

**kids**  **at heart**  
**preschool & child care centers**

**Family Handbook**

North Canton

(Policies & Procedures)

2026 Edition

# Mission Statement

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

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

*"In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202)720-5964 (voice and TOD). USDA is an equal opportunity provider and employer."*

## **PROGRAM INFORMATION:**

### **Kids At Heart North Canton**

6199 Frank Ave. NW. North Canton, OH. 44720

[NorthCanton@KAHCenters.com](mailto:NorthCanton@KAHCenters.com)

(330) 494-8700

*Revised 2026*

# TABLE OF CONTENTS

<b>Mission Statement</b>	<b>2</b>
<b>Philosophy</b>	<b>6</b>
<b>Step Up to Quality</b>	<b>7</b>
<b>General Information</b>	<b>7</b>
<b>Required Enrollment Paperwork</b>	<b>8</b>
Immunizations and Medical Statements	8
<b>Disenrollment</b>	<b>9</b>
Withdrawal Policy	9
Dismissal Policy	9
<b>Hours of Operation</b>	<b>9</b>
Holidays and Planned Closures	9
<b>Tuition Payments</b>	<b>10</b>
Late Payment Policy	10
Returned Payment Policy	10
Late Pickup Policy	10
<b>Parental Participation and Access</b>	<b>11</b>
Open Door Policy	11
Parent-Teacher Conferences	11
Monthly Newsletter	11
<b>Staff to Child Ratio</b>	<b>12</b>
<b>Nutrition and Meals</b>	<b>13</b>
Breakfast	13
Lunch	13
Snack	13
Infant Meals	13

<b>Classroom Programs</b>	<b>14</b>
Infant Programs	14
Infant 1 Schedule	15
Infant 2 Schedule	15
Toddler Programs (18 months to 30 months)	16
Toddler 1 & 2 Schedule	17
Preschool & Pre-Kindergarten Programs (3-5 years old)	18
Preschool 1 & 2 Schedule	19
Pre-Kindergarten Schedule	19
School Age Children (up to 12 years)	20
School Age Absentee Procedure	20
School Age	20
Before and After Care Schedule	20
School Age Full Day Care Schedule	20
<b>Assessments</b>	<b>21</b>
<b>Transitioning</b>	<b>21</b>
<b>General Policies &amp; Procedures</b>	<b>22</b>
Field Trips	22
Water Activities and Swimming	22
Bringing Toys	22
Outdoor Play	22
<b>Safety and Security</b>	<b>23</b>
Security	23
Arrival and Departure	23
Release of Child	23
Alcohol and Drug-Free Environment	24
Transportation of Children	24
Evacuation Procedure	24
Violence Policy	24
No Firearms/Weapons Policy	25
<b>Discipline Policy</b>	<b>25</b>

<b>Health and Hygiene</b>	<b>26</b>
Hand Washing	26
Soiled Clothing	26
Allergies	26
Smoke-Free Environment	26
Administration of Medicine	27
Management of Communicable Diseases	28
Procedure for Sick Children	29
Returning to Care After Illness Policy	29
Team Member Illness	29
<b>ODJFS INFORMATION</b>	<b>30</b>
<b>EPSDT</b>	<b>31</b>
Early and Periodic Screening, Diagnosis and Treatment Information	31
<b>IDEA Developmental Screening Information</b>	<b>33</b>

# Philosophy

Kids At Heart cares for children ages six weeks to 12 years old. We have made a commitment to provide positive, nurturing, fun and enriched learning environments to allow your child to learn through play. Kids At Heart offers cognitive, physical, social, and emotional developmental experiences while adjusting to treat 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 their development. Our center highly emphasizes a curriculum that includes a full day of creative and constructive learning. Along with art, gross motor, fine motor and dramatic play, your child is offered educational instruction in reading, math readiness, STEM and language arts.

Kids At Heart concentrates lessons on the Early Learning and Development Standards (ELDS) developed by the Ohio Department of Education. Our teachers use the ELDS Objectives to create their educational curriculum to ensure that our lessons include the domains of Language and Literacy, Social Emotional, Cognitive and General Knowledge, Physical Well-being and Approaches Toward Learning. We consider each child as an individual and adjust our learning environment to include every child.

Kids At Heart observes and documents each child following the Objectives set by the ELDS. Observations are incorporated into the classroom curriculum focusing on the needs of each individual child. A portfolio is maintained on each child using the guidelines set by the Domain Objectives. Kids At Heart has an open-door policy and we promote daily discussions with your child's teacher.

Our teachers strive to be the best for you and your child(ren). Our staff attends Continuing Education training opportunities throughout the year that promote their professional and personal growth. Continuing education courses are based on areas that pertain to the ELDS, curriculum development, behavior management, and creating developmentally appropriate environments and activities. .

# Step Up to Quality

Kids At Heart strives to provide high quality, interactive, positive and academically sound child care for every child in our school. We are a Step Up to Quality rated center, which goes well above and beyond child care licensing requirements in academics, interactions, environments and ensures every child is on track for future success. Step Up to Quality is Ohio's Quality Improvement rating System for Child Care centers, which guides child care centers to provide high quality early childhood education to children throughout the State of Ohio.

Not only do we focus on your child's overall well-being, we also encourage families to be involved in our classrooms. Throughout the year we host a variety of family events as we continually work to bridge the gap between home and school. Kids at Heart also brings in outside visitors for educational events, and we love to let families know about free family events offered throughout our local communities. We encourage our families with children of all ages to come and enjoy our events and make long lasting positive Kids At Heart memories.

## General Information

Kids At Heart Childcare & Learning Center (Kids At Heart North Canton) is licensed by the Department of Children and Youth (DCY) to provide childcare for children ages six weeks to 12 years. Our DCY Child Care provider 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.

# Required Enrollment Paperwork

Prior to the first day of attendance the following forms and payment(s) must be completed and turned into the Center Director:

- Child Enrollment and Health Form
- Parent Financial Contract
- Handbook Statement signed off
- Medical/Physical Care Plan (if needed)
- Registration Fee and Tuition for First Week Attendance

A child becomes enrolled in a classroom at the center after the registration fee (non-refundable) has been received, the administrator confirms the availability of space, and the required paperwork is received. Any changes to your Enrollment Form or other paperwork must be communicated to the office immediately so that current information is always on file. This is for the safety of your child.

## **Paperwork required to be submitted within 30 days of admission:**

- Medical Form (JFS 01305) Signed by physician or certified nurse practitioner
- Immunization Record
- Ages and Stages Questionnaire
- Family Needs Survey

Failure to submit a current medical form and immunization records 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. The decision for termination is at the sole discretion of Kids At Heart Child Care Center management.

## 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 DCY Medical Statement form signed by a licensed physician or a certified physician's assistant. These forms must be turned into the office within 30 days of the child's starting date. If we do not have these forms Kids at Heart reserves the right to suspend enrollment until the forms are turned in and your child's file is compliant with DCY Child Care Licensing Rules and Regulations. These procedures ensure a safe, healthy environment for all of our children. Please see the Center Director for any questions or concerns.

It is the policy of Kids At Heart Child Care Center that we will not enroll children who are not up to date on their immunizations or any child who has not or will not be immunized.

# Disenrollment

## 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 your withdrawal request 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 North Canton is open from 6:30 AM - 6:30 PM, Monday through Friday. Should the Center be closed for an emergency (weather, loss of utilities, public pandemic) you will be notified by a team member, through our ProCare Parent Engagement system and/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 and Planned Closures

The center will be closed in observance of the following holidays:

- New Years Eve and Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day and the Friday after
- Christmas Eve and Day
- 1 quarterly Staff Inservice training day date (To Be Announced)

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.

# Tuition Payments

Tuition is due by Friday prior to the week for which your child will be attending. All tuition is payable by check, money order, on-line by credit card (a 3% fee will be applied) or through our Tuition Express system. Tuition Express is a free service that will automatically deduct your payment from your checking or savings account of your choice. Yearly receipts for paid tuition will be given out at the end of each year upon request. Tuition will be charged regardless of absence due to illness, or for any other reason. Families have 4 weeks per year that tuition will be charged at half price if the child is absent for an entire week of the scheduled time they are expected to attend.

## Late Payment Policy

There will be a late payment fee of \$35 for late tuition and fees which are overdue. Any account with a balance will automatically be charged a \$35 late fee each week. After two (2) weeks of non-payment, your child may be suspended or disenrolled. You are still responsible for the full amount owed after disenrollment. If you do not pay in a timely fashion, your past due account may be sent to collections. To re-enroll, the delinquent balance must be paid in full. An additional non-refundable registration fee of \$60 will be assessed to re-enroll each child.

## Returned Payment Policy

A \$35.00 returned payment fee (NSF) will be imposed if a payment has been returned unpaid. The original payment amount, plus the fee must be replaced with a money order before your child may return to Kids at Heart. There are no exceptions. We reserve the right to refuse future payments by check or card after 3 delinquent payments.

## 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 with a maximum of \$100. Late Pickup Fees will be due by Friday at 6:30 PM.

## Publicly Funded Child Care

Publicly Funded Child Care is determined for each individual family. If a family is working towards obtaining PFCC the child/children may not start attending Kids at Heart until they are authorized in Kids at Heart's PFCC attendance system. If a family has a PFCC copay this is due each Friday for the upcoming week. If PFCC makes a change to authorized dates the family will be refunded the paid amount if they have a \$0.00 copay. If a weekly copay is due the previously submitted tuition will be applied as a credit and used towards family copay; not refunded. Tuition refunds on \$0.00 copay PFCC will occur three weeks after the final backdated tablet entry. Thus ensuring payment to Kids at Heart has been paid in full and back dates were accepted by PFCC. When PFCC is authorized by the state the child must be approved for Full Time status.

# 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 early education, we welcome and encourage your participation whenever possible. Your child's weekly lesson plan will be posted on the parent board in the classroom and sent through Procure the Friday before each new week so that you can view and participate in your child's activities.

## Open Door Policy

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. For the safety and well-being of all children attending Kids at Heart during visits we cannot allow pictures, or video of any kind to be taken in the classroom or any other areas of the school.

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.

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 the parent or guardian.

## Parent-Teacher Conferences

At least once during the school year, teachers of every program at the center will request to have a formal 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, our staff welcome any requests for conferences by appointment.

## Monthly Calendar

Kids at Heart will publish a monthly calendar in order to keep you informed of the various activities and upcoming events that are planned throughout the year. This monthly calendar will have center wide information, seasonal events, and helpful information to keep you informed.

# 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 12 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 and Meals

Breakfast, lunch and snacks are provided by the center every day at no additional charge to our families.

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 federal Child and Adult Care Food Program.

## Breakfast

Breakfast is served between 8:00 AM and 8:45 AM each morning. Our kitchen stops serving breakfast promptly at 8:45 AM. Children arriving after this time will need to be fed at home prior to arrival at the center.

## Lunch

Lunch time varies as per classroom and is served between 11:15 am (infants on solid food) to 12:00 pm for toddlers and preschool children.

## Snack

A variety of nutritional snacks are served between 2:30 PM and 3:15 PM. School age children will be served a snack when they arrive at the center from school.

Milk will be provided and served daily during breakfast and lunch. If a snack does not contain 2 meal components required by CACFP then milk will be served as a meal component, otherwise water will be served with the snack. Children aged 12 months to 2 years old will be served Vitamin D fortified milk. Children aged at least over 2 years old through school age will be served Skim Milk.

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 the child's modified dietary requirements, if the center is unable to provide a substitute. If the child is on a modified milk requirement we must have a doctor's note to keep in the child's enrollment file.

## Infant Meals

For infants, Kids at Heart will provide infant formula, infant cereal (rice and oatmeal) and Stage 2 fruit and vegetables. If parents elect to provide their own infant's food, all bottles and jars of food must be labeled with the child's name and date when brought into the Center daily. You will be asked to provide a feeding and napping schedule for your child so staff can keep your child on a daily routine.

**For breastfeeding mothers:** You must label bottles or bags of breast milk with the child's name, the date the milk was expressed and the date you bring the milk to the center. You are welcome to bring in frozen bags of milk for us to keep on reserve at the center. We ask that you supply at least one bag or bottle ready to be warmed and fed each day upon arrival. There is a quiet space in the staff lounge available to breastfeed and/or pump for your baby. Please ask a staff member for guidance into this space.

## **Child and Adult Food Program Civil Rights Statement**

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

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

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

1. mail:  
U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or
2. fax:  
(833) 256-1665 or (202) 690-7442; or
3. email:  
[Program.Intake@usda.gov](mailto:Program.Intake@usda.gov)
4. This institution is an equal opportunity provider.

# Classroom Programs

Kids At Heart welcomes children 6 weeks to 12 years of age. Classroom activities, and schedules are designed to be age and ability appropriate. Curriculum is designed for the classroom as a whole and for each individual child.

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. 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.

## Infant Programs

Kids at Heart's 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 a skills based curriculum that includes music, songs, reading books, gross and fine motor skills and tactical activities. Our infant teachers make a continual effort to spend as much time as possible during the day interacting with children, one on one, as well as, in small groups. All of our toys and equipment have been carefully selected to promote the key learning experiences of early childhood development, and are rotated to continually provide new and exciting activities and stimulation.

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, and will be placed in a sleep sack provided by the center for comfort and warmth. Our infant sleeping position policy for infants will be to sleep on their backs. There will be no exceptions to this policy.

Kids at Heart recognizes that every infant has their own unique routine, and we strive to follow individual schedules that are set by the parents. A record is kept, through the use Procure of your infant's daily care in diaper changing, eating, napping, and any other pertinent information that may be of interest. This daily record is sent through the KidReport app directly when the child is clocked out using the ProCare attendance system.

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:

- Minimum of 6 diapers each day. We prefer and can store sleeves or boxes of diapers.
- Minimum of one pack of wipes each day. We prefer and can store several packs of wipes.
- Several complete changes of clothing are to be left at the center (labeled).
- Enough bottles for each feeding the child will have each day.
- Formula or breastmilk individually labeled with expressed date and date it was brought to the center.

## **Infant 1 Schedule**

Infants age 6 weeks to 12 months

Infants have their own individual schedules. We follow the parent's lead for feeding schedules and napping preferences for infants 6 weeks to 12 months of age. Diapers are always checked and changed every 2 hours or more often as needed.

Our curriculum follows the infant developmental milestones. Your child will receive plenty of one on one nurturing time with our infant teachers that includes quiet and active playtime. In our infant room we focus on the child's five senses. Our infant environment allows for exploration and discovery. We introduce basic Sign Language skills to our infants.

Infants 6 weeks to 12 months will sleep on their back in their own designated crib. Absolutely no blankets, stuffed animals or soft items will be permitted in the crib. Infants will sleep in Sleep Sacks that allow their heads to remain uncovered. You may supply your own Sleep Sack or we will use a center provided Sleep Sack. Pacifiers are permitted in the classroom on pacifier clips. However, clips will be removed when put in their crib.

## **Infant 2 Schedule**

Infants age 12 months to 18 months

- Arrival and Breakfast at 8:00 am
- Story Time
- Music and Movement
- Gross Motor, Patio Play
- Fine motor skill activities
- Basic Sign Language Skills
- Lunch at 11:15 am
- Sensory Activities
- Naptime 12:30 pm - 2:30 pm
- Snack Time 2:30 pm
- Manipulative Play
- Language Arts Experiences
- Exploration and Discovery
- Evening Snack and Departure

## Toddler Programs (18 months to 30 months)

The toddler programs have 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 Toddler programs. Curriculum is developed to ensure each child is meeting and/or exceeding age appropriate developmental milestones. We incorporate Literacy and Language, Sensory Play, Mathematics, Science and Art into their weekly curriculum. Since this age group develops both socially and cognitively through 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 manipulatives, and developmentally appropriate activities and interactions. Our teachers will engage your child in small and large group activities throughout the day, as well as, work with them one-on-one, all the while focusing on developmental milestones and positive social interactions.

We also affirm your child's development of self-independence through efforts in potty training, self-dressing, eating, and personal hygiene. Daily play in our Dramatic Play areas increase abilities and confidence in everyday activities. A daily report will be sent to you through Procure that will provide a daily activity report that will inform parents of their child's learning experiences. This will enable families to share in the excitement and joys of their toddler's day-to-day 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. Toddlers will engage in gross motor activities throughout the day between the classroom, outdoor playground and indoor Activity Room.

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 or two is to be left at the center (labeled).
- Minimum of 6 diapers or pull-ups each day. We prefer and can store sleeves or boxes of diapers.
- Minimum of one pack of wipes each day. We prefer and can store several packs of wipes.
- Extra shoes or boots for outdoor play if you want.

## **Toddler 1 & 2 Schedule**

Ages 18 months to 30 Months

- Arrival, wash hands Breakfast 8:00 am
- Manipulatives and Centers
- Good Morning Circle Time Lessons
- Gross Motor Outdoor or Indoor Play
- Art and Fine Motor Activities
- Lunch 11:15 am - 12:00 pm
- Story Time
- Naptime 12:30 pm - 2:30 pm
- Snack Time 2:30 pm
- Literacy and Small Group Activities
- Mathematics and Manipulatives
- Gross Motor Outdoor or Indoor Play
- Sensory Play
- Interactive Floor and Small Group Play
- Music and Movement
- Departure

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

As this age group transitions from toddlers to Preschool, Kids At Heart Preschool and Pre-K Programs are there to assist the student and parents during this developmental stage. The objective of these three classrooms is to accommodate the total needs of your child; cognitively, socially/ emotionally and physically through both fine and gross motor activities, and to continually increase language and literacy. Through planned and spontaneous play activities it is our goal to fully prepare your child for private or public kindergarten.

Play based learning centers are defined throughout each classroom. These centers include Art, Music, Dramatic Play, Blocks, Fine Motor, Gross Motor, Science and Sensory, Mathematics and Language/Literacy. Learning centers are designed for hands-on play based experiences and explorations through independent, small and large groups within the various classroom settings. 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 to ensure that all graduates are prepared for Kindergarten and beyond. The play based curriculum becomes increasingly challenging and the children are provided with 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 challenging mathematics lessons. Community awareness is fostered through social studies about self, family, and community service providers.

Gross motor play is incorporated in the weekly lesson plan, which includes activities within the classroom, outside on our playground or in our indoor Activity Room. Each area has been specifically designed and equipped to provide a much needed physical outlet for your busy and active young child, continuing to promote friendship and fun-interaction with their peers. A weekly lesson plan will be posted on the parent board in the classroom and in Procure Friday prior to the following week. Outside play is scheduled twice daily, weather permitting.

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 couple complete changes of clothing is to be left at the center (labeled).
- Extra shoes if needed for outside play

## **Preschool 1 - PreK Schedule**

Ages 30 months to 60 Months

- Arrival, wash hands Breakfast 8:00 am
- Manipulatives and Centers
- Good Morning Circle Time Lessons
- Gross Motor Outdoor or Indoor Play
- Mathematics and Manipulatives
- Lunch 11:15 am - 12:00 pm
- Story Time
- Naptime 12:30 pm - 2:30 pm
- Snack Time 2:30 pm
- Music and Movement
- Literacy and Small Group Activities
- Art and Fine Motor Activities
- Centers
- Gross Motor Outdoor or Indoor Play
- Interactive Floor and Small Group Play
- Departure

## School Age Children (up to 12 years)

Our before/after school program, providing extended care to school age children up to 12 years old is less structured than our preschool program. 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. Time is given each day for Homework to be worked on with assistance from our staff. Gross motor activities are worked into the afternoon in the outdoors or indoor activity room.

Kids At Heart also offers a Summer Camp Program for Kindergarten graduates through fifth grade children at 12 years old or less. Stimulating and exciting age-appropriate lessons and activities are planned. In addition, the center also schedules many enriching and fun in house activities throughout each week. The center's Summer Program accentuates enrichment opportunities in the arts where your child will be able to discover, explore, and expand their interests.

School Age supervision is a little different compared to the rest of the children in our care. Per ODJFS Licensing school age children are able to run errands in the building, use the restroom and engage in short term activities that pose no physical risk to their safety alone or in groups of no more than six children without adult supervision, provided they are within hearing distance, are checked on every 5 minutes, and the center has exclusive use of the space being used.

<p><b>School Age Before and After Care Schedule</b> Kindergarten through 12 years old</p> <ul style="list-style-type: none"> <li>• Morning Arrival, Wash Hands and Breakfast 8:00 am</li> <li>• Clean up and Leave for School -AT SCHOOL-</li> <li>• Afternoon Arrival, Wash Hands, Snack</li> <li>• Homework, Quiet Centers</li> <li>• Art, Blocks, Sensory</li> <li>• Gross Motor Outdoor or Indoor</li> <li>• Departure and Centers</li> </ul>	<p><b>School Age Full Day Care Schedule</b> School Days Off (Not Summer Camp)</p> <ul style="list-style-type: none"> <li>• Arrival, Wash Hands, Breakfast 8:00 am</li> <li>• Centers, Gross Motor Play</li> <li>• Group meeting</li> <li>• Art, Blocks, Sensory</li> <li>• Books and Board Games</li> <li>• Gross Play Outdoor or Indoor</li> <li>• Lunch 11:15 am - 12:00 pm</li> <li>• Centers, Books, and Art</li> <li>• Gross Motor Indoor or Outdoor</li> <li>• Snack 2:30 pm</li> <li>• Sensory, Large Group Activities</li> <li>• Free Choice Small Group Activities</li> <li>• Building, Gross Motor, Departure</li> </ul>
---	--

# Suspension and Expulsion

Kids at Heart works hard to prevent suspension and/or expulsion of children from our center. We work one-on-one with the child, the family and outside resources to help guide the child towards better behavior and feeling safe and comfortable in our school. If the child continues the undesired behavior we will suspend or expel the child from Kids at Heart. Depending on the circumstances administration may offer a period of time, which will allow the family to find alternate care or in extreme cases the expulsion may be immediate. It is of the utmost importance that Kids at Heart would take into consideration the safety and well being of everyone involved including the other children in the classroom, staff members and the child. Suspension or expulsion are determined on a case by case basis.

## Assessments

Kids At Heart Child Care Center requests a personal assessment of your child using the Ages & Stages Questionnaire (ASQ-3). Upon enrollment in our center you will be given an Ages & Stages Questionnaire for your completion. This assists the teachers in collaborating with the parent on the skills your child may be mastering in their home environment. Assessments are for internal use only. Kids At Heart does not submit these assessments to any outside agency, including ODJFS. The ASQ's are distributed to each parent once a year for completion on each child from 6 weeks of age to 5 years of age.

Kids At Heart observes and documents each child following the Objectives set by the ELDS. Observations are incorporated into the classroom curriculum focusing on the needs of each individual child. A portfolio is maintained on each child using the guidelines set by the Domain Objectives. Observations and assessments are continued throughout the year and documented in each child's portfolio. Observations and assessments assist the teachers in planning and implementing curriculum geared toward each individual child. If necessary, Kids At Heart may recommend that we involve outside professionals to assist with a child's behavioral needs, social/emotional needs or academic needs. Any recommendations require consent by a parent or guardian before any outside professionals are consulted.

## Transitioning

A parent will be notified when their child is ready to move up to the next classroom. Transition into the next classroom is dependent on the child's age, readiness, availability of space and forecasted start date entering kindergarten. As part of the procedure, a parent and current classroom teacher will sign the transition plan. Transitioning will take place over a 5-day (one week) period. Each day transition time spent in the new classroom will increase until the fifth day the stay will be for the entire day. New classroom staff will record activities the child participated in while they were transitioning, as well as, how their behavior was and emotional well being. If a child needs longer than a 5 day (1 week) transition they will be given the opportunity to do so. Parents will be involved in the transition process through being able to speak directly with current and upcoming teachers, and messages through the ProCare app.

# General Policies & Procedures

## Water Activities and Swimming

During the summer months outdoor water play is provided for Infants (12 months and older) through to school age children. Our water activities using sprinklers and water toys at the center are called "Splash Days", and are weather permitting. Please remember to send swim suits, towels, and water shoes or crocs to be worn for outdoor play. Sunscreen will be applied to each child before they go outside, usually beginning in May. If your child bums easily, please include a lightweight T-shirt or rashguard 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. Kids at Heart does not take responsibility for any personal items that get lost, broken, lost or stolen.

## Outdoor 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 twice daily, weather permitting. All outdoor activities will be canceled during inclement weather (rain, sleet, snow, lightning, extreme pollen count) or in extreme cold (less than 25°F) or heat (more than 90 °F). In the winter, we ask that parents please dress and prepare your child with the appropriate apparel and accessories for snow play. Children need to come prepared with winter coats, gloves, hats, snow pants or snow suits and snow boots. Center policy is that every child participates 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.

# Safety and Security

## 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. We ask that families not share the code with anyone and ask that alternate pick up persons ring the door bell and be greeted by a staff member. All alternate pick-up persons must provide a photo ID and the parent or guardian must inform Kids at Heart of the change. If the parent or legal guardian has not provided information about the change Kids at Heart will not release your child without gaining permission.

## 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 and to their classroom where their arrival time will be recorded by the teacher. Parents must also sign in at arrival and out at departure through the digital system located in the main lobby area. No child may be left at the Center without completing the sign in process. Our attendance system is two parts – one digital, one analog. This creates the best system for security and record keeping. No child is to be left alone in the center or told to go to their class by themselves, you must accompany your child. If children arrive at the Center after 10:00 am they will be refused entry. Please do not give out the door code to family members or friends. All guests must ring the doorbell each time they visit until the staff becomes familiar with authorized pick up people for your child and at that time management will give them the door code.

When picking up your child at the end of the day, please be sure to sign your child out through the electronic system prior to picking them up from their classroom. Please do not, at any time, allow your child to use the sign in or out system. This is for parent use only and we appreciate your understanding. Please be certain to check your child's mailbox and storage space items to return home or soiled clothing. Please make sure you go to your child's room for pickup and notify the teacher of your child's departure, please do not send siblings for pick up. Accompany your child to your car. Please, for the safety of the children, all vehicles must be turned off in the 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 as to who is picking up the child. Please do not give the code and have them ring the doorbell to enter the center. 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.

Kids At Heart will not get involved in custody disputes, parental arguments or guardian arguments. 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.

## Alcohol and Drug-Free Environment

Your child's safety and well-being are of the utmost importance to us and we reserve the right to deny release should we suspect impairment of any kind by visual observation, or personal odor observation. Kids At Heart has a zero tolerance policy on intoxication of staff or family members by alcohol, drugs or otherwise while on Kids At Heart property.

## Transportation of Children

Kids At Heart prohibits any member of our staff to personally 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.

In the event that a child requires emergency transportation, 911 will be called and first 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.

## Evacuation Procedure

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) or if necessary, the secondary evacuation spot is Greenfield Estates, located across street to the South of the center at 3522 Commercial Drive. We will follow the directions given by the proper authorities and contact the parents as soon as we have assured the safety of all the children. 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 within 24 hours after any evacuation emergency.

## Violence Policy

Kids At Heart maintains a zero-tolerance policy for violence of any kind.

The safety of Kids At Heart's students, family members, staff members and visitors is an important concern to the company. Threats, threatening behavior or acts of violence against staff members, other parents/guardians or any others while on Kids At Heart's property will not be tolerated. Violations of this policy will lead to possible dismissal and criminal prosecution as appropriate.

## No Firearms/Weapons Policy

Firearms and other weapons are **STRICTLY PROHIBITED** from Kids At Heart Grounds, inside and outside of the building **AT ALL TIMES**. It is for the safety of the children, staff and family members.

# Discipline Policy

At Kids At Heart we emphasize the use of behavior modification, and redirection as our means of discipline. This method of behavioral modification employs the continuous use of praise and positive reinforcement as a reward for appropriate behavior. The approach to this form of behavioral modification 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 away from the activity or group. 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 premises. 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, Kids at Heart programs set aside regularly scheduled hand-washing times throughout the day. We request that our parents encourage their child to wash their hands upon arrival at the center. 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 used 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. Please make sure to check your child's storage area for any soiled clothes daily. The center complies with these precautionary measures for the safety of all the children and staff.

## 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. A DCY Child Medical/Physical Care Plan will be filled out if your child has allergies, ensuring we have the proper documentation on file. If medication needs to be kept on-hand at the center the DCY Request for Administration of Medication will need to be filled out by your child's physician.

## Smoke-Free Environment

Kids At Heart advocates a smoke-free and odor-free environment for its attending children and staff. We request that you please refrain from smoking before you drop off or pick up your child, and at all times while on the premises of the center.

## 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 the Director, Assistant Director or properly trained staff members 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 or box and has its original prescription 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. If prescription medications are to be given twice daily we request that parents administer the medication at home.

Non-prescription medications may 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 using the ODJFS Request for Administration of Medication completely filling out Box A of the form. 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 ODJFS Request for Administration of Medication (Box B) form provided by the center. Medications will not be administered under any circumstance if the child does not meet the age and weight requirements listed on the box. If parents would like their child to receive this medication they are welcome to stop by the center and administer the medication themselves.

Non-prescription topical ointments, creams, and lotions, such as diaper cream, sunscreen, vaseline or ChapStick may be applied provided that parental permission is properly provided. These forms are valid only for the time indicated on the form. When forms expire or medication runs our staff members will inform parents.

Kids at Heart will administer medication to children with special needs, provided the staff is properly and fully trained and feels confident in the administration of medication. We will also make modifications in our daily routines to accommodate a child with special needs, provided it does not take one or both staff members away from the other children, posing a potential risk to the class or causing the class to be out of compliance with ODJFS ratios.

Center policy prohibits the administration of any form of medication containing aspirin, codeine or any medication in the narcotic family or any medication used for behavior modification. Parents must make arrangements to come to the center and administer these types of medication themselves if the child needs these medications while in our care.

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.

Kids at Heart will allow medical foods and/or modified diets to meet the nutritional requirements and needs of a child. If the child requires an alternate milk the parent or guardian will be required to fill out an Alternate Milk form. Medical foods or modified diets will be based on the individual child and cannot alter the entire class meal. Please note that Kids at Heart is a Peanut and Tree Nut free school.

## 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 Staff Lounge classroom.

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 DCY, 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:

- Severe coughing, causing the child to become red or blue in the face or to make a whooping cough sound \*\*
- Difficult or rapid breathing \*\*
- Yellowish skin or eyes.
- Conjunctivitis (pink eye), redness of the eye, obvious discharge, matted eyelashes, burning, itching eyes or eye pain.
- Temperature of 101° F (100° F if taken axillary) when in combination with any other sign or symptom of illness. This could be life threatening if combined with lethargy, vomiting, extreme tiredness and/or difficulty to wake †
- Untreated, infected skin patches/ unusual spots or rashes.
- Having unusually dark urine and/or gray or white stools.
- Stiff neck with an elevated temperature.
- Evidence of lice, scabies, or other parasitic infestation.
- Vomiting (more than once) accompanied by any other sign or symptom of illness.
- Diarrhea: three or more abnormally loose stool within a twenty-four hour period.
- Sore throat or difficulty in swallowing.
- Fever more than 101°F (100° F if taken axillary)
- Earache

- Headache
- Extreme fussiness
- Runny nose and/or cough

\*\* Sign of possible immediate life-threatening situation. We will call the emergency squad and call the parents.

† Could be life threatening if combined with lethargy, vomiting, extreme tiredness and/or difficulty to wake. We will call the emergency squad and call the parents.

## Procedure for Sick Children

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.

## Returning to Care After Illness Policy

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.

Any disease that is deemed to be highly contagious according to the Communicable Disease Chart issued by the Ohio Department of Health and ODJFS. We reserve the right to follow all guidelines and extend exclusion from school based on the severity of the disease and based on the contagiousness of the disease.

## Team Member Illness

Our Team Members are subject to the same rules and procedures should one of them contract a communicable disease.

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 the office 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)

# EPSDT

## Early and Periodic Screening, Diagnosis and Treatment Information



**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>

## 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 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.

## 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.

#### 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.

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

# IDEA Developmental Screening Information

 **National Center for Learning Disabilities**  
*The power to hope, to learn, and to succeed.*

## 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 1996 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.

**1** Parent Advocacy Brief: Preschool Services Under IDEA  
National Center for Learning Disabilities • 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. NCI D offers a parent-friendly check list ([http://www.ncld.org/images/stories/downloads/parent\\_center/ncchecklist.pdf](http://www.ncld.org/images/stories/downloads/parent_center/ncchecklist.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.getteacytoread.org/transition\\_nextsteps](http://www.getteacytoread.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.*)

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 inability 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)) 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 2007 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.ncld.org](http://www.ncld.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 enrolled 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 "go-to" 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.**

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

## 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 Job 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.d.gov/ideaguide](http://www.d.gov/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-K/undergarten program in this country, many states have public pre-K programs for specific age groups and populations.

4 Parent Advocacy Brief: Preschool Services Under IDEA  
National Center for Learning Disabilities • [www.d.gov](http://www.d.gov)



## 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.ic.org/deaiguide](http://www.ic.org/deaiguide)) 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.ncl.org](http://www.ncl.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.nclld.org](http://www.nclld.org) as well as a parent center and guidance on early literacy and early childhood education at [www.getreadysoread.org](http://www.getreadysoread.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 contact e-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.*