, walk child back to his parent.*
 - *Infants can be transported in their car seats.*
- *Ideally, the same parent or designated person should drop off and pick up the child every day.*

Nonessential Visitors and Workers

Tours of the facility for new families will be virtual or scheduled after hours. All visitors will be screened for COVID 19, including temperature. Visitors must wear a cloth face covering.

When possible, all maintenance/repair workers will be scheduled after childcare hours. Workers will be screened for COVID 19, including temperature. Workers must wear a cloth face covering.

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Classroom volunteers will be halted until further notice.

Methods to Ensure Hygiene

Hand Washing:

Children and staff will wash hands all day long with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, sneezing; going to the bathroom; and before eating or preparing food.

Staff will wash hands upon entering building and upon entering classrooms.

Intensify cleaning and disinfection efforts:

- *Common areas will be disinfected every 4 hours (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Dirty surfaces will be first cleaned with soap and water and then disinfected with a bleach and water solution. Bathrooms will be sanitized (cleaned and disinfected) daily with an EPA approved cleaner.*
- *Windows will be opened to air out the classroom through-out the day.*
- *Each classroom will follow a daily and weekly schedule for cleaning and disinfecting as directed by the CDC.*
- *EPA-registered disposable wipes or a Bleach and water solution will be used between users for commonly used surfaces such as keyboards, desks, and remote controls and phones.*

Clean and Sanitize Toys

- *Toys that cannot be cleaned and sanitized will not be used. This includes cloth dolls, stuffed animals and dress up clothes.*
- *Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions will be set aside until they are cleaned with water and detergent, rinsed, sanitized with a bleach and water solution or cleaned in a dishwasher.*
- *Machine washable cloth toys be used by one individual child at a time or not be used at all.*
- *Toys will not be shared with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.*
- *Toys that need to be cleaned will be set aside and placed in a dish pan with soapy water or put in a separate container marked for "soiled toys."*
- *Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.*

Clean and Disinfect Bedding

- *Each child's bedding will be kept separate and stored in individually labeled bins, cubbies, or bags. Cots and mats are labeled for each child and disinfected daily. **Bedding provided by the parent will be kept at the center and will be cleaned weekly by staff.***

Items from Home

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- **Please limit the number of items brought into the facility because this can be a way to transmit the virus.**
- *Comfort items may be especially needed during this time of transition as they may reduce stress for children and staff members. To avoid these items coming in contact, many children, efforts will be made for these items to be placed in a cubby or bin and be used at naptime or as needed. If possible, a comfort item should remain at the childcare facility to avoid cross contamination from another site. Comfort item will be washed weekly by staff.*

Use of Face Masks

All staff will be provided a cloth face mask to wear while working inside with children. If a 6-foot distance can be maintained outside, a face cloth mask is not necessary while working with children.

Staff Participating in Drop Off or Pick UP

Staff will wear a mask or other suitable face covering (Cloth material that can withstand the test of trying to blow out a candle through the material).

Children

- *Staff and Visitors must cover mouth and nose with a [cloth face covering](#) inside the building.*
- *Cloth face coverings should NOT be put on babies and children under age two because of the danger of suffocation. Children 2-4 yrs are encouraged to wear a mask in common areas. Older children must wear a face mask in common areas.*

Children two years of age and older, who are being sent home sick, will be encouraged to wear a mask awaiting pickup by parent or guardian.

Parents

Parents must wear a mask or other suitable face covering:

- *At Drop off and Pick up*
- *Anytime they enter the office or building and for the duration of the visit.*

Use of Gloves

It is recommended by daycare licensing that providers wear gloves in a manner consistent with existing licensing rules (for example, gloves should be worn when handling contaminants, changing diapers, cleaning or when serving food). Staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are not recommended for broader use.

GSRP Parent Handbook

Parent Handbook: This parent handbook contains the policies and procedures of the ITAVA Academy, Great Start to Readiness Program -(GSRP). It is meant to serve as a reference guide. It is not meant to cover every aspect of the childcare program or every situation, which might arise. Parents should be free to contact the director with questions concerning the contents of this handbook. We reserve the unilateral right to add, delete, or amend the policies and procedures in this handbook upon (30) days written notice to parents. This handbook is the exclusive property of ITAVA ACADEMY GSRP and is intended for the exclusive use of the parents/guardians of enrolled children. This handbook may not be copied or distributed to any third party without the excess written permission of ITAVA ACADEMY GSRP. The handbook must be returned to ITAVA ACADEMY GSRP upon termination of childcare

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services. ITAVA ACADEMY GSRP will maintain and conduct all practices relating to enrollment, discipline, and all other terms and benefits of childcare services provided in a manner which does not discriminate against any child, parent, or family based on race, color, religion, national origin, sex, or disability.

Funding: Funding for the Great Start to Readiness Program is provided by the State. In the event the funding for this program is not renewed by the State of Michigan as of October 1 of each year, the programming will cease operation. If funding ceases anytime during the school year (October to June) programming will cease operation. When funding is renewed, currently enrolled children will have priority to begin school again.

Program Plan: ITAVA Academy GSRP will enroll eligible at-risk 4-year-old children into its full day GSRP program. The program will operate M-TH, 7.5 hours per day, for a minimum of 30 weeks during the school year. Each full day class will have 16 students and a Lead Teacher and an Associate Teacher. ITAVA Academy GRSP offers an optional onsite tuition-based wrap around preschool program offered year-round. Additionally, we will work cooperatively with other agencies to ensure as many at-risk children as possible benefit from high quality preschool programs.

Philosophy: We believe children who have many positive interactions between school, home, and the community will be successful learners in school. Community resources and community referrals occur in partnership with families as parents' involvement is a key component to our program to strengthen the home-school connection. Active learning is supported in an environment where children learn through direct experience with teachers and the environment. Each day is a positive experience filled with new challenges and learning opportunities. Children learn best when they safe and secure so consistent classroom teachers over the course of the school year is priority. We support the right of children with disabilities to grow and learn alongside their typically developing peers. We strive to draw on each child's unique experiences, personalities, and background in our culturally diverse Academy to teach tolerance and respect.

Diversity Statement: Valuing diversity is a key component of the program. Diversity includes race, ethnicity, disability, sexual orientation, gender, religion, culture, function, hierarchy, physical appearance, language, lifestyle, geographical origin, and socioeconomic status. We value and support diversity within families, staff, and the community.

Community Services and Referrals for Services: Our staff can assist families to obtain needed community services and referrals. A variety of community services and resources available to families is compiled in a Resource Binder located in the office. The staff can also help families locate and initiate the referral process for academic, behavior, communication, or social referrals. Whenever possible, translators will help families in the referral process.

Great Start to Quality Accreditation: *ITAVA Academy has a 3-star quality rating with Great Start to Quality. The Great Start to Quality (GSQ) partners with the Michigan Office of Great Start to identify high quality childcare centers in Michigan. High-quality childcare and preschool programs provide a safe place for children to learn and explore. For more information on Great Start to Quality go to www.greatstarttoquality.org.*

Policies and Procedures

1. Child Recruitment Plan: Recruitment is ongoing, and a variety of methods is used to connect with families. Methods may include posters, flyers, informational articles, recruitment tables at area events, and door to door canvas.

2. The Process for Selection and Placement into Program

1. Family completes a GSRP Child Application form to initially screen children to determine eligibility.
2. Factors are identified, using quintiles, and the enrollment process shall consider income and quintile factors, such that children determined with higher need are enrolled before children with lesser need.
3. Eligibility flow chart is utilized to determine if child is eligible for a referral to Head Start.
4. Enroll children based on quintiles. Enrollment timelines are based on quintiles, beginning with families with the lowest income.
5. Parents of selected children complete enrollment packet and appointments are made for health, hearing and vision screening held in the month of August

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6. Before the start of the school year, the child’s teacher will, by appointment, arrange for a home visit.
7. Children from families 251-400 % above the federal poverty line will be considered only with approval from Wayne Resa. These families will pay a sliding scale fee. Priority is determined by the family's income and risk factors.

<i>Weekly Tuition Rates</i>	<i>Below 250% of the Federal Poverty Level</i>	<i>251%-400% of the Federal Poverty Level</i>
<i>School Day Programming</i>	<i>GSRP Eligible- No tuition</i>	<i>\$10/week</i>

3. Parent Involvement

There are many opportunities for families to be involved in their child’s school day. Parents are their child’s first teacher and it is important for parent and teacher to collaborate to provide a healthy, happy learning environment at home and at school.

Involvement can be informal, such as:

- Talking to your child’s teacher about your child’s interests, activities, or events at home.
- Writing notes for your child’s teachers.
- Initiating a phone conversation with the teacher.

Other ways families can support the child’s classroom is to be actively involved, such as:

- **Sharing special interests, skills, or hobbies with the class.**
- Helping to make play materials.
- Volunteer in your child’s class.
- PARENT ADVISORY OPPORTUNITIES:
- Attend parent meetings, workshops and serving on the **Parent Advisory Committee (PAC)** ITAVA Academy. PAC meetings are held 3 times a year. This is an opportunity for parents to share ideas and to be a part of the decision making for center programming activities and analyze child outcome data.
- Attend ITAVA **Data Analysis Team**. Parents and staff meet (3) times per year to discuss Assessments, State Mandates, and review areas for growth.
- Attend local/ISD-Wide **SRAC Coalition** that meets to review school readiness and assessments
- Serve on **GSC Parent Coalition** to work with other parents in the region to focus on community support for early childhood and act as liaison to local GSRP Advisory Committees.

4. Parent/Teacher Conferences and Home Visits

Parent Teacher Conferences and Home Visits are a required component of the program and the act of enrolling a child constitutes agreement on the part of the parent or guardian to allow the Home Visits and to attend the in- school Parent Teacher Conferences. Teachers will visit the child’s home before the start of classes for the first Home Visit. Teachers will call to arrange the Home Visit approximately 1 week before the start of school and a second Home Visit will be scheduled at the end of the school year. Home Visits will last 1 hour. Parent Teacher Conferences, at the center, will be held at the school in the fall and midwinter. Conferences will last 45 minutes.

Topics covered during these meeting include child's progress and parent input to form developmental goals for child, ways family can support child's learning at home.

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5. Drop Off & Pick Up

Drop off begins at the start of class time. Children cannot be dropped off early. Children dropped off more than 15 minutes late must be checked into the office before entering the classroom. Pickup time begins 15 minutes prior to class end time. All children must be picked up on time. Office staff will work with parents experiencing difficulty picking up on time, but if lateness persists, parent will receive written notification of the need to place child in latchkey program for a fee.

Parent must walk child to classroom, physically present child to teacher and notate time in and time out, sign full parent's signature on ***Sign in & out Sheet***. If someone other than a parent is picking up child, their name must be listed on the child's Emergency Card. It is further noted that the individual who appears to pick up the child will be asked for positive identification. If positive identification is not provided, the child will not be released. Positive identification is a valid driver's license or other picture ID.

ITAVA ACADEMY GSRP assumes no responsibility for any injury or harm to the child who has been released to a person on the child's Emergency Card. ITAVA ACADEMY GSRP and our staff are not professionally trained to make assessments relating to intoxication or impairment and therefore assumes no responsibility to assess the competency or condition of any individual appearing to pick up the child.

6. Discipline Policy/ Conflict Resolution Policy

Each experience in the classroom is treated as a learning opportunity. Teachers work with children to help them to learn how to deal with difficult experiences. Adults support children as they solve problems with materials, do things for themselves, and assist them in resolving conflicts with peers. Teachers follow the Six Steps to Conflict Resolution as an ongoing teaching tool.

Six Steps to Conflict Resolution: 1. Approach Calmly 2. Acknowledge children's feelings 3. Gather Information 4. Restate the Problem 5. Ask for Solutions and choose one together 6. Prepare to give Follow-Up Support

7. Creative Curriculum

This is a child centered approach based on the principal that children learn best by following a creative approach through hands on interactions with the environment and materials. Creative Curriculum is research-based and research-validated. It aligns with the Early Childhood Standards of Quality for Pre-Kindergarten (ECSQ-PK).

8. Child Assessment and Screening

Child Observation Record (GOLD) Assessment Tool: Assessment is ongoing, throughout the school year. The assessment provides information across all domains identified in the ECSQ-PK. These domains include social and emotional develop, intellectual develop, language and early literacy develop, creative develop, physical develop, health, early learning in math, science, social studies, and use in technology. Results of the GOLD are shared with families during fall and spring Parent/Teacher Conferences and at the last Home Visits. Classroom data, not individual data is also shared with families during the Parent Advisory Meetings (PAC) held three times during the school year. Ages & Stages Questionnaire (ASQ 3) Screening: All children are screened initially during the first Home Visit to support learning and development and to identify children who may need additional services.

Results of child assessment and screening are shared with families so teacher and family can work in partnership to support child's growth and development.

Referral Procedure for Assessments and Developmental Screenings

When children need a referral for further observation or evaluation, the center will assist families by providing information of local agencies and assistance in setting up the appointments. **Any recommendation for a referral will require parental permission at the time referral services identified.**

Language

It is important that all families are given the opportunity to fully understand, interpret, and become involved with their child's assessment and goals. Arabic interpreters are available to assist any family that needs and makes a request. When necessary, verbal assessment will be conducted in the child's home language.

Assessment Tools Evaluation

The lead teachers, in conjunction with the administrative team, will annually evaluate the current assessment tools. Outside professionals and parent involvement is sought to inform this evaluation.

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9. Parent Notice of Program Measurement: ITAVA ACADEMY GSRP is required to work with the Michigan Department of Education (MDE) to measure the effect of the statewide Great Start Readiness program (GSRP). Information is sometimes collected about GSRP staff, enrolled children, and their families. Program staff or a representative from MDE might:

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

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

- ITAVA or Suzanne Collard(owner ECS) suzmarch13@gmail.com
- *The MDE office of Great Start, Early Childhood Education and Family Services, at*
 - mde-gsrp@michigan.gov
 - 517-373-8483 or MDE, or 608 W. Allegan, P.O. Box 30008, Lansing, MI 489099

10. Confidentiality and Records: All information pertaining to children in the program, including all reports, records and dates are confidential and used for internal purposes only. Information pertaining to children enrolled in the program will not be released to third parties without the express written permission of parent, unless required by statute, court order, or licensing mandate.

11. Physical Activity: Physical health is an important aspect of a preschooler's life. Daily outdoor time is scheduled both in the morning and afternoon to promote healthy bodies. Teachers plan for large motor activities daily to give children the opportunity to explore different ways of moving their bodies. Classes will continue to go outside during the winter so please send a hat, scarf, gloves, and boots for your child to wear as weather requires. In the advent of inclement weather, (too hot, too cold, wet) larger motor activities will be scheduled indoors in the classroom or in an available area within the center.

12. Snow Days: If the Garden City Public Schools close due to snow, ice etc. the ITAVA ACADEMY GSRP classrooms will close.

14. Rest/Quiet Time: Each afternoon, each child has the opportunity to nap or to rest for one (1) hour. Children may engage in individual "quiet activities", such as books, puzzles, etc. The transition to rest time supports children doing things for themselves; children assist with putting cots out, getting their own blanket, etc. Teachers assist in transition by moving among children in an unhurried fashion engaging in quiet conversation.

15. Social Media: Pictures and videotapes are taken of children engaged in activities at ITAVA Academy. Photos and videos may be posted in the classroom and around the center. Photos and videos of children engaged in indoor and outdoor classroom activities are periodically posted online to ITAVA Academy website, Facebook, etc. Children's information is not shared and remains confidential however parent and or guardian assume all risks associated with online social media and will not hold ITAVA Academy and its affiliates liable. Family members who join our activities may also be photographed or videotaped. Any family members who do not want their image posted in the center or online to a social media website must take the responsibility of staying outside of the range of the camera. **Parent or guardian must sign a written form, available through the office, to opt their child out of pictures posted on ITAVA Academy social web sites.**

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16. Holidays/Birthdays: We recognize that holidays and celebrations play an important part in the lives of children and families however classrooms will not celebrate holidays but instead will participate in seasonal activities. Families also recognize birthdays in different ways so “Birthday parties” will not be held in GSRP classrooms. **Please do not send birthday treats.**

17. Attendance/School Calendar: At the start of the school year, families will receive a school year calendar, children are expected to maintain regular attendance to receive full benefit of the program. If your family is having trouble with maintaining regular daily attendance, please contact the office so we can work together to improve and understand the situation with the goal of improving attendance to support the child's development. Parents who want to take a child out of school for an extended period to travel must contact the office in advance. In the event there is a wait list for an opening, your child's return spot cannot be saved. Instead, the child will be placed back onto the waitlist, with priority, until the next opening arises.

18. Nutrition (Meals and Snacks): Breakfast, lunch, and a PM snack are served family style, supporting children to do things for themselves. This program participates in the Child and Adult Care Food Program (CACFP). Foods reflect the home and community cultures and are high in nutrients and low in fat, sugar, and salt. All children eat the same foods unless there is a documented allergy or special food need.

Good nutrition is important to children's overall development and well-being. Our goal is to provide the best possible nutrition environment for the children in our center by providing a healthy and balanced diet that includes fruits, vegetables, and whole grains and limits foods and beverages that are high in sugar and or fat. Teaching staff also involve families in classroom nutrition activities by sharing recipes, healthy eating tips.

Notification of all allergies to any foods will be indicated by parent/guardian on the application at the time of enrollment and will be monitored at mealtime.

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

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

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) (http://www.ascr.usda.gov/complaint_filing_cust.html) online, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form.

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

19. Health & Safety Policies and Procedures: Children's Health Records: ITAVA Academy collects health appraisals and immunization records at the time of enrollment. In compliance with State of Michigan law and licensing regulations, each child must have a series of immunizations recommended by the child's physician. A 'certificate of immunization' is required with the enrollment application and after each set of shots. If there is any variance from the recommended immunization schedule, the Health Department is the only agency to obtain a waiver for enrollment. A Michigan 'health appraisal' (physical) is required within 30 days of the child's first date of attendance. For children under 2 years and 6 months of age, it must not be older than three months. For children 2 years and 6 months of age to school age, it must be less than a year old. Health Appraisals (wellness checks) are required to be updated on a yearly basis.

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Wellness visits are important. Wellness visits can help doctors identify current health problems. Maybe your child always has the sniffles, or maybe he has a health issue without any symptoms. Your child's pediatrician can identify those sniffles as an allergy or help catch a more serious health problem before it's too late. They allow you and your child's pediatrician to keep track of your child's growth and development. Developmental monitoring can help identify any delays or problems with your child's growth and development. Again, being made aware of health issues early is the best way to ensure that they do not become more severe.

In the effort to support children's well-being, we will partner with families to remind you when it is time to schedule your child's check-up and we encourage you to bring your updated documents for our files. We have created a resource with guidance regarding developmental milestones and well-child visits. Please visit the office for information.

When is your child too sick or contagious to be brought into the center? This is a question which will present itself during your child's stay at the center; for this reason, we have set up guidelines on illnesses.

Keep your child home if s/he has...

1. A fever of 100.4 degrees F or 38 degrees C or above or has had one during the previous 24-hour period. The child must be having a temperature below 100.4 degrees F and Tylenol/Motrin free for **1 full day** before returning to the center.

2. Conjunctivitis, which is an eye infection commonly referred to a "Pink Eye". The eye is generally red with some burning or itching sensations and there is a thick yellow or green drainage being secreted through the tear duct. The child must be on antibiotics for **no less than** 24 hours and no drainage present before returning to the center. If an antibiotic is not prescribed, a child may not return to the center until all drainage is gone.

3. Bronchitis, this can begin with hoarseness, cough, and slight elevation in temperature. The cough may be dry and painful, but it gradually becomes productive. The child must be fever and Tylenol/Motrin free and on antibiotics for **1 full day** before returning to the center.

4. Rashes that cannot be identified, or that have been diagnosed by a physician as being contagious. The child may return after the rash has disappeared or has been diagnosed by a physician as being noncontagious. A physician's note will be required to return.

5. Impetigo shows up as red pimples which eventually become small vesicles surrounding by reddened area. When the blisters break the surface, it becomes raw and weeping and will eventually scab. The child may not return to the center until the infected area is completely dry and scabbed over with no weeping at all, as well as being on medication for **no less than** 24 hours.

6. Diarrhea, a watery bowel movement. The child may not return to the center until the diarrhea has subsided and has been observed at home **1 full day**. If after returning, your child has one diarrhea you will be asked to pick them up.

7. Vomiting, more than the usual spit up. Since it is impossible to diagnose all the reason why a child may vomit, **it will be assumed** the child has a gastric virus (Flu) and may not return to the center for **1 full day** from the last period of stomach upset (vomiting).

8. Thrush, characterized with a white coating on the inside of a child's mouth. Children will not be allowed to return to the center for **no less than** 24 hours while on a medication.

9. Ear Infections are common in young children. While the ear infection itself is not contagious, the symptoms preceding the infection typically are. Children diagnosed with an ear infection must be on an antibiotic for **no less than 24 hours** before returning to the center.

Children with severe colds accompanied by excessive damage, coughing, slight fever and/or excessive sneezing, will be asked to stay at home until further assessment by a physician or improvement of the child's condition. **If you feel your child is too ill to go outdoors with his/ her group, then s/he is assumed too sick to come to school.** Please

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keep your child home until s/he is ready to participate in all the school activities. Children who look or act differently that have unusual paleness, irritability, unusual tiredness and/or general lack of interest may be sent home for observation.

Anytime your child's illness requires medical treatment or examination the center may require a physician's note stating the diagnoses and when the child is not contagious to return to school. If at any time your child is sent home from the center for a suspected illness, a physician's note will be required for return, unless prior approval from your Director is given.

Please note that some illnesses/ communicable diseases require a longer than 24 hours stay at home. Please consult with your Director in this event; we will follow Health Department guidelines regarding exclusion due to illness.

Importance of Vision and Hearing Screenings: About one-quarter of all school-aged children have a significant vision problem. Two to three out of every 1,000 children are born with hearing impairments, which can range from mild to profound. Many more children develop hearing problems after birth. These problems can have a negative impact on language and speech development, academic performance, and overall well-being. Research shows that identifying and treating hearing impairments early – before 6 months of age – can help prevent these outcomes. According to the Michigan Department of Health and Human Services, screenings are to be administered yearly to children between the ages of 3 and 5 years of age. We partner with the Wayne County Department of Health to administer hearing and vision screenings on a yearly basis.

Developmental Milestones identify a set of functional skills/age-specific tasks that most children at a certain age range can accomplish. Your pediatrician uses milestones to indicate how your child is developing. Although each milestone occurs at a certain age level, the actual age when a typically developing child reaches that milestone can vary quite a bit. Every child is unique and develops at an individual rate. We partner with families to educate them regarding the developmental milestones.

Universal Precautions: ITAVA Academy takes precautions to protect children and adults from infections resulting from contact with blood or bodily fluids.

20. Accident and Emergency Notification Policy: As indicated on the Child's Emergency Card, parents/guardians give permission to ITAVA ACADEMY GSRP to call 911 in the event of a serious emergency. Any costs or charges incurred for 911 emergencies are the sole responsibility of Parents.

In the event of a serious injury, incident, or accident the parent or legal guardian will be notified immediately by telephone. In the event the parent/guardian is not available the emergency person indicated on the Child Information Card will be notified. In the event of a non-serious injury, incident, or accident the parent/guardian/ authorized pickup person will be notified verbally at pick-up time. Written reports are for internal use and are not provided to parent.

21. Medication Policy: Medication, except for fever reducers, can be administered during the school day with a written medical plan from the child's doctor. Medication must be in original container and accompanied with a prescription label. Bring all medications to the office. Office staff will administer the medication.

22. Weapon, Drug and Smoke Free Faculty: In compliance with the law, the Academy prohibits the use of tobacco products in the building and/or the premises, including the parking area. Smoking is also not permitted during field trips. Staff will ask anyone under the influence of drugs or alcohol to leave. Weapons are not permitted on the premises, including those carried by people with concealed weapon permits.

23. Policy for Reporting Abuse and Neglect: Teachers and staff are mandated reporters and have the responsibility to make an immediate verbal report to DHS upon suspecting child abuse or neglect. The report is made to the Michigan Centralized Intake Unit (1-855-444-3911). A follow up written report must be made to the Centralized Intake Unit within 72 hours.

24. Grievance Policy: All parent concerns and grievances should be brought to the attention of the teacher. If, after consultation and discussion with the teacher, the parent feels the matter has not been properly settle, the parent may bring the matter to the attention of the GSRP Director who will work with the family member in a collaborative effort to resolve the issue.

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25. Field Trips: Prior to each field trip, Parent/Guardian will be required to fill out a form giving the child permission to go on the field trip. Where a parent does not give permission for the child to go on the field trip, parent will keep child at home.

Outdoor Policy: I understand all children go outside, weather permitting. I will make sure my child is dressed appropriately. I understand the children may take walks outside with their teachers. The walks will be limited to a 2 block radius in any direction within the neighborhood.

26. IPM (Integrated Pest Management): Steps taken to avoid using chemicals to control bugs and pest infestations (IPM) are the first line of defense to provide a safe, healthy environment. A monthly maintenance program is established and if chemical intervention is needed, all treatments are conducted after 7:00 p.m. on Friday or Saturday when the center is closed. A written notice will be posted in the main office and on the front door.

27. Sample Daily Schedule

GSRP

Scheduled Class Time: 7:45-3:15

<i>7:45-8:00- Arrival/Hand washing/Temperature</i>	<i>11:15-11:45- Outdoors</i>
<i>8:00-8:10- Morning Meeting; Greeting time</i>	<i>11:45-12:35 - Bathroom /Lunch/Prepare for rest</i>
<i>8:10-8:20- Read-a-loud Vocabulary and Comprehension</i>	<i>12:35-1:35 Rest Time: Sleeping or quiet, solitary on your cot play</i>
<i>8:20-9:00- Handwashing and Breakfast</i>	<i>1:35-1:55 Clean up/Bathrooms</i>
<i>9:00-9:15 Large Group: children and adults participate in movement and music activities</i>	<i>1:55-2:15 Snack time</i>
<i>9:15-9:25- Planning</i>	<i>2:15-2:25 Read-A loud/ concepts of print</i>
<i>9:25-10:25- Choice time; Children have the time to explore, create, investigate using all materials in the classroom.</i>	<i>2:25-2:35 Large Group; Adults and children participate in movement, music, activities</i>
<i>10:25-10:35- Clean-Up</i>	<i>2:35-2:45- Prepare for outdoors</i>
<i>10:35-10:45- Recall: children share what activities they participated in</i>	<i>2:45-3:15 Outdoors</i>
<i>10:45-11:05 Small Group- Adults plan experiences based on children's interest and develop</i>	<i>3:15 Dismissal</i>
<i>11:05-11:15 Bathrooms/ Prepare for outdoors</i>	