

Service Area: Program Design, Management & Quality Improvement

ANNUAL REPORT

POLICY:

Each summer, the Charlotte County Early Childhood Programs produce an annual report that includes quantitative and qualitative data as well as anecdotal information related to the school year. This completion of this report complies with United States' Office of Head Start and is available to the public, including stakeholders, program participants and decision-makers.

PROCEDURE:

1. The Coordinator of the ECP is responsible for producing the annual report.
2. The annual report will be completed no later than July 31.
3. The annual report is available on the agency web site. Paper copies are sent directly to School Board members, senior members of the district leadership team, select community partners and Policy Council members.

The annual report includes, but is not limited to:

1. Total amount of public and private funds received and the amount from each source;
2. Explanation of budgetary expenditures and proposed budget for the fiscal year;
3. Total number of children and families served, average monthly enrollment (as a percentage of funded enrollment), and percentage of eligible children served.
4. Results of the Federal Secretary's most recent review and the financial audit;
5. Percentage of enrolled children who received medical and dental exams.
6. Information about parent involvement activities;
7. Agency's efforts to prepare children for kindergarten;
8. Other information the Federal Secretary requires.

RELEVANT FORMS:

Service Area: Program Design, Management & Quality Improvement

BUILDING ACCESS POLICY – BAKER

POLICY: The program takes every necessary measure to provide the safest environment for students, their families and EC staff members.

PROCEDURE:

- Each person entering Baker Center must present his/her ID to our security camera and state a purpose for visiting, prior to entering the building.
- Once the visitor has gained entrance to the lobby area, the front desk employee needs to check the student's emergency card to make sure the visitor at the desk is permitted to pick-up the child.
- Visitors are asked for their driver's license, again. The license is placed in our Raptor Screening System. Once approval to enter the building is received, the person is given a visitor sticker with his/her name and photo.
- If the visiting person is providing a service to or a visit to a student (i.e. therapist, DCF etc.), that person must show his/her ID badge and must sign-in on the computer. DCF visitors sign in the binder that is in a lower locked cabinet to the left of the receptionist.
- Outside doors are open for student arrival in the lobby from 7:45am – 8:30 am.
- The double doors to gain entry to the school are unlocked at 8:00 am.
- All doors are re-locked at 8:30am and the same entry system applies as stated above.
- Any person entering a classroom is asked to sign-in and follow the classroom rules for entry such as handwashing etc.
- Outside doors are open for student dismissal in the lobby from 2:15 pm- 3:00 pm.
- The double doors to the school's interior are unlocked at 2:30pm.
- The outside doors are re-locked at 3:00 pm and the same entry system applies as stated above.

RELEVANT FORMS:

Service Area: Program Design, Management & Quality Improvement

BUILDING ACCESS POLICY – HOPE

POLICY: The program takes every necessary measure to provide the safest environment for students, their families and EC staff members.

PROCEDURE

- Each person entering Baker Center must present his/her ID to our security camera and state a purpose for visiting, prior to entering the building.
- Once the visitor has gained entrance to the lobby area, the front desk employee needs to check the student's emergency card to make sure the visitor at the desk is permitted to pick-up the child.
- Visitors are asked for their driver's license, again. The license is placed in our Raptor Screening System. Once approval to enter the building is received, the person is given a visitor sticker with his/her name and photo.
- If the visiting person is providing a service to or a visit to a student (i.e. therapist, DCF etc.), that person must show his/her ID badge and must sign-in on the computer. DCF visitors sign in the binder that is in a lower locked cabinet to the left of the receptionist.
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RELEVANT FORMS:

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CLASS OBSERVATIONS

POLICY: Charlotte County Early Childhood Programs conducts CLASS observations twice a year, once in the fall and once in the spring. The first observation will be conducted by an outside agency, and the second by an Education Specialist.

PROCEDURE:

1. The ECP Program Manager contacts the outside agency to set up observation dates.
2. Education Specialists help prepare the teaching staff for the CLASS observation-visits by providing training, support materials and videos.
3. In the fall, the outside agency conducts CLASS observations.
4. The outside agency submits CLASS score reports to the ECP Program Manager, who share the reports with the Education Specialist.
5. The Education Specialist schedules an appointment with each classroom teaching team to share score results.
6. During the meeting the team creates a Teaching Team Focus Plan, which is added to the Classroom Date Chat form by the Education Specialist and then is sent to the teaching team.
7. The Education Specialist offers resources and training to the teaching team.
8. A date is set for the Education Specialist to visit the classroom and observe and check the implementation of the Focus Plan.
9. The Education Specialist then determines if more support/time is needed for teachers to work on their Focus Plans.
10. The procedure is repeated in the spring, with the Education Specialist conducting the observations.

RELEVANT FORMS:

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FAMILY COMMUNICATION

POLICY: The program ensures that effective two-way comprehensive communications between staff and parents is carried out on a regular basis throughout the program year. Communication with parents is carried out in the parents' primary or preferred language or through an interpreter, to the extent feasible.

PROCEDURES:

1. Information and materials are provided in the primary or preferred language or through an interpreter to the extent feasible.
2. Program staff are available to share information, (in primary or preferred language), on program activities and to provide opportunities for parents to share and give feedback on their children. Information will flow in a variety of ways:
 - Orientation and Open House Activities
 - Telephone, Face-to-Face, Email, ChildPlus or Apps
 - Family Partnership Agreement
 - Notes/Correspondence
 - Meetings/Trainings
 - IEP Development
 - Calendars/Newsletters
 - Home Visits
 - Parent/Teacher conferences
 - Ongoing Follow-Up
 - Surveys/Questionnaires
3. ECP staff create, use and provide procedures and forms to address concerns to parents and community to enable parents to express concerns regarding the program that cannot be resolved through regular channels.
4. ECP staff collaborate with local organizations for assistance and resources in the community.
5. ECP staff utilize other parent staff and community agencies to obtain bilingual staff for interpretation services.
6. ECP staff ensure sensitivity to family culture and heritage.

7. ECP staff respond in a timely manner to any inquiries made by parents in regards to programmatic questions and concerns.
8. ECP staff provide updates at parent committees and Policy Council meetings.

RELEVANT FORMS:

nmh

Service Area: Program Design, Management and Quality Improvement
COMMUNICATION, GOVERNING BODY AND POLICY COUNCIL

POLICY: The program ensures that all required information is provided regularly and as mandated, to the School Board (Governing Body) and the Policy Council.

PROCEDURES:

1. Annually, provide members with an orientation package and training necessary to understand and participate fully in the collective decision- making process to include an overview of the following:

- Agency's History
- Head Start Performance Standards
- Mission Statement
- Roles and Responsibilities of the Council
- Organizational Structure
- Community and Self-Assessment information
- Program and School Readiness Goals

2. Hold regular meetings that facilitate discussion and open exchange of ideas.

3. Share required reports, information and updates as indicated by Head Start Standards

4. Prepare and distribute Policy Council packets one week prior to each regularly scheduled meeting.

RELEVANT FORMS:

Service Area: Program Design, Management and Quality Improvement

STAFF COMMUNICATION

POLICY: The program has mechanisms in place for regular communication among all program staff to facilitate quality outcomes for children and families.

PROCEDURES:

1. Establish (through Administration) a supportive environment in which open staff communication is encouraged and appreciated.
2. Provide opportunities for staff to share ideas and concerns to administration, colleagues, and supervisors.
3. Schedule regular meetings with staff at all levels of the program, provide an agenda, and distribute minutes.
4. Utilize computer technology to support and enhance an on-going exchange of information.
5. Provide opportunities through program and strategic planning sessions for staff input and constructive feedback.
6. Distribute annual staff satisfaction surveys in April, collect, compile, and analyze data in May.

RELEVANT FORMS:

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COMMUNITY ASSESSMENT

POLICY:

PROCEDURE:

RELEVANT FORMS:

nmh

Service Area: Program Design, Management & Quality Improvement

CONFIDENTIALITY

POLICY: The program has policies in place that protect the privacy of the children and families enrolled.

PROCEDURE:

1. All children's folders must be kept in a locked file cabinet.
2. Only parents may review their own child's record. They may not have access to any information about another child/family.
3. Information concerning a child/family will not be submitted to any other person or agency without written permission from the parent/guardian. Request for information must be referred directly to the appropriate manager or Head Start Coordinator.
4. Staff will not discuss matters concerning a child or family with other staff unless the information is relevant to that staff person.
5. Under no circumstance is a staff person to discuss one family's business with another family or an outside source.
6. Violation of these policies may be grounds for disciplinary action.
7. Annually, each staff person reads and signs a copy of the Confidentiality Policy.

RELEVANT FORMS:

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GOVERNANCE - ELECTION OF POLICY COUNCIL MEMBERS

POLICY: The program informs parents at the time of their child's enrollment of parent opportunities to become part of the program's policy council, parent committee, health advisory and family services advisory.

PROCEDURE:

1. At enrollment Family advocates go over the informational survey for Policy Council, Parent Committees, Health Advisory and Family Services Advisory. At this time, parents start the process to become a Policy Council member.
2. Staff members process all informational surveys for parents who are interested in becoming part of the Policy Council. These names are placed on a Policy Council ballot to complete the election process.
3. Program Orientation is held on the first day of school. Interested parents are asked to speak as to why they would like to represent their school at the Policy Council meetings. At this time parents, by ballot, elect a representative and alternate member from their school site to represent their class at the Policy Council meeting.
4. If and when an elected member of the council leaves, the alternate for that school is asked to represent in his/her place.
5. Each school year, current Policy Council members vote to re-elect community members or to add community members to the council.

RELEVANT FORMS:

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EMERGENCY CARDS

POLICY: The program ensures that children are only released into the care of people who are approved by his or her legal parents/guardians.

PROCEDURE:

1. Emergency cards are filled out at the time of enrollment and are updated as needed.
2. The original copy is kept in the front office, and a copy is kept in the child's classroom. Each time a change is made to a card, it is the responsibility of the staff member overseeing the change to ensure that the teacher gets a copy of the updated card.
3. Teachers will not release a child to any unknown or unauthorized person who is not on the emergency card without checking with the office first. The person will need to come to the office and show identification, and the parent will be contacted.
4. Teachers will not release a child to a person who appears under the influence. Contact the child's Family Service Worker or the Program Director for assistance.
5. Any changes to the emergency card **MUST** be done in person. Phone calls to make changes will not be accepted.
6. Please encourage parents and guardians to list on the emergency card all adults who may have permission to pick up the child.

RELEVANT FORMS:

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FAMILY & HEALTH ADVISORY COMMITTEE

POLICY: The program has an established Health Advisory Committee which convenes each Fall to discuss community health and nutritional needs that would impact the program, additional meetings may be called as needed. This advisory committee assists in the development of health policies and procedures and supports Head Start's objective to provide continuous and accessible health care for children and families. Its members are knowledgeable about prevalent community health issues and can respond to questions from Head Start staff about strategies to address them.

PROCEDURE:

1. The program's Family & Health Specialist facilitates meetings and the Advisory's membership, as needed, and as determined by the program's community and self-assessment.
2. The committee includes Head Start parents and staff, health and human services professionals, and other community volunteers who are representative of the racial and ethnic groups served by the local Head Start program. Committee members meet to discuss program issues in the medical, dental, mental health, nutrition, and human services fields.
3. The HSAC can provide guidelines regarding:
 - health, dental, and mental health services
 - children with asthma
 - standards for prenatal care
 - hemoglobin and lead tests
 - dental visits and services
 - EPSDT guidelines/ interpretation
4. In addition, the HSAC can contribute to the community assessment by responding to questions about the availability of local providers, including managed care providers, changes in Medicaid, the implementation of partnerships, sources of funding for local health services, and ways to inform community health providers.

RELEVANT FORMS:

Service Area: Program Design, Management & Quality Improvement

HEALTH & SAFETY SCREENER

POLICY:

PROCEDURE:

RELEVANT FORMS:

nmh/nj

Service Area: Program Design, Management & Quality Improvement

INCIDENT INVOLVING AN ALLEGATION OF ABUSE BY A STAFF MEMBER REPORTING

Policy: In the event that there is suspected abuse or neglect while children are in program care, staff will strictly adhere to all federal, state and local reporting and notification requirements.

Procedure:

1. Staff member with the concern reports incident to DCF.
2. Director or Manager reports incident to the Punta Gorda Police Department, (SRO) or Charlotte County Sheriff's Office
3. Director or Manager reports incident to the CCPS Department of Human Resources.
4. Director or Manager contacts parents of all students involved to disclose the incident.
5. If needed, Director or Manager sends out automated phone message to all parents the same day the incident occurs
6. Director or Manager reports incident to OHS Program Specialist, provide statements and additional documents upon request.

Relevant Forms:

nmh

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ONBOARDING - NEW HIRE

POLICY: Before a new ECP applicant is hired, a background check is done and references are contacted. The program provides orientation and training for each new person hired. This new employee is required to provide documentation of good health, to review the Standards of Conduct with a person from our leadership team, to provide a signed attestation of good moral character, and to undertake further employee training resulting in completion of a certificate.

PROCEDURE

Required Forms:

- Employees are required to read & sign the Early Childhood Programs Standards of Conduct.
- A Doctor's note is required, stating that the person being hired is free from communicable diseases and is healthy and able to work with children.
- Tuberculosis Questionnaire is completed.
- An Attestation of Good Moral Character is signed.

Training

- Child Abuse Training
- Blood Bourne Pathogens Training
- Fire Extinguisher Training
- New Staff Training and Orientation that includes the mission, philosophy, history of the program, job expectations, operating policies and procedures.
- Early Childhood Program Handbook Review
- Standards of Conduct Training with a member of our leadership team.

Km/nmh

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ONGOING MONITORING

POLICY: The program will monitor required tasks and responsibilities to ensure that they are completed in accordance with all applicable guidelines including; Head Start Performance Standards, NAC Accreditation guidelines, DCF regulations, DOE statute, and internal policies and procedures. Monitoring activities are scheduled and executed according to the program's Ongoing Monitoring Matrix and accompanying guidance. Ongoing monitoring is facilitated by and is the responsibility of, leadership team members representing each content area. Procedures include a variety of compliance activities and data review. Results of monitoring will be used to demonstrate compliance, areas for ongoing and timely improvement, and to contribute to the Strategic Planning and Goal Setting processes.

PROCEDURE:

1. Directors, managers, consultants and other supervisors will develop checklists for staff to use in setting up their environments and processes. These may include:
 1. Checklist for Child Development and Disabilities.
 2. Checklist for Parent Involvement, Family Services and Mental Health.
 3. Checklist in Health and Safety.
 4. Child/Adult Care Food Program.
 5. Nutrition/Mealtimes Checklist.
 6. Bus Inspection.
 7. Van Inspection.
2. Supervisors/Managers will implement procedures and timelines for using said checklists. Staff will use checklists in setting up and maintaining their environments.
3. Regional Managers will use checklists in monitoring sites on a regular basis and will track their visits and feedback.
4. Information about children and families will be tracked in the electronic child and family database system
5. Regular reports will be utilized by all staff both on and off line to ensure timely delivery of services to children and families.
6. Regional Managers will submit monthly reports and meet with Head Start Director monthly to review
 1. Supervision,
 2. Regional budgets,

3. Site monitoring,
 4. Attendance,
 5. Site Enrollment,
 6. Outcomes,
 7. Data tracking information,
 8. Any other information about children and families.
7. Program consultants will meet on a regular basis with Regional Managers and HS/EHS Director. In addition, Program consultants will meet and report to each Regional Manager at last once a year to discuss at a minimum:
1. Results of RM monitoring of their classrooms, using appropriate checklists.
 2. Child Plus documentation and analysis of the information.
 3. Outcomes reports.
 4. Progress on established benchmarks.
 5. Plans for improvements as needed, with emphasis on compliance issues.
 6. Information from monitoring will be shared with staff.
8. The ERSEA Manager will monitor enrollment status through audits, reports and viewing individual records.
9. Consultants may contact a staff person for minor errors with a “cc” to the supervisor. If the same issue occurs, the consultant will contact the supervisor only. Supervisors will communicate to consultants what the corrective action is.
10. Executive Director, HS/EHS Director, Human Resources Director, Operations Director and Finance Director will meet weekly to review information gathered.
11. Periodic reports to Policy Council and Board of Directors will be made by the Executive Director or designee.
12. An annual self assessment will be conducted each year (see [Program Self Assessment](#) policy) that will result in a written improvement plan to improve any deficiencies.
13. The program will be reviewed every by Office of Head Start representatives and the Oregon Department of Education. Head Start of Lane County will submit an improvement plan 90 days after receiving the written federal report. Regional Managers will receive a copy in a timely manner.
14. Results of all monitoring efforts will be included in future planning and decision making.

RELEVANT FORMS:

nmh

Policy

Procedure

Service Area: Program Design, Management & Quality Improvement

PARENT SURVEY

Policy: The program values parental/family input and uses information gathered as a means to provide direction during goal setting and program planning.

Procedure:

1. Parents/families are given a parent survey once a year in January.
2. Hard copies of surveys are distributed in the envelope in which they should be returned. Pencils are provided. Parents/families have two weeks to complete and return to their child's teacher.
3. Surveys are confidential and are distributed and collected in a way that supports this.
4. At least 60% of enrolled families must return the surveys. Follow up if needed.
5. For school accreditation (National Accreditation Commission) the count is totaled on a blank copy of the Parent Survey (in NAC notebook page 96).
6. Parent survey section of the survey verifications (page 100) is filled out.
7. Survey totals and Survey Verifications are submitted with the Request for Validation Visit.
8. Completed surveys are stored in a file folder marked Parent Surveys.

Relevant Forms:

cw/nmh

Service Area: Program Design, Management and Quality Improvement

ACCREDITATION - NATIONAL ACCREDITATION COMMISSION (NAC)

POLICY:

The program follows the Charlotte County Procedures for National Accreditation Commission (NAC). The Director and Education Specialist will receive notification by the National Accreditation Commission (NAC) when a specified school is subject accreditation. The Education Specialist member is asked to examine and respond to the standards that are used within the school. Staff members have an essential role in the implantation of the operating policies and procedures of the program. The primary goal for the accreditation is to value the physical classroom, teacher-child interaction, policies and procedures of the school. Accreditation is also needed for the Head Start Program.

PROCEDURE:

1. The National Accreditation Commission sends an email to the Director with the accreditation renewal date to complete and submit.
2. The Education Specialist uses the manual to complete the self-study, administration report, and the validation-visit report.
3. The Education Specialist requests a check for payment from the Fiscal Specialist.
4. The Educational Specialist submits all paperwork (required documentation pg. 118 in manual) and invoices, along with the check to the “National Accreditation Commission” to the address in manual by the submission date.
5. The Director receives an email informing the school when the six-week open window for visit is.
6. The Educational Specialist organizes and collects documents that go inside the National Accreditation school box. (See manual pg. 102.)
7. Upon the visit of the Validator, the Education Specialist accompanies the Validator to the classroom and/or sites.
8. After the completion of the observation the Validator, Director, and Education Specialist meet to review findings.
9. The Validator submits paperwork to the National Accreditation Commission office.
10. The Director receives an email of the certification.
11. The renewal process is every three years.

The Director receives an email from National Accreditation Commission when the 1st and 2nd Annual Report is due.

The process for accreditation can be found in the Accreditation Manual. (pg. 1). If you have questions, call the accreditation office at 1-800-537-1118.

RELATED FORMS:

cw/nmh

Service Area: Program Design, Management & Quality Improvement

SELF ASSESSMENT

POLICY:

PROCEDURE:

RELEVANT FORMS:

nmh

Service Area: Program Design, Management and Quality Improvement

STAFF SURVEY

POLICY: Annually, each staff member is asked to examine and respond to his or her own experience employed within the program. Staff members have an essential role in the implementation of the operating policies and procedures of the program. Important is that they are aware of and understand the standards of the program. The primary goal for staff surveys is to collect and understand staff opinions, perspectives, attitudes and perceptions toward and of the program.

PROCEDURE:

1. Provide each member staff survey once a year in October.
2. Make a copy of the Staff Survey for each staff member. Staff have two weeks to complete and return the survey to the Educational Specialist who is overseeing the National Accreditation Commission.
3. Give staff an opportunity to complete the survey in a confidential manner.
4. Collect surveys in a way that allows confidentiality for those who prefer to remain anonymous.
5. Count the total of number returned. At least 75% of the staff counted in the staff-child ratio and onsite supervisory staff must be returned.
6. Only for the school accreditation (National Accreditation Commission): count and record the totals on a blank copy of the Staff Survey (in NAC notebook page 90.)
7. Complete the Parent survey section of the survey verifications (page 100).
8. Submit survey totals and the Survey Verification with the Request for Validation Visit.
9. Store completed surveys at the school in a file folder marked Parent Surveys.

RELATED FORMS:

Service Area: Program Design, Management and Quality Improvement

SUSPENSION/EXPULSION

POLICY: The program will not expel any child from Head Start, VPK or Early Head Start due to that child's behavior. Temporary suspension of a child for persistent and challenging behaviors will be severely limited and implemented as a last resort in extraordinary circumstances where there is a serious safety threat that cannot be reduced OR ELIMINATED BY THE PROVISION OF REASONABLE MODIFICATIONS.

PROCEDURE:

The determination to suspend a child from the program will not be made prior to:

- Engaging the mental health consultant
- Collaborating with the child's parent/caregivers
- Providing reasonable modifications
- Identifying and accessing community resources, specialists, and early intervention providers

If a temporary suspension is deemed necessary, the program will support the child's return to full services as quickly as possible while ensuring child safety by continuing to engage with parents and the mental health consultant, continuing to utilize identified community resources, providing home visits, and making a determination for an IDEA referral. A written plan is developed to document action steps and supports needed to promote the child's successful return to full services. In the event that the child's behavior continues to present a serious safety threat to the child (or other children in the classroom) and all parties determine that the Head Start, VPK and Early Head Start programs are not the appropriate placement, ECP staff comply with IDEA and the Rehabilitation Act, work with appropriate agencies, consultants and the child's family to determine best placement and to facilitate transition, directly, for the child to the most appropriate placement.

RELATED FORMS:

Service Area: Program Design, Management and Quality Improvement

TRAVEL REIMBURSEMENT POLICY

POLICY: If a staff member is submitting expenses and seeking reimbursement for these expenses for in-county or out-of-county travel, the CCPS finance department has specific instructions and forms that need to be used. Proper receipts are required for reimbursement for monies paid out.

PROCEDURE:

Complete required forms:

- In-county mileage form
- Out-of-county reimbursement form

Make copies of completed forms for your records.

Submit completed forms to the secretary to the Coordinator of Early Childhood Programs.

RELATED FORMS:

In County Travel with Mileage Chart

Request for Reimbursement for Out-of-County-Travel Expenses with Instructions

Out-of-County Mileage Chart to Select(ed) Cities

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PROGRAM VOLUNTEERS

POLICY: In order to provide for the security and safety of children, families and staff, ECPs require that any person defined as a Volunteer, participating in program activities during operational periods, meet certain criteria including background checks, orientation and training. Volunteer opportunities exist primarily in the classroom, with limited opportunities for family service, administrative and operational activities. Volunteers are not allowed to have unsupervised contact with children in the program. *One of the main goals of the Volunteer Program is to “grow” substitutes and ultimately Early Childhood Program employees.*

PROCEDURE:

1. Family/community members may express interest in volunteering with the program in a variety of ways, including through interest surveys.
 2. Once interest is established, a volunteer training (which includes completing and signing appropriate agreements and forms) is scheduled by the education team.
 - Volunteer Trainings are held at The Baker and Hope Centers as often as needed.
 3. Upon successful completion of volunteer training, names will be added to current list of approved program volunteers. The list will be maintained by education staff and be made available electronically to all staff.
- Volunteers determined to be worthy candidates by education and leadership staff are encouraged to become substitutes. The program absorbs and covers all costs related to screening and processing.*
 - Substitutes determined to be worthy candidates by education and leadership staff may be hired by the program; such substitutes are encouraged to begin working on an early childhood credential. The program covers costs related to obtaining the credential, often utilizing the TEACH Scholarship Program.

Definitions/Guidelines:

- A volunteer is defined as any non-staff person, 18 years or older, wishing to perform volunteer duties for the program.
- Volunteers may include parents, guardians, family members and members of the community.
- Volunteers will not be counted in child/staff ratios.
- *Volunteers may never be left alone with children.*
- *Volunteers may not assist with toileting or diapering.*
- Volunteer hours may not exceed 10 per month. Volunteers wanting to spend more than 10 hours per month volunteering may only do so after meeting all DCF background screening and training requirements.

*During times of extreme staff shortage, volunteer training and classroom hours may be waived for applicants as leadership deems necessary. All new hires receive orientation and new staff training.

RELATED FORMS:

- Volunteer Agreement Form

cb/nmh