



# Family Handbook

(Policies & Procedures)

# Kids At Heart Child Care Center

## Mission Statement

We believe all children need to have opportunities to learn and grow and develop into all they can be as healthy, respectful, responsible, and self-sufficient individuals.

We are dedicated to providing the facilities and services in order for them to realize these opportunities. Our assurance to parents is to teach and care for your children as we strive to make a difference.

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### **PROGRAM INFORMATION:**

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## Table of Contents

<b>Philosophy</b> .....	4
<b>General Information</b> .....	5
<b>Enrollment Agreement and Government Forms</b> .....	5
<b>Withdrawal Policy</b> .....	5
<b>Dismissal Policy</b> .....	6
<b>Hours of Operation</b> .....	6
<b>Holidays</b> .....	6
<b>Payment Policy</b> .....	6
<b>Parental Participation and Access</b> .....	7
<b>Staff to Child Ratio</b> .....	8
<b>Nutrition</b> .....	8
<b>Classroom Schedules</b> .....	9
<b>Programs</b> .....	11
<b>Formal Assessments</b> .....	14
<b>Swimming</b> .....	14
<b>Bringing Toys</b> .....	14
<b>School Age Absentee Procedure</b> .....	14
<b>Outdoors Play</b> .....	14
<b>Arrival and Departure</b> .....	15
<b>Release of Child</b> .....	15
<b>Transitioning</b> .....	15
<b>Security</b> .....	16
<b>Transportation of Children</b> .....	16
<b>Safety and Emergency Policy</b> .....	16
<b>Evacuation</b> .....	17
<b>Discipline Policy</b> .....	17
<b>Health and Hygiene</b> .....	18
<b>Immunizations and Medical Statements</b> .....	19
<b>Management of Communicable Diseases</b> .....	20
<b>EPSDT</b> .....	22
<b>IDEA Developmental Screening Information</b> .....	24

# Philosophy

Kids At Heart Childcare & Learning Center recognizes that our mission is to serve children, staff, families, and communities.

We have made a commitment to provide positive, nurturing, and enriched learning environments and experiences that foster cognitive, physical, social, and emotional development in each child as an individual. It is our philosophy that each child will attain his/her potential if given the appropriate guidance and activities to promote this development. Our center highly emphasizes a curriculum that includes a full day of creative and constructive learning. Along with art, computer lab, and dramatic play, your child is offered educational instruction in reading, math readiness, science, language arts, and social studies.

We provide teaching opportunities to our staff that promote personal and professional growth and development that further enhances their abilities and empowers them to bring necessary, key experiences to the children's' daily environment. They attend periodic in-services on pertinent issues such as Behavior Modification, Play Therapy, and Child Development. In addition, staff members are trained in first aid, the recognition, prevention, and management of communicable diseases and recognition of child abuse. All full time teachers at our center are certified in early childhood development and/or degreed in education. Therefore, weekly lesson plans and daily reports are posted, and parent-teacher communication is encouraged for your child's optimal development. You may be secure in knowing that your child is in the care of a loving, knowledgeable and professional team member who deeply values your child as an individual and who will contribute positively to their overall development.

We provide assurances to families that their children benefit from the daily experiences we offer. We recognize that the parents are the primary source of education in their child's life. Through this recognition, we strongly encourage participation and support from the parents. Parents are welcome to visit their child or to participate with them in their classroom at any time during the day.

When knowing that your child is in great hands, families can pursue careers and activities within our communities that contribute to and enhance the healthy development of the family unit and the community as a whole. We are committed to developing quality standards and establishing a strong presence through growth and awareness that effectively impacts the early childhood care and education community.

## General Information

Kids At Heart Childcare & Learning Center (Kids At Heart Clev-Mass) is licensed by the Ohio Department of Jobs and Family Services to provide childcare for children ages six weeks to 12 years. The License is posted in the front office. Laws, rules, and regulations governing our child day care center are available in the office for review upon request. Any person suspecting a violation by the center may call the Department of Human Services. The toll-free number is posted on the license. The Administrator and each employee of the center are required to report their suspicions of child-abuse or child neglect.

The center's licensing records, including ODHS compliance reports, are posted in the office. Evaluation forms from the Health, Building, and Fire departments are available upon request, along with rosters of names and telephone numbers of consenting parents, custodians, or guardians of children attending the center.

Kids At Heart does not discriminate on the basis of race, color, gender, religion, national or ethnic origin in the administration of our educational, admission and employment policies. Our Federal Tax ID number will be given to parents upon request.

Registration packages include an Emergency transport permission section. This must be signed by parents/guardians. Failure to sign the emergency transport permission will result in the center declining the enrollment opportunity.

There is an annual registration fee associated with any Registration Packet submitted to Kids At Heart.

## Enrollment Agreement and Government Forms

A child becomes enrolled in a program at the center after the registration fee has been received, the Administrator confirms the availability of space and the required paperwork is received. This includes the basic enrollment and health information. Any change to this information must be communicated to the office immediately so that current information is always on file. This is for the safety of your child. A medical form signed by a physician or certified nurse practitioner is required to be submitted within 30 days of admission. Failure to submit a current medical form will result in dismissal from the program. The medical form must be updated every 13 months. Kids At Heart reserves the right to reject applications for enrollment on a case-by-case basis. Your child's enrollment will be terminated immediately if you or your child endangers the health, safety or well-being of our center and the other children enrolled. Decision for termination is at the sole discretion of Kids At Heart Child Care Center management.

## Withdrawal Policy

Should it become necessary for you to withdraw your child from our Center, we ask that you please give a 14-day written notice. Please obtain a Withdrawal Form from the Director. This form will allow us to collate information regarding withdraws and make any necessary changes. If you do not provide us with a 14-day notice, your child's full tuition will be charged for the remaining two weeks regardless if your child attends.

## Dismissal Policy

Kids At Heart reserves the right to discontinue the enrollment of any child for any reason as it sees fit. Kids At Heart Child Care Center is a private center. Applications for enrollment are all considered without regard to race, religion, color, national origin or sex, rather with regard to how each individual fits into our programs.

## Hours of Operation

Kids At Heart is open from 6:30 AM - 6:30 PM, Monday through Friday. Should the Center be closed for an emergency (weather, loss of utilities) you will be notified by a team member or by the local news (school closing reports). The Center operates a full day program for school-age children when school is closed for vacations, delays, or cancellations.

## Holidays

The center will be closed in observance of the following holidays: New Years Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day. We will close early on Christmas Eve and New Years Eve at 3:00PM. All children enrolled to attend on any of these days, full time or part-time, will still be charged their Total Agreed Tuition per child for these days in full.

## Payment Policy

Tuition per family agreement is due by Friday prior to the week for which your child will be attending. All tuition is payable by check, cash or money order. Yearly receipts for paid tuition will be given out at the end of each year upon request. Additional requests for reports may incur an additional management fee.

The Total Agreed Tuition will be charged regardless of absence due to illness, or for any other reason.

Co-payments from families receiving assistance are considered as tuition owed to Kids At Heart and are subject to the same policies regarding payment.

## Late Payment Policy

There will a late payment fee of \$15 for late tuition and fees which are overdue. Any account with a greater than \$0 balance will automatically be charged a \$15 late fee each week. After two (2) weeks of non-payment, your child may be dis-enrolled. You are still responsible for the full amount owed after dis-enrollment. If you do not pay in a timely fashion, your past due account may be sent to collections. To re-enroll, you delinquent balance must be paid in full. An additional registration fee of \$95 will be assessed to re-enroll each child. This policy also applies to families receiving assistance.

## Returned Payment Policy

A \$35.00 returned payment fee will be imposed if a payment has been returned unpaid. The original payment amount, plus the fee must be replaced with a money order or cash before your child may return to the Center. There are no exceptions. We reserve the right to refuse future payments by check.

## Late Pickup Policy

Timely pickup of your child from our center is encouraged. The center closes at 6:30 PM every day. **A Late-Pickup Fee of \$10 will be charged at 6:31 PM** and an additional \$2 per minute fee will be charged after 6:40 PM with a maximum of \$100. Late Pickup Fees will be due by Friday at 6:30 PM.

## Parental Participation and Access

We hold the premise that parents are the primary educators in their child's life. We view our responsibility as caregivers to be an extension of the home, not a replacement. Recognizing that parental involvement is essential to your child's preschool education, we welcome and encourage your participation whenever possible.

Parents are invited to participate in their child's activities in a variety of ways. Parents may assist in the classrooms for special events or holiday parties. They may accompany their child on field trips or simply observe or participate with their child in the classroom. Your child's weekly lesson plan will be distributed to parents each week so that they may follow and participate in their child's activities.

Our center has established an open door policy where parents are cordially invited to observe any of our programs or visit your child at any time. However, we do require that all visitors check-in with the Director or Administrator.

While you are at the center, please feel free to communicate any comments or concerns you may have about your child's care or our program in general. An appointment will be set up at the earliest possible time to discuss these comments or concerns. Should you wish to talk with the Director or a specific teacher, we ask that you give us prior notification of your visit in order that we can arrange a mutually convenient time to discuss your concerns. (Please remember that teachers are not available for conferences during class time, as they are required to give all children their full attention at that time). For the safety and protection of your child, this open door policy is limited to the custodial parents and/or custodians and guardians of children enrolled in our program. Other relatives of children enrolled in our program will not be afforded this open door visitation policy unless we have signed and dated written permission from you.

At least once during the school year, teachers of every program at the center will arrange to have a parent-teacher conference in order to discuss your child's progress, behavior, social, and physical needs. If an in-person conference cannot be scheduled, a telephone conference may be substituted. Additionally, teachers will periodically issue progress reports that are designed to point out your child's progress, strengths, and weaknesses. This general assessment will assist you in focusing on specific areas or needs in your child's development.

The center will publish a monthly newsletter in order to keep you informed of the various activities and upcoming events that are planned throughout the year. This newsletter may also provide recognition for new student enrollment, condensed teacher biographies, student/teacher of the

month awards, the monthly menu, as well as other interesting insights and happenings at the center, such as family night, date night, and seasonal events.

## Staff to Child Ratio

Kids At Heart enrolls children from ages 6 weeks to 12 years. The center's current license capacity can be found on our license, which is posted in the office.

Our center will have one teacher for:

1. Every five infants who are at least 6 weeks old, but less than 12 months old, with a maximum group size of 2:12.
2. Every six infants who are at least 13 months old, but less than 18 months old, with a maximum group size of 2:12.
3. Every seven toddlers who are at least 18 months old, but less than 30 months old, with a maximum group size of 2:14.
4. Every eight toddlers who are at least 30 months old, but less than 36 months old with a maximum group size of 2:16.
5. Every twelve preschool children who are at least three years old, with a maximum group size of 2:24.
6. Every fourteen preschool children who are four years old or five years old, and who are not school children, with a maximum group size of 2:28.
7. Every eighteen school-age children who are up to twelve years old, with a maximum group size of 1:18.

## Nutrition

Breakfast, hot lunch, and snacks are provided by the center every day. Our prepared meals constitute one-third of the child's recommended daily dietary allowance and include food from all the basic food groups. All of the center's meals are prepared and served in accordance with the strict nutritional requirements of the State of Ohio Department of Education/Child and Adult Care Food Program.

Breakfast is served between 7:30 AM and 8:30 AM each morning. Our kitchen stops serving breakfast promptly at 8:30 AM. Children arriving after this time will need to be fed at home prior to arrival at the center. A hot lunch is served between 11:00 AM and 12:00 PM. A variety of nutritional snacks are served between 2:30 PM and 3:00 PM. School age children will be served a snack when they arrive at the center from school.

Individual dietary needs or special food allergies must be brought to the attention of the Director. After communicating these needs and completing the proper forms, it is the parent's responsibility to provide his/her food accordingly to accommodate child's modified dietary requirements.

For infants, our Center will provide infant formula, cereal and jar food. If parents elect to provide their own infant's food, all bottles and jars of food must be labeled when brought into the Center daily. You will be asked to provide a feeding and napping schedule for your child.

For breastfeeding mothers, if desired, there is a quiet space available in the shared restroom between the Infant 1 & 2 classrooms to breast feed and/or pump for your baby. Please ask a staff member for guidance into this space.

## Classroom Schedules

### Infant Schedule

We follow the parents' and infant's lead for feeding and napping. Diapers will be checked and or changed every hour.

06:30 AM - 07:30 AM	Arrival, Parent/Caregiver information exchange, wash up
07:30 AM - 08:30 AM	Breakfast
08:30 AM - 09:00 AM	Gross motor manipulative, patio play
09:00 AM - 10:00 AM	Story time, Book time, Listening Music
10:00 AM - 10:30 AM	Wash-up and Snack
10:30 AM - 11:00 AM	Cause and effect manipulative, Fine motor development
11:00 AM - 11:30 AM	LUNCH
11:30 AM - 12:00 PM	Language Arts experiences
12:00 PM - 01:30 PM	Rest/Quiet time/Nap time
01:30 PM - 02:00 PM	Wash-up and Snack
03:00 PM - 03:30 PM	Story time, Interactive book play
03:30 PM - 04:30 PM	Music and Movement
04:30 PM - 05:00PM	Fine motor manipulative
05:00 PM - 06:30 PM	Departure/Parent communication/Interactive floor and small group play.

### Toddler Schedule

06:30 AM - 07:45 AM	Arrival/Semi-Structured Activities/Wash hands
07:30 AM - 08:00 AM	Breakfast
08:00 AM - 08:30 AM	Playroom/Gross Motor/Indoor-Outdoor
08:30 AM - 08:45 AM	Bathroom/Toileting/Hand washing
08:45 AM - 09:00 AM	Cleanup
09:00 AM - 09:15 AM	Circle Time/Good Morning/Calendar/Weather
09:15 AM – 09:45 AM	Math Readiness
09:45 AM - 10:15 AM	Arts
10:15 AM - 10:45 AM	Reading Readiness
10:45 PM - 11:00 AM	Cleanup/Bathroom/Hand washing
11:00 AM - 11:45 AM	LUNCH
11:45 AM - 01:45 PM	Nap/Quiet Time
01:45 PM - 02:00 PM	Wakeup/Bathroom/Hand washing
02:00 PM - 02:15 PM	Snack
02:15 PM - 02:45 PM	Science/Social Studies

02:45 PM - 03:15 PM Gross Motor/Outdoor/Indoor Play  
 03:15 PM - 03:45 PM Language Arts  
 03:30 PM - 03:45 PM Music  
 04:15 PM - 04:45 PM Language Arts/Learning Centers  
 04:45 PM – 06:30 PM Small Group Activities/Parent communication/Departure

## Preschool Schedule

06:30 AM - 07:30 AM Arrival and Center Activities  
 07:30 AM - 07:45 AM Wash Hands  
 07:45 AM - 08:15 AM Breakfast  
 08:15 AM - 08:45 AM Center activities, Transition to classroom  
 08:45 AM - 09:00 AM Bathroom/Toileting  
 09:00 AM - 09:30 AM Circle Time/Good Morning/Calendar/Weather  
 09:30 AM – 10:00 AM Arts  
 10:00 AM - 10:30 AM Gross motor indoor/outdoor  
 10:30 AM - 11:00 AM Language Arts  
 11:00 AM - 11:30 AM Music, Wash hands  
 11:30 AM - 12:00 PM LUNCH  
 12:00 PM - 02:00 PM Nap/Quiet Time  
 02:00 PM - 02:30 PM Snack  
 02:30 PM - 03:00 PM Math  
 03:00 PM - 03:30 PM Gross Motor/Outdoor/Indoor Play  
 03:30 PM - 04:00 PM Science  
 04:00 PM - 04:30 PM Music/Bathroom/Cleanup  
 04:30 PM - 05:00 PM Circle time/Storytime  
 05:00 PM - 06:30 PM Table work/Small group/Parent communication/Departure

## School Age Schedule

06:30 AM - 07:30 AM Arrival and Center Activities  
 07:30 AM - 08:00 AM Breakfast/Restrooms  
 08:00 AM - 08:45 AM Student choice activities  
 08:45 AM - 09:00 AM Cleanup  
 09:00 AM - 11:00 AM Hobby time: Setup, discussion, activity, cleanup  
 11:00 AM - 11:15 AM Restrooms  
 11:15 AM - 11:45 AM Center activities  
 11:45 AM - 12:15 PM LUNCH  
 12:15 AM - 12:45 AM Outdoor time  
 12:45 PM - 02:00 PM Student choice activities  
 02:00 AM - 02:30 PM Snack  
 02:30 PM - 04:30 PM Camp fun: Set up, discussion, activity, cleanup  
 04:30 PM - 05:00 PM Outdoor time  
 05:00 PM - 06:30 PM Center activities/Parent communication/Departure  
 03:00 PM - 03:30 PM Gross Motor/Outdoor/Indoor Play  
 03:30 PM - 04:00 PM Science  
 04:00 PM - 04:30 PM Music/Bathroom/Cleanup

04:30 PM - 05:00 PM Circle time/Storytime  
05:00 PM - 06:30 PM Table work/Small group/Parent communication/Departure

## Programs

### Infant Program (6 weeks to 18 months)

The Center's most important objective is to offer an atmosphere of love and confidence for your infant through the provision of a warm, nurturing, and secure environment. The latest psychological studies demonstrate that infancy is the most important time in a child's life. This is the time when bonding (the process of building strong, lasting emotional ties), feelings of self worth, confidence, independence, and fears (both healthy and unhealthy) are rooted for a lifetime. We are dedicated to maintaining the strong bonds of intimacy, warmth, and security that your child enjoys at home with you, and we are committed to meeting your child's physical and emotional needs while he or she is in our care.

Both Jr. and Sr. Infant programs provide the opportunity for your baby to develop at his or her own pace in an atmosphere of security and love. The spacious, bright and cheerful rooms were specifically designed to be visually stimulating with pictures, mobiles, unbreakable mirrors, and colorful toys. Throughout the day, the caregiver will move infants to various activity centers within the room. Our program incorporates an infant stimulation curriculum that includes music, songs, reading books, gross and fine motor skills and tactual activities. Our infant teachers make a continual effort to spend as much time as possible during the day interacting with children, one on one and in the group activity center. All of our toys and equipment have been carefully selected to promote the key learning experiences of early childhood development.

Infants will enjoy quality rest and sleep in their own crib, which is located in a special designated area of the infant room. Infants are placed in their cribs only for napping. Please feel free to bring in a favorite stuffed animal or blanket for your baby to cuddle with at naptime. Our infant sleeping position policy for infants will be to sleep on their backs. There will be no exceptions to this policy.

Recognizing that each infant's daily routine is a unique individual schedule is discussed with each parent in order that home schedules may be coordinated with the care given at our center. A written record is kept of your infant's daily needs in diaper changing, eating, napping, and any other pertinent information that may be of interest. This daily record is given to the parents when their infant is picked up from the center each day.

Parents of Infants will be responsible for providing a bottle. Since older Infants may be served the foods listed on the daily menu with permission from their parents, parents must address any special dietary needs with the Director and fill out the appropriate form provided by the center to avoid any miscommunications. Bottles should be brought in and dated each day.

What to bring for Infants:

- A labeled infant blanket for naptime. Parents must wash blankets at least once a week or more, if needed.
- A bag of disposable diapers.
- A box of diaper wipes each month.
- A complete change of clothing is to be left at the center (labeled).

## **Toddler Programs (18 months to 3 years)**

The toddler program has been designed with an understanding that this stage of development represents a transitional period from infancy to preschool. Though toddlers are constantly nurtured, supported, and given loving care at the center, their curiosity and thirst for knowledge takes place in a more active and stimulating environment. Creating an atmosphere where your child develops independent thought, self esteem and confidence both individually and in groups is a primary objective of our Jr. and Sr. Toddler programs. At this level, the center's Director and well qualified staff will prepare lesson plans that incorporate the key learning experiences of early childhood education. Since this age group develops both socially and cognitively by exploration and positive interactions, the center's program offers them a wide range of activities.

Your child will be given opportunities to increase their gross and fine motor skills through exploration of various manipulative materials and developmentally appropriate toys and equipment. Our staff will engage in positive interaction with your child through the introduction of memory games, counting, shapes and colors, and early vocabulary. The center also offers activities for small groups in which toddlers will be able to explore their world through story telling, art, music, and creative movement.

We also affirm your child's development of self-independence through efforts in potty training, self-dressing, eating, and personal hygiene. Our center will provide a daily activity report that will inform parents of their child's learning experiences and enable them to share in the excitement and joys of their toddler's day-today development.

Our well equipped and spacious indoor activity room and outdoor playground will be the learning ground for your toddler to perfect the art of walking, climbing, sliding, and riding. These activities help to build the gross motor skills that are fundamental to your child's progression from infancy to toddlers. Outside play is scheduled twice daily, weather permitting. Active and quiet times are alternated throughout the day. Individual cots are provided by the center where your child will nap.

What to bring for toddlers:

- A labeled blanket for naptime. Parents must wash blankets at least once a week or more, if needed.
- A complete change of clothing is to be left at the center (labeled).

## **Preschool & Pre-Kindergarten Programs (3-5 years old)**

As this age group transitions from toddlers to childhood, Kids At Heart Preschool and Pre-K Programs are there to assist the student and parents during this essential developmental stage. The overall objective of this multi-age program is to accommodate the total needs of your child academically, socially, and emotionally; to fully prepare the student for private or public kindergarten. The center accomplishes this task by providing well-balanced programs of planned activities and decision-making choices that allow opportunities for learning through individual experience, participation in small groups, and relating to one another in large group activities.

The center's Preschool and Pre-K Program generally will enroll children from three to four years of age, depending of course on their level of social, emotional, and academic development.

At this level, your child will engage their growing desire to investigate and explore in a more structured learning environment.

In each classroom, a variety of activities are offered that provide your child with the opportunities to develop skills appropriate to their age level. Learning stations that are designed for hands on experiences and explorations, which help promote learning through the application of art, music, language, science, storytelling, cognitive activities, and fine & gross motor activities are arranged throughout each classroom. Included in this well tested and approved variety of activities are math readiness (introduction to the concept of number recognition, counting, and geometric shapes), pre-reading (introduction to the alphabet, visually and orally), and listening comprehension. The program strives to further develop the student's self confidence and social development by providing activities which focus on learning to share, the further development of self-help skills, and relating in a group environment.

The Pre-K Program at Kids At Heart is the final step in our: center's challenge to ensure that all graduates are prepared for Kindergarten and beyond. The cognitive and social curriculum becomes increasingly challenging and the children are provided activities, which allow them to expand their skills within the framework of the learning environment. Incorporated throughout the program year are pre-reading skills and an introduction to mathematics. Community awareness is fostered through social studies about self, family, and community service providers. Your child will discover the exciting world around them on community field trips to such places as the library, post office, and grocery store.

Our spacious indoor activity center and age appropriate outdoor playgrounds have been specifically designed and equipped to provide a much needed physical outlet for your busy and active young child, continuing to promote camaraderie and fun-interaction with their fellow classmates.

A weekly lesson plan, created by teachers, will be posted in the classroom and distributed to parents each week. Outside play is scheduled twice daily, weather permitting. Naptime is approximately from noon to 1:30 p.m. Children not napping will be given materials with which to play quietly such as books, puzzles, etc. The teacher will actively participate in the children's play and learning at this time.

What to bring for Preschool and Pre-Kindergarten:

- A labeled blanket for naptime. Parents must wash blankets at least once a week or more, if needed.
- A complete change of clothing is to be left at the center (labeled).

## **School Age Children (up to 11 years)**

Our after school program, providing extended care to school age children up to 11 years old, is less structured than our preschool program. Since these children have been in a structured school setting all day, the center focuses on providing activities and opportunities that cater to the individual needs and interests of your child. In this relaxed atmosphere, the children may choose from a variety of activities, which contribute to the development of their creativity, social and decision-making skills. However, the center does offer optional development programs for school-age students who seek additional challenges to their schedules. Advanced elective offerings such as computer lab, and painting may be introduced at select times throughout the year.

Kids At Heart also offers a Summer Camp Program for Kindergarten through fifth grade children. Stimulating and exciting age-appropriate lessons and activities are planned which reinforce the programs that were emphasized during the school year. In addition, the center also schedules many special outings as well as visiting guests programs. The center's Summer Program

accentuates enrichment opportunities in the arts where your child will be able to discover, explore, and expand their interests in creative art, music, creative dance, and computer lab.

## Formal Assessments

Kids At Heart Child Care Center conducts formal assessments on enrolled children using the Ages & Stages Questionnaire (ASQ-3). Assessments are for internal use only. Kids At Heart does not submit these assessments to any outside agency, including ODJFS.

## Swimming

Swimming activities (water play opportunities) will be provided for toddlers through school age children during the summer months. We will provide small wading pools (less than 24" deep) and sprinklers. Parents will need to sign a written permission slip prior to children engaging in water play. The permission slip will include staff/child ratio and extra adults who will help in actively supervising the children. Please remember to send bathing suits, towels, and sunscreen for your children. Sunscreen must also have a medication form completed. If your child bums easily, please include a lightweight T-shirt to wear over their swimsuit.

## Bringing Toys

At Kids At Heart, your child will be offered fun and educational toys every day. Though we recognize that at this age certain items may help ease your child's transition from home, we ask that you help them make this transition by encouraging them to leave their toys or special personal items at home. Occasionally, teachers will designate "show and tell" days when your child may bring in a personal item, as long as it is labeled and not deemed violent in nature. Although we will be happy to help look for any lost items, we cannot be held responsible for lost or damaged items.

## School Age Absentee Procedure

A staff member will greet the school age children when they enter the building right off the bus. As the children enter an immediate roll call/attendance will be taken. The school age attendance sheet will designate which day each child is to attend. If a child does not appear as scheduled the teacher will immediately contact the administrator on duty. The Administrator will 1). Call the school to notify them of the missing child, 2). Call the parent/guardian to notify them that the child has not arrived as scheduled.

## Outdoors Play

At Kids At Heart, play and exercise in the fresh air is considered essential to your child's good health and overall development. The daily outdoor activities that are planned by the center assist in promoting the development of your child's large motor skills, imaginative play, and social skills. Outdoor play is scheduled daily, weather permitting. All outdoor activities will be canceled during inclement weather (rain, sleet, snow, lightening, extreme pollen count, smoke) or in extreme cold (less than 0°F) or heat (more than 105°F). In the winter, we ask that parents please dress and prepare your child with the appropriate apparel and accessories for snow play. Center policy encourages the participation of every attending child in the planned outdoor activities.

However, should your child not be able to participate for medical reasons, we will be happy to comply with your physician's request when presented with his/her written instructions.

## Arrival and Departure

The safety of your child while in our care is considered to be of utmost importance. The Center's policy for security and procedures for arrival and departure is for the benefit of your child's safety and security. At arrival, all parents are required to accompany their child inside the building, where they must sign into the digital system at the reception area and then be escorted to their appropriate classroom. No child may be left at the Center without completing the sign in process. When your child arrives to his/her classroom, the teacher will mark their attendance on the paper attendance sheet. Our attendance system is two parts – one digital, one analog. This creates the best system for security and record keeping.

When picking up your child at the end of the day, please be certain to check your child's storage space for memos, classwork, or soiled clothing. Notify the teacher of your child's departure and proceed to sign out at the reception area. Accompany your child to *your* car. Please, for the safety of the children, all vehicles must be turned off in the driveway or parking lot unless there is an adult present in the driver's seat of the vehicle.

## Release of Child

If someone not listed on the Child Enrollment Form or Transportation Form comes in to pick up a child, the parent or guardian must notify the Center, in writing, as to who is picking up the child. The Center will then require identification (drivers license or photo ID) from that person before releasing the child. Of course, the Center always reserves the right to request proper identification in the event someone is not recognized by our staff. Your child will not be released without proper notice or verification. It is important for you to know that in the case of separation or divorce, both parents have equal access to their child.

The Center has no legal right to deny a parent from picking up their child unless we have a copy of Legal Custody papers in our files.

If you would like to add someone to your child's authorized pickup person list, please let our Director know ASAP. Authorizations should be made in person. To authorize another person over the phone, you must provide the correct answers to the security questions you selected in the registration packet.

## Transitioning

A parent will be notified when their child is ready to move up to the next classroom. As part of the procedure, center staff will develop a transition plan. This plan will include the beginning and ending date of the transitioning period and include a transition schedule. The parent, current teacher and new classroom teacher will sign the plan. A Parent may request for their child to be transitioned but we will only accommodate this request if it is in the best interest of the child and space available in the next room.

# Security

For parents' assurance and peace of mind concerning their child's security, Kids At Heart provides a state-of-the-art secured entrance with a four-digit access code that permits only Kids At Heart Team Members and Families into the center.

## Transportation of Children

Kids At Heart prohibits any member of our staff to transport your child to or from our center. It is the responsibility of the parents/guardians to make all arrangements pertaining to the transportation of the child to or from the Center. During the school year, the school bus system will pick up/drop off school age children.

In the event that a child requires emergency transportation, 911 will be called and responders will send the appropriate emergency vehicle to transport the child. A Kids At Heart Staff Member will accompany the child to the source of emergency treatment and wait for the parent/guardian to arrive. Kids At Heart Staff will also contact the parents/guardians immediately at the time of an emergency.

Kids At Heart defines emergencies as life threatening events. We will call emergency services to save a life, regardless of a family's personal preference. All parents/guardians are required to give consent of transportation in the case of an emergency. Kids At Heart retains the right to refuse childcare services to parents/guardians who do not give emergency transportation consent.

## Safety and Emergency Policy

Kids At Heart adheres to the following guidelines to ensure the safety of each child while they are in our care.

- A childcare staff member in charge of a child or group of children shall be responsible for their safety at all times.
- Children and parents are greeted upon their arrival. Parents/guardians must sign children in and out of the digital system upon their arrival and departure.
- Parents are to accompany their children inside the building and leave them in the care of a staff member.
- No child shall ever be left alone or unattended
- Telephones in the lobby and main office are available for emergency use.
- Fire drills are held monthly at varying times and weather drills are held every other month. A record of all drills will be maintained in the office.
- Fire and weather emergency plans, which include written instructions and evacuation procedures, are posted at the entrance of each classroom.
- Medical and dental emergency information is posted by the phone and in each Classroom.
- Minor incidents are documented on an incident report form to be signed and dated by the parent and the teacher. A copy of this report is given to the parent on the day of the incident and another copy is kept on file in the office.
- In the event a child must be transported for a medical or dental emergency, the report shall be available to parents within 24 hours after the incident occurs. The Center shall also contact licensing personnel from ODJFS office within 24 hours when there is a

"serious incident, injury or illness". The report will be provided to ODJFS within 3 business days from the occurrence via fax or mail.

- An ambulance or other appropriate emergency vehicles will provide transportation in the case of an emergency. A Center staff member will always accompany a child needing emergency attention and will remain with the child until the parent/guardian arrives.
- Emergency authorization forms are required to be completed for every child prior to enrollment at the Center.
- Use of spray aerosols shall be prohibited when children are in attendance at the Center.
- At Kids At Heart, all Team Members are trained to recognize and identify signs of child abuse and neglect and are required by State law to inform the local children services agency immediately of any suspicions.

Safety measures of the Center are not limited to the above guidelines, but are only minimum standards.

## Evacuation

In the unlikely event there would be an environmental threat or a threat of violence, the staff will; secure the children in the primary evacuation spot (fenced playground areas located on each end of the building) or if necessary, the secondary evacuation spot (back of the building parking lot). We will follow the directions given by the proper authorities and contact the parents as soon as possible as the situation allows. Teachers will have attendance rosters and will make name to face check offs on a regular basis to make sure all children are present. The Director and/or Assistant Director will secure all emergency paperwork for the children and the first aid kits. An incident report will also be provided to the parents.

## Discipline Policy

At Kids At Heart we emphasize the use of behavior modification and redirection as our means of discipline. This method of behavioral management employs the continuous use of praise and positive reinforcement as a reward for appropriate behavior. The approach to this form of behavioral management differs from traditional measures in that children discover that they can earn attention and rewards by behaving in an appropriate manner as opposed to obtaining attention through misbehaving.

We are dedicated to promoting a positive self-image in every child. Our staff strives to assist children in the development of their self-discipline and sense of accountability for their actions. We will never use corporal punishment, physical restraints, or subject any child to any form of negative verbal abuse. When inappropriate behavior becomes harmful to others, oneself, or destructive of property, we encourage communication by explaining the inappropriate behavior and then lovingly redirect the child away from the conflict, allowing them to compose themselves with dignity. On certain occasions when disciplinary measures become necessary, the child or children involved may be redirected to another activity or removed from the activity and placed where they can sit and observe children who are conducting themselves appropriately. This allows the child time to consider their -behavior and actions before returning to the group. At this time, the child and teacher will discuss the situation until the child understands the reason he/she was placed in the chair.

This "time out" procedure lasts for about one minute for each year of the child's age. When in "time out" children always face the rest of the children and are never out of the sight of their caregiver.

The center's discipline policy applies to all persons on the premise. The caregiver in charge of a group of children is solely responsible for their discipline. It is contrary to center policy for a parent to reprimand or lecture another parent's child. It is necessary that any concern by parents related to inappropriate behavior or discipline be brought to the attention of the caregiver. Parental cooperation and support are essential in exemplifying and promoting positive behavior to all the children at the center. We strongly request that all parents demonstrate a sensitive and loving spirit to the children by refraining from the use of developmentally inappropriate language or discipline measures while at the center. All teachers have had pre-service training in guidance and management of children consistent with the above discipline policy.

## **Health and Hygiene**

Kids At Heart's policy of health and hygiene is supportive of the high health standards and good hygiene habits that are being practiced and implemented at home. Assisting your child in developing and maintaining these good health practices is taken very seriously and considered of primary importance while your child is attending the center.

### **Hand Washing**

Promoting independent good hygiene habits each day, the center's programs set aside regularly scheduled hand-washing times throughout the day. In addition, we request that all children wash their hands before and after meals and snacks, after toilet usage, and upon returning from outdoor play or any other time that is considered necessary by Team Members.

### **Soiled Clothing**

State and National health standards are acknowledged in the case of soiled clothing. This policy requires that any clothing contaminated with bodily fluids (stool, urine, blood, vomit) be placed not rinsed, in a sealed bag. The bag will be labeled with the child's name, placed in the child's storage area, and picked up by the parent at the end of the day. The center complies with these precautionary measures for the safety of all the children and staff.

### **Smoke-Free Environment**

Kids At Heart advocates a smoke-free environment for its attending children and staff. We request that you please refrain from smoking at all times while on the premise of the center.

### **Allergies**

If your child has allergies, please provide detailed information to the center's Director and your child's caregiver. All available measures and precautions will be taken to assure that your child's special needs are considered and accommodated. There is a special form that will need filled out if you child has allergies.

### **Administration of Medicine**

Kids At Heart will administer prescription and non-prescription medications, fluoride or food supplements (vitamins), and modified diets provided that instructions to administer such items are written, signed and dated by a physician, and are prescribed for a specific child. Center policy

also requires that all pertinent forms be completed and on file at the center prior to dispensing any form of medication, fluoride or food supplement, or administration of a modified diet.

Only designated center personnel may dispense prescribed or over the counter medications. Parents are required to give all medication to the center's Director who will ensure proper storage and administration of the medicine. School Aged children are not allowed to carry or administer their own medications or ointments while under the care of Kids At Heart.

Prescription medication will be administered provided the medication is in its original container and has its original label intact that shows the child's name, current date (not more than six months old), exact dosage, and method of administration, storage, and disposal instructions. Labels, which order, "to be given as needed" shall be accompanied by written instructions from the parent.

Non-prescription medications will be administered provided the medication is in its original container, which specifies appropriate dosages for the child's age group. In addition, parents must provide written instructions that contain the name of the medication, birth date of the child, parent signature, and date of signature. Non-prescription medication may not be given for more than three days at a time. Dosages administered by the center shall not exceed the manufacturers recommended dosages. If the dosage states that a physician must be consulted, the center needs the physician's written and signed instructions on the ODHS form, provided by the center.

Non-prescription topical ointments, creams, and lotions may be applied provided that parental, written instructions include the name of such items, the name and birth date of the child, parent signature, and date of signature. Written instructions will be valid for no longer than three months. Center policy prohibits the administration of any form of medication containing aspirin or codeine. In addition to written instructions for prescription and non-prescription medication, parents must complete and sign the Authorization To Give Medication Form, each time medication is to be administered.

We are required to verify administering medications by completing the form each time the medication is administered.

We reserve the right to refuse to administer or discontinue any medication if (a) an adverse reaction results, (b) the child is ill or injured, (c) the Authorization To Give Medication Form is incomplete, (d) or for any reason we suspect that dispensing medication may be harmful to your child.

## **Immunizations and Medical Statements**

As per Ohio State Law, all children who are enrolled must submit a copy of their verified immunization records as well as an original Medical Statement form signed by a licensed physician. These procedures ensure a safe, healthy environment for all of our children. Please refer to the Center Director for any questions or concerns.

At this time, Kids At Heart Child Care Center does not enroll children who are not up to date on their immunizations or who are without immunizations altogether.

# Management of Communicable Diseases

It is the policy of Kids At Heart to follow the Ohio Department of Health "Child Care Communicable Disease Chart" for the appropriate management of suspected illness at the Center. This chart is posted in the Center's Copy Room.

Though it is common for most children to experience various forms of illness during early childhood, our Center works toward the prevention of communicable disease by giving all staff members written instructions on proper hand-washing techniques and correct procedures for disinfecting equipment on a regular basis. It is also the policy of our Center to require all staff members to obtain documented in-service training for the recognition, prevention, and management of communicable diseases within a six-month period of employment.

As required by ODHS, during all hours of operation, at least one Team Member who has completed this training will always be present at the Center. In addition, classroom teachers are responsible, on a daily basis, for an early morning inspection of each child. Throughout the course of the day, teachers are required to observe the children for any signs or symptoms of illness.

A child will be isolated away from other children, monitored by staff, and parents immediately contacted and discharged if any of these symptoms are observed:

- Sever coughing, causing the child to become red or blue in the face or to make a whopping cough sound.
- Difficult or rapid breathing.
- Yellowish skin or eyes.
- Conjunctivitis (pink eye), redness of the eye, obvious discharge, matted eyelashes, burning or itching eyes.
- Temperature of 100 F when in combination with any other sign or symptom of illness.
- Untreated, infected skin patches/ unusual spots or rashes.
- Having unusually dark urine and/or gray or white stools.
- Stiff neck with an elevated temperature.
- There is evidence of lice, scabies, or other parasitic infestation.
- Vomiting (more than once) accompanied by any other sign or symptom of illness.
- Diarrhea - more than one abnormally loose stool within a twenty-four hour period.
- Sore throat or difficulty in swallowing.

A child shall be isolated due to suspected communicable disease. They shall be within sight and hearing of an adult at all times and cared for away from the other children. The sick child will be provided with a cot and made comfortable until the parent picks them up. A notice will be posted at the front counter when there has been an exposure to a communicable disease. The notice will include the earliest signs and symptoms of the disease so additional exposures may be avoided.

Center policy requires that any child who has been suspected or diagnosed as having a communicable disease may return to the Center only when they have been symptom free for 24 hours, or a physician who issues a note indicating that they are free from communicable illnesses has seen them. It is required that children returning to the Center be checked by a Team Member who is trained in the recognition of communicable disease.

Our Team Members are subject to the same rules and procedures should one of them contract a communicable disease. A qualified substitute will be called in to maintain ratios when necessary.

Ohio Department of Job and Family Services  
CENTER PARENT INFORMATION REQUIRED  
BY OHIO ADMINISTRATIVE CODE

The facility is licensed to operate legally by the Ohio Department of Job and Family Services. This license is posted in a conspicuous place for review.

A toll-free telephone number is listed on the facility's license and may be used to report a suspected violation of the licensing law or administrative rules. The licensing law and rules governing child care are available for review at the facility upon request.

The administrator and each employee- of the facility is required, under Section 2151.421 of the Ohio Revised Code, to report their suspicions of child abuse or child neglect to the local public children's services agency.

Any parent, custodian, or guardian of a child enrolled in the facility shall be permitted unlimited access to the facility during all hours of operation for the purpose of contacting their children, evaluating the care provided by the facility or evaluating the premises. Upon entering the premises, the parent, or guardian shall notify the Administrator of his/her presence.

Contact information for parents/guardians of the children attending the facility is available upon request. This information will not include the name, telephone number or email of any parent/guardian who requests that his/her name, telephone number or email not be included.

Recent licensing inspection reports and any substantiated complaint investigation reports for the past two years are posted in a conspicuous place in the facility for review.

The licensing record, including licensing inspection reports, complaint investigation reports, and evaluation forms from the building and fire departments, is available for review upon written request from the Ohio Department of Job and Family Services. The center's licensing inspection reports for the past two years are also available for review on the Child Care in Ohio website. The website is: <http://jfs.ohio.gov/cdc/childcare.stm>.

It is unlawful for the facility to discriminate in the enrollment of children upon the basis of race, color, religion, sex or national origin or disability in violation of the Americans with Disabilities Act of 1990, 104 Stat. 32,42 U.S.C. 12101 et seq.

JFS 01268 (Rev. 10/2011)



## Healthchek

**Healthchek services keep babies, kids and young adults healthy by finding and treating health problems early.**

- ➔ **Prevention services - like these - are very important:**
  - » Physicals
  - » Hearing, vision, and dental check
  - » Nutritional screenings
  - » Mental health screenings
  - » Developmental screenings
  - » Vaccinations (if needed)

➔ **Looking for more information? Go Online:**  
<http://medicaid.ohio.gov/Healthchek>

# EPSDT

## Early and Periodic Screening, Diagnosis and Treatment Information

## Healthchek

➔ **Healthchek is Ohio's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) service package.**

These services include a comprehensive health and developmental history to assess physical and mental health, and screenings for potential health problems – including vision, hearing, and dental screenings.

Babies, kids, and young adults younger than age 21 who are covered by Ohio Medicaid can receive Healthchek services.

➔ **When to schedule a Healthchek exam:**

**Babies:** Should have at least 8 Healthchek exams by their first birthday. **Children:** should have Healthchek exams at 15, 18, 24, and 30 months. **After 30 months old until age 21:** one exam per year is recommended.

➔ **Where to get Healthchek services:**

Any doctor that accepts Medicaid can provide Healthchek services. Ask your doctor at your next appointment for Healthchek services. Sometimes, a provider may refer a patient to a another doctor for specialized care. Some services require prior approval.

➔ **Covered by a Managed Care Plan?**

Contact your plan for more information about Healthchek services.

➔ **Learn more:**

Get in touch with your county's Healthchek Coordinator - call the Ohio Medicaid Consumer Hotline and ask for the Coordinator's contact information.



**Get Better. Stay Well.**

# Ohio

Department of Medicaid

## fact sheet

### OVERVIEW

Healthchek services are required by the federal government. These services include a comprehensive health and developmental history to assess physical and mental health, screenings for potential health problems – including vision, hearing, and dental screenings.

#### Healthchek also covers:

- » necessary laboratory tests,
- » vaccines,
- » blood lead screening, and
- » health education and nutritional advice.

Providers may make referrals to other health providers for more specialized care. Healthchek services are also available to individuals covered by a Medicaid managed care plan or who are on a Medicaid home and community-based waiver.

#### Additional Services

If a screening reveals a medical condition, Ohio Medicaid can be billed for any necessary follow-up services provided to treat the child's medical condition.

SEPTEMBER 2014

## HEALTHCHEK: OHIO'S EPSDT PROGRAM

Healthchek is Ohio's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) service package. These are comprehensive and preventative services for babies, kids, and young adults younger than age 21 who are covered by Ohio Medicaid.

### A CLOSER LOOK AT HEALTHCHEK IN OHIO

#### WHEN SHOULD A CHILD GET HEALTHCHEK SERVICES?

Babies should have at least 8 Healthchek exams by their first birthday. Children should have Healthchek exams at 15, 18, 24, and 30 months. After 30 months, one exam per year is recommended until the age of 21.

#### HEALTHCHEK COORDINATORS

Every county department of job and family services has a coordinator responsible for informing Ohioans covered by Medicaid about available Healthchek services. The person supports the coordination of non-medical Healthchek support services when requests are made.

Examples of these services include:

- » assistance making appointments,
- » transportation,
- » referrals to food pantries, clothing, and heat assistance, and
- » referrals to lead-free housing options.

For a list of Healthchek Coordinators, visit: <http://medicaid.ohio.gov/Healthchek>

#### HEALTHCHEK PROVIDERS

Any doctor who accepts Medicaid can provide Healthchek services. Individuals can ask their doctors for Healthchek services at their next appointment. Sometimes, a provider may refer a patient for specialized care. Some services may need prior approval.

#### HEALTHCHEK AND MANAGED CARE

Healthchek services are a part of the benefit package every managed care plan offers its members. Managed care plans and county Healthchek coordinators work together to ensure Healthchek services are available.

#### PREGNANCY RELATED SERVICES

In many counties, the Pregnancy Related Services (PRS) and Healthchek coordinators are the same. The county's PRS coordinator can explain the importance of Healthchek services to a mother before a baby is born. They can also assist pregnant women with services like arranging transportation, making prenatal appointments and explaining the importance of attending these appointments to increase the likelihood of a healthy pregnancy and a healthy baby.

OHIO DEPARTMENT OF MEDICAID | WWW.MEDICAID.OHIO

# IDEA Developmental Screening Information



## Parent Advocacy Brief

### Preschool Services Under IDEA



**W**e don't usually think of Specific Learning Disabilities in connection with children below school age. When we think about children age birth to six, we think first of their learning *abilities* in the achievement of developmental milestones – walking, running, climbing, talking in sentences, acquiring vocabulary concepts, learning to read and learning to play alone and with others. While the preschool years are a time of triumphs for most children and families, approximately 8% of all young children are identified as having disabilities that may prevent their reaching these important milestones as expected. It was with these children and their families in mind that Congress created the Part C Infant/Toddler Program and the Preschool Special Education Program in 1986 when it reauthorized the Individuals with Disabilities Education Act (IDEA). Some children with diagnosed conditions such as Down's syndrome or Cerebral Palsy identified at birth or shortly thereafter receive services through the Part C Infant/Toddler Program. They may make the transition to the preschool special education program at age three. Other children do not raise concerns until after the third birthday and, if eligible, may be enrolled in what is commonly referred to as the Section 619 Preschool Program.

You can read about and become familiar with the features of IDEA in NCLD's IDEA Parent Guide. Download the Guide at [www.ld.org/ideaguide](http://www.ld.org/ideaguide).

#### I'm not sure my preschool child is developing normally. What should I do?

You and/or others who know your child may have questions or concerns about his or her development. Your pediatrician, well-child clinic staff, or preschool teacher can help to answer your questions and suggest next steps. It may be that no next steps are necessary as your child is developing within the normal range. However, if there is concern, you can contact your local school system's director of Special Education programs for a diagnostic screening at no cost to you through the IDEA process called Child Find. This screening will help you confirm whether or not a disability or delay exists. (Local public school systems are required to conduct Child Find to locate and identify children and students from birth – 21.) The Superintendent of Schools' office can tell you how to reach this individual. Your local school system may also have a staff member whose job is exclusively to coordinate preschool special education referrals.

<sup>1</sup> Parent Advocacy Brief: Preschool Services Under IDEA  
National Center for Learning Disabilities • [www.LD.org](http://www.LD.org)

No two children grow and develop at the same pace or in the same way. Some children who are not identified at birth as having a disability may have more subtle issues that can cause parents and/or professionals to suspect that there is a problem around the ages of three -five. They may have speech and language delays or disorders, put shoes or mittens on the wrong feet or hands, have difficulty remembering directions, be uninterested in playing early learning games or listening to stories, or seem generally mildly uncoordinated. If this is your child, you may be saying "Something's going on. I don't know what it is." On one hand, preschool special education may be needed to ensure that your young child will make progress in later school years. On the other hand, emphasis on failures and problems and prescriptive teaching can damage a child's self image. NCLD offers a parent-friendly check-list ([http://www.nclد.org/images/stories/downloads/parent\\_center/ldchecklist.pdf](http://www.nclد.org/images/stories/downloads/parent_center/ldchecklist.pdf)) that may help you determine whether your observations and feelings may be valid. If you decide to seek preschool screening that may lead to special education services for your child at home or at school, IDEA offers two eligibility categories that may reflect what is happening with your child.

You can download the "Next Steps" document at [www.getreadytoread.org/transition\\_nextsteps](http://www.getreadytoread.org/transition_nextsteps)

## What is a "Developmental Delay"? What is a "Specific Learning Disability"?

Developmental Delay means that a young child has a delay or disorder in sensory, physical, mental, or social/emotional development or has multiple delays in comparison to his or her peers, as documented by diagnostic testing. IDEA allows states to use this eligibility category up to age 9 and to establish their own criteria such as developmental inventories and/or informed clinical opinion. (IDEA- Section 1402) (*Young children who may later be identified as Learning Disabled are frequently included in this category.*)

2 Parent Advocacy Brief: Preschool Services Under IDEA  
National Center for Learning Disabilities • [www.LD.org](http://www.LD.org)

Specific Learning Disability (SLD) means that a child has a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written. These difficulties may manifest themselves in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. It does not include mental retardation, cultural difference or environmental disadvantage. (IDEA – Section 1402 (30)) In making the decision to identify a young child as learning disabled, professionals have to rule out other factors such as speech/ language delays, "late blooming," environmental factors and emotional issues. The IDEA Amendments of 2004 did away with the absolute requirement for a severe discrepancy between age and achievement to be needed in the determination of an SLD, although severe discrepancy is still in use by some states.

The decision can now also be based on criteria established by each state based on a child's response to scientific research-based interventions (Response to Intervention, (RTI)) and on a pattern of strengths and weaknesses in performance in light of age, grade level standards or intellectual development. (IDEA 2004 Final Regulations Update, [www.nclد.org](http://www.nclد.org)).

**In 2005-2006, 260,692  
children age 3-5 were  
identified as having  
Developmental Delays.**

**During the same period  
12,065 children age  
3-5 were identified  
with Specific Learning  
Disabilities.**

(Source: [www.ideadata.org](http://www.ideadata.org))



The Recognition & Response Web site, [www.recognitionandresponse.org](http://www.recognitionandresponse.org), offers information and resources to help early educators address the needs of young children (3 to 5 year-olds) who show signs that they may not be learning in an expected manner, even before they begin kindergarten.

## What is the federal special education program for children age 3-5?

Section 619 of Part B of IDEA, defines the preschool program which guarantees a free appropriate public education (FAPE) to children with disabilities age three through five. Under this program preschool children who have disabilities are entitled to Special Education and Related Services in the Least Restrictive Environment (LRE). Young children, who have been identified as having any of the conditions named in Part B of IDEA including Developmental Delays, are eligible to receive services under Section 619 of IDEA.

In each state department of education there is a staff member, the Preschool Grant Coordinator, who is responsible for administering the state's Section 619 Preschool Grant monies for developing, maintaining and providing information about the program in the state. The "shorthand" title for these individuals is "619 Coordinator." The National Early Childhood Technical Assistance Center provides contact information for the 619 Coordinators at [www.NECTAC.org](http://www.NECTAC.org). In addition to contacting your local director of special education or early childhood special education coordinator, you may want to speak with your state's 619 Coordinator. He or she can provide you with helpful information about your rights, about local programs and services and in some cases be present at meetings to assist with the process.

## Doesn't universal public education begin at Age 5-6?

Yes. However, across the country, many children are enrolled in some type of preschool program. In implementing IDEA Section 619, the states have made it possible for 500,000 children with disabilities to receive their Special Education preschool services either totally in a general preschool school, child care, or Head Start setting or in a combination of these settings with special education. ([www.ideadata.org](http://www.ideadata.org)) As much as possible, preschool children with disabilities need to spend time in early childhood settings in order to learn the "give and take" of play, to hear normal spoken language and to learn pre-reading and other cognitive learning skills presented in the regular preschool curriculum. Preschool-age children with disabilities are first and foremost children and need to be with their same age peers. Each child's team must take the individual child's needs into account when deciding on the best educational environment.

Sometimes children will learn best in settings other than the general preschool classroom. NCLD's IDEA Parent Guide provides information about the continuum of placements that moves from the mainstream to self-contained settings.

- **In the fall of 2005, 704,087 children age 3-5 were being served through Section 619 or approximately 8% of this age group in the general US population.** (Source: [www.ideadata.org](http://www.ideadata.org))
- **\$380 million dollars was awarded to the states and territories to help with the cost of the program in 2005-2006.**

## How do the public schools provide general education classroom learning environments for young children with disabilities?

Public schools in 23 states work with Head Start, public and private childcare and preschool providers to offer integrated learning environments for young children, including those with disabilities. This collaboration may be supported by written interagency agreements or memorandums of understanding at the state and/or local levels. In some cases, the schools look within their own programs to offer settings such as a Vocational Education Lab Preschool setting or a "Reverse Mainstream" classroom. Examples of these types of programs can be found in the District of Columbia, Kansas, Louisiana, Maine, New York and Pennsylvania. (National Association for the Education of Young Children, [www.naeyc.org](http://www.naeyc.org)) In these settings, preschool special education staff works side by side with early childhood classroom teachers to provide services for all children within the classroom setting.

## Who decides if my child is eligible for preschool special education?

A team, which includes you the parent and professionals specializing in evaluating the needs of young children, will assess and review test results, reports and all other pertinent information. This team must carefully consider all information about the child's development and medical history before making a decision. As you can imagine, eligibility decisions for young children are complicated and depend on consideration of environmental, language and socio-economic factors in addition to any testing results. For more information about team membership and eligibility determination, see the IDEA Parents' Guide at [www.ld.org/ideaguide](http://www.ld.org/ideaguide).

## What happens after my child is found eligible for preschool special education?

Once eligibility is determined, the same team, including parents, develops an Individualized Education Plan (IEP). The IEP is a "blueprint" for teaching the child and is based on the information about the child gained from the screening and diagnostic testing. It includes goals and services for the child, and is implemented by preschool classroom teachers with the help of special educators and related service professionals. In some states, home-based services are provided for young children who do not require additional preschool services.

The team that develops the IEP determines what educationally related services are needed. These may include speech therapy, occupational therapy and physical therapy, to name a few. Preschool-specific services may include social activities with typically developing young children in the community. The IEP will include goals in all areas identified during assessment and evaluation as needing attention. Typically, these include cognitive, speech and language, gross and fine motor and social and emotional development.

## Where would my child receive preschool special education services?

Your child may already be attending preschool. Your local public school system may agree to have your child continue in that setting and pay for the portion of the time that the IEP is implemented in that setting. Or, your child may receive specialized services at home by a specialist (e.g. speech language or occupational therapy). If your child needs some services that can only be implemented in a special setting, the school system must pay for the child's transportation to and from that setting. If your child is not enrolled in a preschool, childcare, or Head Start program, the school system must work with you in determining the right setting for your child. Although there is no universal pre-kindergarten program in this country, many states have public pre-k programs for specific age groups and populations.



## What if I disagree with my child's education team about eligibility or any part of the IEP and services?

If test results or other information lead you or members of your child's team to disagree about your child's disability or desired learning environment, or on the way the process has been implemented, you can do several things.

You can:

- Refuse to sign the IEP
- Request an independent educational evaluation
- Request an informal due process hearing (maybe named a different term, i.e., administrative hearing) to share your concerns with a district representative
- File a formal due process request to present your case to an officer appointed by the state department of education
- File a formal complaint if you think that the procedural safeguards have not been followed
- Request that any disputes be mediated by a trained professional

A successful mediation will result in an agreement that reflects the consensus of all parties. A formal complaint will be investigated by someone appointed by your state department of education, who will review the information and make a report of findings and recommend a solution. A Due Process Hearing is the most formal of these steps. It is led by a Hearing Officer who hears the arguments of both sides, which are usually presented by attorneys. The Hearing Officer makes a decision based on the facts presented.

Any of the steps in dispute resolution might seem challenging to parents of young children, especially to those who speak a language other than English. For this reason, IDEA supports a network of Parent Training and Information Centers. Each state has one or more of these centers. NCLD's IDEA Guide ([www.ld.org/ideaguide](http://www.ld.org/ideaguide)) provides a full explanation of the options listed as well as additional resources.

## What is the Part C Option? Is my preschool child eligible for enrollment in my state's Part C program?

Part C of IDEA regulates the process by which infants and toddlers (from birth to age 3) receive services. The 2004 amendments to the IDEA created an option for children identified before age three and enrolled in the Part C program to continue in that program up to age six. If a child was not enrolled in the Part C program prior to December 2004, this option is not open. The purpose of the option is to allow flexibility, if wanted, for states to make Part C services available to children from age 3 until eligible to enter kindergarten or elementary school. This allows for a smoother transition for children who have received services from a very young age while promoting school readiness, early literacy, language and numeracy skills in the services offered. For children who are newly identified at age three through pre-kindergarten, services must be provided under Part B Section 619 of IDEA. The final regulations for Part C including this option are expected to be published in the fall of 2007.

5 Parent Advocacy Brief: Preschool Services Under IDEA  
National Center for Learning Disabilities • [www.LD.org](http://www.LD.org)

## Where can I learn more about learning disabilities and young children, the law, and my child's and my rights?

Many information resources are available to you if you are the parent of a young child who may have a learning disability.

- **IDEA Parent Guide**  
NCLD offers an IDEA Parent Guide at [www.nclد.org](http://www.nclد.org) as well as a parent center and guidance on early literacy and early childhood education at [www.getreadytoread.org](http://www.getreadytoread.org).
- **The US Department of Education**  
The US Department of Education, Office of Special Education Programs has created a Web site, [www.ed.gov/](http://www.ed.gov/), that contains IDEA 2004 resources.
- **The National Early Childhood Technical Assistance Center**  
The National Early Childhood Technical Assistance Center (NECTAC) ([www.nectac.org](http://www.nectac.org)) includes information on the Section 619 Preschool Program and state contacts' mailing addresses.
- **Parent Training and Information Centers**  
In every state there is at least one parent center. To locate the parent center or centers in your state you can contact the National Technical Assistance Center at its nationwide toll-free number 888/248-0822 or locate a center near you at [www.taalliance.org](http://www.taalliance.org). Parent Centers serve families of children and young adults from birth to age 22 with all disabilities. Their purpose is to help families obtain appropriate education results for all children.

## In Conclusion

The IDEA Preschool Program (Section 619) supports education services for young children with disabilities who are identified after their third birthday. It offers early learning experiences in language, reading and writing skills, play, and other social emotional areas. Preschool special education is available through your public school system.

Activities and studies being conducted in different states and by the US Department of Education are starting to provide information that show that the program does help children to succeed in their later school years. You can look at evaluation activities in the different states at the Early Childhood Outcomes Center Web Site to learn how states are working to become accountable for children's learning. [www.fpg.unc.edu/~eco/index.cfm](http://www.fpg.unc.edu/~eco/index.cfm)

Becoming informed about the Section 619 program, whether or not you choose to pursue enrollment for your child, can help you with present and future decisions about your child's school years.

*About the Author: Luzanne Pierce, MAT, is a former Section 619 Coordinator for the state of New Hampshire. From 1992 to 2003 she directed the NECTAC (National Early Childhood Technical Assistance Center) sub-contract at NASDSE (National Association of State Directors of Special Education). She is the co-author of early childhood documents on Autism, Preschool Inclusion, transitions and other topics for NECTAC and NASDSE and a contributor to the 20th Annual Report to Congress on the IDEA implementation. The discovery of her daughter's learning disability led her to become a preschool special education teacher.*