



Family Handbook
2025/2026



**Over 45 years of early childhood
programming in Southwest Colorado**

Welcome	4
Tri-County Head Start Mission	4
Tri-County Head Start Goals	4
Family Engagement	4
Family Participation	5
Recruitment Opportunities	5
Program Options	5
Responsibilities of Families & Staff	6
Confidentiality, Data, & Privacy	7
Head Start Parent Committee Membership & Policy Council	7
Participating in Your Child's Classroom	8
Some Ways To Get Involved	8
Volunteer Procedure	9
In-Kind Match	9
School Readiness Home Visits	9
Tri-County Head Start's Curriculum	10
Typical Daily Schedule	10
Dressing Your Child for School	11
Bringing Things From Home	11
Screen Time in Classrooms	11
Center Celebrations	12
Developmental and Behavioral Screenings	12
Disabilities	12
Mental Health	13
Behavior Guidance	13
Tri-County Head Start Code of Conduct	13
Active Supervision	15
Toileting Guidance	15
Choking Hazards	16
Attendance and Enrollment	17
Attendance Policy	17
Child Custody Issues	19
Authorized Release of Children	19

Vehicle Safety	20
Weather Policy	20
Classroom Emergency Closures	20
Emergency Preparedness	20
Accident Procedure	21
Severe Emergency Medical Procedure	21
Good Health and Nutrition	21
Required Health Checks For Your Child	22
Immunization Policy	23
Medication Administration Policy	26
Health Activities Provided for Your Child by TCHS	26
What To Do When Your Child Is Sick	27
Facility Safety	28
Center Video Surveillance	28
Tri-County Head Start Complaint Procedure	28
Reporting of Licensing Complaints	29
Child Abuse and Neglect Reporting	29
Colorado Office of Early Childhood	30
Anti-Discrimination Statement	30
APPENDIX	31

Appendix includes: TCHS Illness Policy, TCHS Medication Administration Procedure, information on Blood Lead Levels, information on the Flu, and a parent resource for the Standard Response Protocol we follow for emergency preparedness.

Archuleta County	La Plata County	Montezuma County
Pagosa Springs Head Start 970-264-2484	Durango North Head Start 970-247-9487	Mesa View Head Start 970-565-6040
	Campbell Child & Family Center* 970-247-7679	Mancos Early Learning Center* 970-533-1587
	Ignacio Early Learning Program* 970-563-0681	Teddy Bear Preschool* 970-882-7277
		The Nest Preschool* 970-533-4010
		<i>*Community Partner Locations</i>

Welcome

Welcome to Tri-County Head Start! This handbook is designed to inform families of our policies and procedures, to support your child's healthy development, and enable a successful home to school partnership. We are not only here for your child but for your family as well. We take this role very seriously and commit to providing your child with opportunities to explore and learn in a safe and nurturing environment.

Tri-County Head Start Mission

The mission of TCHS is to develop and provide quality, integrated, comprehensive early childhood development programs which offer a broad range of services and respond to the needs of eligible young children and their families for the purpose of preparing them for success in school and in life.

Tri-County Head Start Goals

1. Tri-County Head Start will maintain structured, financially sound management systems to support safe, high-quality, early learning programs.
2. Tri-County Head Start will recruit, enroll, and serve families in greatest need, providing support, resources, and services to help families achieve their goals.
3. Tri-County Head Start will develop school readiness goals that are appropriate for the ages and development of all enrolled children to ensure optimal academic and social and emotional progress for all children, regardless of ability, race, place, income, language, and culture.
4. Tri-County Head Start will create and maintain a culture that attracts and retains top talent with qualified and nurturing educators.
5. Tri-County Head Start will build and maintain collaborative relationships with local agencies to provide services and resources that engage and support families in their pursuit of health, nutrition, and overall well-being.

Family Engagement

Tri-County Head Start is here to assist you with your concerns as well as provide early childhood education for your child. Our family engagement program is here to help and support you, to meet your family's needs and goals, provide resources, and connect you with community organizations.

To make sure center staff is best supporting your family, you will be participating in multiple family assessment meetings each year. These meetings will help identify your family's needs and goals, help strengthen your relationship with your child and our

program, and ensure our program is providing you with a beneficial Head Start experience.

Family Participation

Tri-County Head Start could not exist without tremendous family involvement. Families are the most important participants in the program and we believe you are the first and most important teacher for your child. Thank you to all families who lend their strength to the program!

Families/guardians have the right to make decisions about the operation of the program by:

- Becoming active at your center
- Talking with other families and staff about the program and ways that each person can help
- Becoming involved in Parent Committees or serving as a Policy Council Representative
- Volunteering in the classroom or center

Participation in the program:

- Gives you an understanding of what the program is doing for your child and how you can help
- Shows your child that you care about their school
- Gives the staff an opportunity to get to know you better and learn from you
- Gives you an opportunity to learn from your child's teacher about your child's development

You may also request fun educational activities to teach your child at home! Teachers will provide you with ideas and skills to help you engage with your child in learning at home.

Recruitment Opportunities

Spread the Word!

We are always accepting applications! If you know any families that can benefit from our program, please encourage them to visit tchs4c.org to complete an electronic application or have them call our Enrollment Manager at 970-828-5906.

Program Options

All program options are inclusive, center-based care and education for preschoolers (children ages 3-5) and toddlers (ages 1-3). We offer part-day toddler programs at our

Durango North and Mesa View centers, at no cost to our families. We offer preschool programs at our Durango North, Mesa View, and Pagosa Springs centers; and through Community Partner locations. We offer two options for preschool care: the half-day option (4 hours) is at no cost to families. The school-day option requires supplemental funding through the Colorado Child Care Assistance Program (CCCAP), Universal Preschool (UPK) program, or tuition. Please go to our website at tchs4c.org for more information about our current program options at each of our locations, or contact the Family & ERSEA Manager at 970-828-5906.

Responsibilities of Families & Staff

Responsibilities of Families:

- To drop off and pick up my child on time according to their school schedule
- To inform the center of my child's illness or other reason for absence
- To obtain health services for my child and provide required documentation to my center as requested
- To attend two (2) Parent-Teacher Conferences and two (2) Home Visits each program year
- To inform the center of changes in phone number, address, job, medical insurance status, email addresses, emergency contacts, and authorized child pick-up persons
- To complete two (2) Family Assessment interviews during the year.
- To pay my tuition/CCCAP co-payment by the first working day of each month(ex: Sept. 1st); if tuition/CCCAP co-payment is not received by the fifth of the month, the hours that my child can attend may be reduced until payment is received.
- To try volunteering for the center. All volunteers complete an application, receive a background check, and receive training.
- To use appropriate language with teachers, staff, families, and around children.
- To respect cultural differences at Tri-County Head Start.
- To sign the "Intent to Withdraw" if I withdraw my child from the program.

Responsibilities to Families:

According to the federal Head Start Performance Standards and State Licensing Requirements

- To provide programming options to match family needs and eligibility
- To provide program information and education materials
- To provide inclusive programming that meets the needs of all children in safe, well equipped environments
- To offer assistance in helping families with identifying resources and providing referrals
- To assist families in establishing ongoing health care, mental health services, oral health care, disabilities and nutritional services, as needed.
- To provide opportunities for family engagement and help families discover their

strengths

- To obtain feedback from families about the program
- To discuss every child's progress in school with their family
- To treat families and children with respect and dignity
- To educate families on the role of a Parent Committee and the importance of electing a representative to Policy Council

Confidentiality, Data, & Privacy

Tri-County Head Start (TCHS) values and respects all families, children, caregivers, and staff. Teachers and staff will only discuss information about your child with you. You may have a time when you feel that your personal affairs need to be discussed with your child's teacher. Our staff is restricted from discussing private information that has been shared by you unless we get your permission. We expect that families will also respect the rights of others in this manner when visiting the center and attending program activities. This may include child to child conversations, behaviors, as well as staff and family information.

TCHS is always looking for ways to continuously improve the quality of our services. Throughout your child's enrollment in our program, you will be asked to provide information in forms, questionnaires, surveys, discussions, or meetings. Gathering this data helps us learn how to improve our program and achieve our goals, as well as meet federal or state requirements, apply for grants, or promote our program. Any information that could identify you individually is never shared without your permission. Thank you for participating and partnering in our process!

We will never use or share videos or pictures of your child(ren) outside of our organization without your permission. If you take pictures or videos of your child in the classroom, or at a TCHS event, and there are other children in it, you must get permission from their parents/guardians to share or use those photos on social media in order to respect the privacy of other Head Start families and their children.

Head Start Parent Committee Membership & Policy Council

In Head Start, families play many important roles and are a vital partner in the program's success.

Parent Committee

Parent Committee meetings allow families and staff to work together to develop and accomplish shared goals. Ask your Center Director for more information to attend these important meetings at your center! The committee from each site elects representatives to serve on our Policy Council.

Policy Council

Policy Council is part of the governing body of TCHS and acts as your voice in making major decisions for the program. Policy Council members are elected by Parent Committee members and include parents/guardians of currently enrolled children as well as community representatives.

As a Policy Council member, you actively participate in making decisions about the operation of the program. You would be involved in areas like:

- major program policy changes
- program goals
- school readiness goals
- grant applications
- personnel changes
- annual assessments
- financial audits

When you serve as an elected Policy Council member, we provide dinner and you are reimbursed for mileage to attend meetings. Policy Council meets approximately 8 times per year in Durango, or you can attend meetings virtually. Talk with your Center Director to get involved!

Participating in Your Child's Classroom

Participating as a volunteer in your child's school is a very special and wonderful experience. When adults volunteer they can participate in a variety of ways depending on the needs of the classroom or interests of the volunteer. There is always something to be done, and having an extra pair of hands is a great help to staff.

Some Ways To Get Involved

Be an observer: Watch, listen, and learn what happens at your child's school. Become comfortable with the setting and the schedule of activities. Watch your child learn during play.

Focus on your child: Be a play participant. Involve yourself with your child as they learn through play. Follow your child's lead; let them invite you into their play.

Assist the staff: Help with the daily program and routines. The teaching staff will welcome your assistance and provide you with guidance.

Play with the kids: Read a book with a group of kids, or help them complete an art project.

Out of the classroom help: If you are not comfortable with being in the classroom, that's OK. There are things you can take home to prepare for the teachers, or projects around the center that need to be completed. Ask your child's teacher if they need help!

Volunteer Procedure

Ask your Center Director if you are interested in volunteering! Your first step will be to fill out a volunteer application. TCHS completes a background check for every volunteer. After the application process is complete, Center Staff will work with you on the next steps. They will go over the classroom needs and provide you with volunteer training to answer any questions. The time you spend helping TCHS classrooms will benefit you, your child, and the overall program. You'll have fun, make new friends, expand on your skills, and most of all show your child that you care about their education and well-being.

In-Kind Match

When you become a part of our program, one of the words you'll start to hear is "In-Kind." What is it? Head Start programs are funded by the federal government, but only to a certain point. We must raise 20% of our funds through community support—that support is known as In-Kind. In-Kind can be donated time, goods, or services. Families can help us reach our In-Kind goals! We can count time that you volunteer in the classroom as well as time you spend at Parent Committee meetings and other family engagement activities as In-Kind. Ask your Center Director where you need to record your In-Kind hours.

Families are encouraged to fill out a **Family Activity Packet** each week to support your center's In-Kind goal. These packets involve you in your child's education at home, encouraging reading with your child or engaging in curriculum-based activities together.

School Readiness Home Visits

Home visits are a nationwide Head Start requirement and a valuable part of the TCHS experience.

They are important in building relationships with your child's teacher and ensuring your child's success in school and in life. The teacher/assistant visits your home 2 times each year to:

- Make connections between the home and classroom
- Learn more about your child and your hopes, dreams, and goals for them
- Share ideas of learning opportunities available in your home
- Help you set goals for your child's development and identify the steps to get there

To ensure the safety of everyone at a home visit, we ask that pets are under control, the home visitor is aware of others in the home, aware of any contagious or communicable diseases, language and actions are non-threatening, and firearms are stored safely.

Tri-County Head Start's Curriculum

The most important goals of our curriculum are for children to get along well with others and become enthusiastic learners. We want children to be independent, self-confident, and curious about exploring the world around them. We're teaching them **how** to learn, not just in preschool, but throughout their lives. To support this, teachers use the following:

- **The Creative Curriculum®** is a research-based curriculum which provides a developmentally appropriate learning environment and experiences for the children's overall learning.
- Consistent and predictable daily schedules with time for free play and organized lessons both indoors and outdoors every day.
- Monitoring of child development and growth through ongoing observations and up to four assessment periods a year.
- Zoo-phonics®, Handwriting Without Tears®, and Heggerty Phonemic Awareness are used in some preschool classrooms to support early literacy skills.
- The Dinosaur School Curriculum introduces Social-Emotional Skills in the preschool classrooms.
- Child Developmental guidelines found in the [Early Learning Outcomes Framework \(ELOF\) from the Office of Head Start](#) identify children's needs and steps in development.
- TCHS School Readiness Goals focus on the most important parts of a child's development to be successful when they transition to kindergarten in our area.

Typical Daily Schedule

Routines are very important for preschool children, toddlers, and infants. Each of our classrooms establish a daily schedule that is posted for families. A typical daily routine may include:

- **Warm Welcome & Smooth Transitions:** Families and educators work together to support a calm, positive start as children transition from home to school.
- **Exploration & Choice Time:** Children engage in hands-on, center-based play that encourages creativity, cooperation, and developmentally appropriate learning.
- **Nutritious Breakfast & Self-Care Routines:** A healthy meal is followed by brushing teeth, fostering independence and healthy habits.
- **Circle Time & Shared Stories:** Children come together for songs, storytelling, and early literacy experiences that build language and community.
- **Continued Discovery & Learning Through Play:** Children return to learning centers to dive deeper into play-based experiences.
- **Small Group Learning:** Teachers lead focused, interactive activities tailored to children's interests and developmental goals.
- **Outdoor Adventures:** Active outdoor play promotes physical development, social skills, and a connection to nature.

- **Lunch & Social Mealtime:** A nutritious meal shared with peers encourages healthy eating habits and social interaction.
- **Rest & Recharge (for full-day learners):** Quiet time provides an opportunity for rest, reflection, or calming activities.
- **Goodbyes & Daily Reflections:** Children prepare to go home with a sense of closure and excitement about their day.

Dressing Your Child for School

Children should wear comfortable play clothing that can get dirty. We do lots of fun messy activities in our classrooms and play outside daily.

- For winter: bring a snowsuit, mittens, a hat, and boots with your child's name on them
- For summer: bring a swimsuit, sunhat, a lightweight jacket, and sturdy sandals or water shoes (no flip flops)

Shoes that tie, velcro, or stay securely on your child's feet (like athletic shoes) will help prevent accidents and teach your child independence. Clothes that are easy for your child to fasten and unfasten can help them be more successful in toileting independently.

If you need help getting clothes, Center Directors can support you with resources/referrals.

Bringing Things From Home

There are many reasons that children may want to bring items to school like their favorite toy, stuffed animal, or security blanket. While we try to keep track, items from home can be damaged or lost. They can also be very disruptive to learning with our curriculum-based materials. Please keep your child's toys/belongings at home or in the car, and please do not send your child to school with money or food. We provide nutritious meals and snacks to your child, so bringing food from home is not necessary.

Screen Time in Classrooms

As planned parts of our educational program, children engage in technology within the classroom to aid in learning, encourage social interaction, and to increase technology skills. Preschool classrooms use the interactive HATCH Ignite computer software that supports our curriculum and School Readiness Goals. Recommended time for children to play is 30 minutes per week. We do not support television as a teaching tool and do not include video viewing as part of regular lesson plans or curriculum. Children in toddler classrooms do not receive any screen time because it is prohibited for children less than 2 years of age per Colorado child care state licensing regulations.

Center Celebrations

We believe that holiday traditions are family events which are celebrated differently from home to home. We value the diversity of our children and families and welcome learning about your family's traditions and cultures. Because of our value of diversity and federal requirements, we do not celebrate any specific holidays during program time.

Ways we can celebrate:

- Provide books and music from a wide variety of cultures
- Use seasonal items and art (eg., pumpkins, pine cones, gourds, snowflakes, etc.)
- Talk about different types of homes, families, work, and foods
- Bring in special healthy snacks to celebrate your child's birthday, ask the Center Director about allergies in your child's classroom and for suggestions about acceptable snacks
- Use multicultural materials including posters, artwork, puzzles, dolls, clothing, play foods, items, and musical instruments
- Learn and share words in another language
- Families are always welcome to volunteer to come in and share about your culture and traditions!

Developmental and Behavioral Screenings

TCHS uses two screenings completed by you to assess your child's social-emotional and developmental skills upon entering the program. You know your child best, and by sharing this valuable information with us we can start supporting your child's individual learning needs from the very beginning. The ASQ:SE-2 looks at your child's social-emotional skills and the ASQ-3 assesses your child's overall development.

Please complete both screenings for your child and return them to your child's teacher during your child's first week in the program.

Screening results will be discussed during your home visit. If you or your child's teachers have concerns about physical, emotional, social, communication, or cognitive development, we may recommend an evaluation. Our partner agencies provide support services which help children reach their milestones. We will assist you in preparing for assessments, meetings, and transitions to ensure a smooth process for your family.

Disabilities

Head Start provides early education to many children with developmental delays and disabilities. Our classrooms are inclusive and accommodations are made so that every child and family has the opportunity to fully participate in program activities and services. Our teachers are trained to develop lesson plans to match a child's individualized

educational plan (IEP) or individualized family service plan (IFSP) and work toward individualized goals. Our staff work together to support you throughout the process to be sure your child's needs are met, your needs are met, and you are aware of your rights every step of the way.

Mental Health

Supporting your child's positive mental health, or social-emotional well-being is a critical goal of our program. We want to partner with you, so we're happy to discuss any observations, questions, or concerns you may have about your child's well-being. One way that we promote wellness is to provide Early Childhood Mental Health Consultation to all staff. Consultation includes observations and recommendations to teachers to meet the social and emotional needs of all the children in their classrooms, which may include talking about a specific child's behaviors. This adds to the teacher's toolbox of working with children and is not a referral for individual therapy.

Behavior Guidance

All children have the right to work and play in an environment that is safe and respectful of their individual needs. Teachers structure the classrooms with clear and consistent rules to maintain the safety of all children. We create and maintain a socially and emotionally respectful early learning environment. We individualize social-emotional intervention support as needed to reduce challenging behaviors. If a child is a danger to themselves or others, we will work with families to develop a behavior management plan for the classroom and home. We may refer the family to community resources for additional support. According to our performance standards, children will not be suspended or expelled due to disruptive behaviors but will receive individualized, evidence-based behavior support, including family engagement.

Tri-County Head Start Code of Conduct

Staff, Child Care Partners, Families, and Volunteers will ADHERE to the following:

- Cultivate positive child, staff, and family relationships
- Create respectful early learning environments
- Implement teaching strategies to support pro-social interactions and social-emotional competence
- Provide individualized social-emotional support and implement behavior support plans as needed
- Protect children/families/staff/volunteers from harm
- Practice and model personal space/boundaries and respect for ourselves and others
- Encourage positive self-esteem, cooperation, self-control, self-direction, and

model positive behaviors

- Maintain a friendly, courteous and cooperative atmosphere on TCHS premises; treat others with respect, courtesy, kindness and caring.

Staff, Child Care Partners, Families, and Volunteers will REFRAIN from the following:

- Using corporal or other harsh punishment or physically abusive behavior, defined as intentional use of physical force that results in, or has the potential to result in, physical injury, including but not limited to punching, kicking, rough handling, hair pulling, slapping, dragging, hitting, shaking, biting, pinching, or inflicting any physical violence/abuse.
- Sexually abusive behavior, defined as any completed or attempted sexual act, sexual contact, or exploitation. Examples include, but are not limited to, behaviors such as inappropriate touching, inappropriate filming, or exposing a child to other sexual activities.
- Use of isolation to discipline a child.
- Restricting a child's movement by binding, tying, or confining in an enclosed area (closet, locked room, box, cubicle, etc.), taping a child's mouth.
- Emotionally harmful or abusive behavior, is defined as behaviors that harm a child's self worth or emotional well-being. Examples include, but are not limited to: using seclusion, profane or sarcastic remarks, public private humiliation, shaming, threatening, derogatory remarks about a child or child's family, frightening or ridiculing, rejecting, terrorizing, extended ignoring or corrupting a child.
- Using toilet learning/training methods that punish, demean, or humiliate a child.
- Neglectful behavior, defined as the failure to meet a child's basic physical and emotional needs including access to food, education, medical care, appropriate supervision by an adequate caregiver, and safe physical and emotional environments. Examples include but are not limited to; leaving a child unattended, withholding food as punishment, or refusing to change soiled diapers as punishment.
- Depriving children of: meals/snacks/water, rest, toilet use, outdoor play, daily learning, or gross motor activities; use of or withholding food as punishment or reward; using physical activity/outdoor time as punishment or reward.
- Sleeping or being on their personal cell phones or other electronic devices for social media, texting, or any other purposes while supervising children.
- Isolated one-on-one interactions, favoritism, or gift-giving to individual children.
- Establishing a relationship with children outside of program activities or exchanging personal email, phone numbers, or private interactions through social media or computer devices.
- Photographing children for purposes other than for program activities or for their family.

- Violation of any Colorado Child Care State Licensing Medication Administration regulations, including providing any treatment to children without proper approvals, completed training, certifications, and/or delegation.
- Failure to report inappropriate behavior and/or any violation of TCHS Policy, federal or state regulation or law (Mandated Reporting), and/or State of Colorado Licensing Regulation to the appropriate personnel or agency.

If your child has a pattern of using harmful words and/or actions towards others, you will be notified and a plan will be devised between you and your child's teacher to address the behavior.

Smoking, the use of tobacco products or illegal drugs, and the consumption of alcoholic beverages are not permitted at TCHS centers and premises.

Active Supervision

At Tri-County Head Start, your child's safety is our top priority. Our staff use active supervision at all times, maintaining focused attention, intentional observation, and strategic positioning to see and hear every child. This includes constant watching, counting, and listening to ensure each child is safe.

We maintain low teacher-to-child ratios to support effective supervision, and all staff receive annual training on Active Supervision and Pedestrian Safety. In addition, staff consistently review and practice safe supervision strategies, especially during transitions between classrooms, outdoor play, and community walks.

Families can help children stay safe by holding hands as you walk in and out of classrooms and parking lots and teaching children that only adults open doors and gates at our facilities.

Toileting Guidance

Children do not have to be toilet trained to be enrolled.

We provide all supplies for diapering at our centers, including diapers and wipes. To keep everyone safe, our staff practices proper hygiene when diapering, including handwashing, disinfecting and wearing gloves. We will support and encourage your child's readiness for independent self-help skills. Toilet teaching will be planned cooperatively between the teaching staff and the child's parent/guardian so that the toilet routine established is consistent between the center and the child's home. TCHS staff will not begin to toilet train children before 18 months old. When your child begins learning how to

toilet train, teachers will support meeting their individual needs through the learning process. Families may be asked to bring extra clothing for their child as accidents during this learning time are common.

Choking Hazards and Prevention

To help keep children safe, we do not serve choking hazard foods at school. Families can also reduce the risk at home by paying attention to how food is prepared, how children are seated during meals, and by closely supervising while eating.

To help prevent choking:

- Cut or mash foods to match your child's age and chewing ability.
- Avoid foods that are small, hard, sticky, or tough to chew.
- Have your child sit upright in a high chair or at the table when eating.
- Avoid letting children eat while walking, crawling, riding in a car, or stroller.
- Keep mealtimes calm and free from distractions.
- Always watch your child closely during meals and snacks.

Common choking hazard foods include:

- Fruits & Veggies: Whole corn kernels, uncut grapes or cherry tomatoes, pieces of hard raw carrots or apple chunks, whole pieces of canned fruits, uncooked dried vegetables or fruit, such as raisins.
- Proteins: Whole or chopped nuts and seeds, spoonfuls of nut and seed butters, tough or large chunks of meat, hot dogs or sausages, large chunks of cheese, whole beans, meat or fish with bones.
- Grains & Snacks: Granola bars, cookies, potato or corn chips, pretzels, popcorn, or similar snack foods, crackers or bread with seeds, nut pieces, or whole grain kernels, cooked whole grains like barley or wheat.
- Sweets: Hard or round candy, jelly beans, gum drops, gummy candies, caramels, chewy fruit snacks, chewing gum, marshmallows

Thank you for helping keep mealtimes safe for our children both at home and at school!

Attendance and Enrollment

Good attendance habits help foster school readiness in our children and their families. Children who are chronically absent in preschool (missing more than 2 days per month) are more likely to be behind in reading and math by 3rd grade. Help your child succeed in school by building the habit of good attendance.

- Your child will benefit most from a consistent daily schedule which includes school readiness activities and nutritious meals.
- Schedule changes must be discussed with your child's teachers and the Center Director and put into writing.
- The routines your child develops in preschool will continue throughout the school. We do realize that families have different schedules and if our schedule conflicts with yours, we may be able to accommodate your needs.

Work with your child and his/her teacher to help develop strong attendance habits. Your enthusiasm is a big boost to success. Here are some tips!

- Set a regular bedtime and morning routine at home and for drop-offs.
- Layout clothes and pack their school things the night before.
- Exchange ideas with other families for getting out the door on time.
- Find out what day school starts and start the exciting countdown!
- Make sure your child has the required immunizations.
- If your child seems anxious about going to school, talk to your child's teacher or director for advice. There are resources available to help you!
- Develop back-up plans for dropping off and/or picking up your child if something comes up.
- Schedule medical appointments and extended trips when school is not in session.
- Health is a big part of attendance. Know when your child is showing that they are not well enough to attend, or when they are OK. Talk with our Health Team if you have questions!

Attendance Policy

- Head Start students are expected not to miss more than two (2) days a month and Early Head Start students are expected not to miss more than three (3) days per month.

- Families are required to contact the center every day that their child is absent.
- Please inform staff if there will be a prolonged absence.
- If your child has an average daily attendance rate of less than 85% for two months, center staff will work with you to support you in improving your child's attendance. Families are required to participate in this improvement process.
- If your child stops attending and center staff cannot reach you for 30 days, your child's spot will be considered vacated and will be filled with another child.

Our program is here to help assist families regarding the challenges you may face in maintaining regular attendance. Please contact the Family & ERSEA Manager at 970-828-5906 if you have specific questions/concerns regarding your child's attendance. Communication is key!

Withdrawing from the Center

If a family decides to withdraw their child from the center for any reason, request for the Intent to Withdraw form or notify the center staff in writing regarding your child's last day of attendance and the reason for withdrawal.

Drop Off

- **For the safety of your child and everyone at the center, please never leave your child unattended in a car.**
- It is extremely important to drop off your child on time.
- The general goal is for children to be dropped off before breakfast is served.
- Change your child's diaper and wash hands with your child.
- Drop off is a time of transition and you can help your child slide smoothly into the school day by checking in with their teacher for a few minutes.
- If your child is late and their class is out on a walk or excursion, you will still sign them in at the time of drop off and they will be included in another class until their class returns.
- Please do not use your cell phone during drop off.

Pick Up

Why is Picking Up On Time Important?

- We strive to build consistent routines in our classrooms. Your child worries when you are not on time.
- We do not have staff availability or means to keep your child past their scheduled sessions. It is your responsibility to know your child's

schedule.

- Teachers have limited planning time after their classroom's scheduled session, and picking up late prevents them from preparing for the next day.
- Picking up on time establishes a positive schedule pattern that will continue into your child's school years.
- This policy is for the safety and security of you and your child. We thank you in advance for your support.
- Please do not use your cell phone during pick up.

TCHS Late Pick-Up Policy

In the unlikely event that your child is not picked up at the end of their scheduled session:

1. After 15 minutes, staff will call you. If you cannot be reached, staff will call everyone you authorized as emergency contacts to pick up your child.
2. If no person authorized to pick up the child has arrived within thirty minutes after the session end, local law enforcement will be contacted to assist in locating an authorized pick-up person. If none is found, a call to Child Protective Services will be made to report an abandoned child.
3. **Consistent Late Pick-Up Procedures:** If you develop a pattern of late pick-ups, staff will need to meet with you to review our policy and procedures and develop an action plan to support on-time pick-up.

Child Custody Issues

According to Colorado Law, if you have joint custody, both biological parents are entitled to pick up the child at any time and be involved in the child's education and progress. Our centers cannot legally restrict a non-custodial parent from visiting the child, reviewing the child's records, or picking up the child. **If you have a court-ordered child arrangement other than joint custody, you must provide us with a copy so we may comply with the order.** If you want our program to share information about your child's progress with their non-primary parent, please share contact information so we may include them.

Authorized Release of Children

Staff will only release your child to the legal parent/guardians and people listed in writing on the Authorized Pick-Up List. Anyone picking up a child must sign the child out and should be prepared to present a photo ID to center staff members. **It is important to regularly update your Emergency Contact and Authorized Pick-Up list.** In the event of an emergency, we will need to be able

to reach you or an authorized person who can come to the center to pick up your child.

Vehicle Safety

Anyone picking up a child in a vehicle must have reliable transportation and a child car seat. The child car seat must meet [state guidelines](#) for child restraint in vehicles for the child's size and age. If you need help obtaining a car seat, talk with your center director.

If a parent/guardian or authorized pick-up person arrives at the center to pick up a child without an adequate child car seat, center staff will advise them of the Colorado State Law requirement and inform them that we must call the police non-emergency number if they leave with the child. If this becomes a recurring problem, as mandated reporters, TCHS staff are **required to report the situation to Child Protective Services.**

Weather Policy

TCHS follows the school district in your community for cancellations or delays due to severe weather. In the event of a weather related closure, TCHS will send email and text alerts to parents/guardians notifying them of the closure. During operating hours, we watch the weather closely to determine if it is unsafe for children to be outside. Studies consistently show that children are healthier and have a stronger resistance to illness with outdoor exercise. However, during severe storms or if we're experiencing temperatures below 25°F or above 100°F, we will stay inside.

Classroom Emergency Closures

If the center closes for an emergency, staff will contact parents/guardians by phone, text, and/or email. Emergency closures may be due to severe weather or loss of utilities.

Emergency Preparedness

Tri-County Head Start values the safety of our children and staff. We have adopted the "I Love U Guys" Foundation's Standard Response Protocol (SRP), which you can find more information about in the Appendix. We conduct safety drills on a monthly basis, including drills for fire, evacuation, lockdown, secure, and shelter. In the event of an emergency requiring evacuation, staff will attend to the safety of the children first. Evacuation routes are posted in all rooms. Once children are free and clear of danger, 911 will be contacted. Center

staff will bring emergency contact information and contact families to pick up children if we are unable to safely re-occupy the building. We have agreements with local community partners to use their facilities as secondary evacuation sites in the event we need to get away from the building. These sites are:

CENTER	SECONDARY EVACUATION SITE
Durango North	Durango Public Library <i>Address:</i> 1900 E 3rd Ave, Durango, CO 81301 <i>Phone:</i> 970-375-3380 (Main), 970-764-5965 (Emergency On-Call Cell)
Mesa View	Cortez Recreation Center <i>Address:</i> 425 Roger Smith Ave, Cortez, CO 81321 <i>Phone:</i> 970-564-4080
Pagosa Springs	Pagosa Springs High School <i>Address:</i> 800 South 8th Street, Pagosa Springs, CO 81147 <i>Phone:</i> 970-264-2231

Accident Procedure

Our CPR and First Aid-certified staff will administer first aid for any injuries and the child's family will be notified. All accidents will be documented on the TCHS Major/Minor Incident Report form to be given to the parent/guardian at the end of the day to be reviewed and signed.

Severe Emergency Medical Procedure

In the case of a severe accident or illness of a student, Tri-County Head Start will do the following:

1. Administer CPR/First Aid, as certified
2. A staff member will stay with the child at all times
3. Call 911
4. Notify the parent/guardian
5. Staff or family will accompany the child in the ambulance
6. Report to the Department of Early Childhood via the online injury system within 24 hours (excluding weekends and holidays)
7. Complete TCHS Major/Minor Incident Report form
8. Staff will make a report to CPS within 3 days after the incident.

Good Health and Nutrition

We strive to serve healthy, fun meals and we know that good nutrition helps

your child do their best. Connect with a staff member for help and resources on how to incorporate healthy eating habits at home, shop on a budget, or if you have any questions about your child’s nutrition. We’re here to help!

TCHS follows Child and Adult Care Food Program (CACFP) guidelines. All children are served two meals and a snack each day, and monthly menus are posted on our website and at each center. Children are served in a relaxed, Family Style Dining atmosphere, and are encouraged to experiment with new foods.

Family Style Dining includes:

- Children and teachers sitting together at tables
- Children serving themselves from child-sized platters and utensils, learning to hold flatware, and pour drinks from small pitchers
- Children and teachers sharing thoughts and experiences as they eat
- Children passing platters, taking turns, and using appropriate language and manners as modeled by the teachers

Food is never used as a punishment or reward. Meals are planned with regard to their nutritional value, with special emphasis given to protein-rich foods, fruits, vegetables, and whole grains.

Water is always available and offered to the children, and milk is served with every meal. Please let a staff member know if your child has special dietary needs; we make meal accommodations for diagnosed food allergies and intolerances. Please note that we do not accommodate personal food preferences.

Sometimes families want to bring food to the classroom to share. Talk with your Center Director to plan a shared cooking experience or snack! We suggest the best present you could give your child to celebrate their birthday would be to spend the day in the classroom as your child’s special guest.

Required Health Checks For Your Child

Health Information Due How Often		
Up-to-date Immunizations	Prior to the first day of attending school	Depends on the child’s age and immunization history.

Well Child Check/Physical Exam	Within 30 days of the first day of attending school	At 2, 4, 6, 9, 12, 15, 18, 24, 30, and 36 months. Every 12 months for children over 3 years old.
Dental Exam	Within 90 days of the first day of attending school	Required every 12 months for children over 1 year old. Strongly recommended every 6 months (covered by Medicaid insurance).

If you need help getting insurance to cover the cost of the exams, please let the staff know. They can direct you to community partners that can help you determine what's available for your family.

If your child has had either a physical or dental exam in the past 12 months, let the staff at your Head Start center know the name and contact information of the doctor/dentist, or bring in a copy of the exam.

We are here to help you understand the importance of preventative health and oral care and find ways to meet these requirements. If you have problems or questions, reach out and we can assist you.

Immunization Policy

The Tri-County Head Start (TCHS) Immunization Policy is designed to meet the requirements of Colorado State Child Care Licensing, Colorado State Law per the Colorado Department of Public Health & Environment (CDPHE), and Head Start Performance Standards.

Vaccines required for child care and preschool

To attend preschool and child care, your child must be vaccinated against:

- Hepatitis B (HepB)
- Diphtheria, tetanus, and pertussis (DTaP)*
- Haemophilus influenzae type b (Hib)
- Measles, mumps, and rubella (MMR)*
- Pneumococcal disease (PCV)
- Polio (IPV)*
- Varicella (chickenpox)*

Get kindergarten ready: *Colorado law requires children between the ages of 4 and 6 years to receive their final doses of DTaP, IPV, MMR, and varicella vaccines before

kindergarten entry.

Finding and paying for vaccinations:

If you need help finding free or low-cost vaccines, go to COVax4Kids.org or <https://cdphe.colorado.gov/immunizations/get-vaccinated> or dial 2-1-1 for information on Health First Colorado (Medicaid) and vaccine clinics in your area.

1. TCHS MUST have a child's immunization record BEFORE that child can start attending our program.

2. TCHS staff will work with parents/guardians to ensure that children are adequately immunized.
3. TCHS authorized staff will have access to [CIIS](#), the Colorado Immunization Information System, to look up the immunization records for any child who applies for the TCHS program.
 - a. **The information in CIIS is confidential and will be kept confidential by all TCHS staff.** See [CIIS Privacy and Confidentiality](#) and the [Confidentiality section](#) of the TCHS Family Handbook.
 - b. Under Colorado law, parents/guardians may remove their child's information from CIIS at any time. Parents/Guardians can request the CIIS Opt-Out Form from their health care provider to get the process started. TCHS staff can point parents/guardians to the CIIS Opt-Out Procedures page for more information: cdphe.colorado.gov/ciis-opt-out-procedures.
 - c. TCHS staff will not enter immunization records into CIIS (e.g., to input out-of-state records). This should be done by the child's health care provider.

4. Missing Immunizations

- a. As soon as TCHS staff is aware of missing immunizations, they will inform parents/guardians via the [CDPHE Notice of Immunization Requirement and In-Process Form](#) no later than the next day the child attends school.
- b. Per Colorado Law, the parents/guardians have 14 days after receiving notice to bring their child up-to-date on required, age-appropriate immunizations. If the needed immunizations cannot be given at the same time, a documented plan must be established with the health care provider, defining a schedule for bringing the child up-to-date. **This plan must be provided to TCHS.**
- c. If a parent/guardian does not provide the necessary information within 14 days, TCHS staff will provide the [CDPHE Notice of Exclusion](#) to the parent/guardian the next day the child attends school. The child will be temporarily excluded from the program until the parent/guardian can bring their child up-to-date on required, age-appropriate immunizations, or establish a plan with their health care provider for doing so, and provide the appropriate documentation.

5. Exemptions

- a. If a parent/guardian wishes to exempt their child from some or all immunizations for medical, religious, or personal reasons, they may do so.

b. Nonmedical Exemptions

- i. The Colorado Certificate of Nonmedical Exemption must be completed to exempt a child from one or more state-required immunizations. **Families must provide a copy to TCHS.**
 1. TCHS staff should direct parents/guardians to cdphe.colorado.gov/vaccine-exemptions to complete this process. They will either need to take the Online Immunization Education Module linked at the bottom of the webpage, complete the form digitally, and get it a signed by a medical doctor, doctor of osteopathic medicine, advanced practice nurse, or delegated physician's assistant, Registered Nurse, or Pharmacist **OR** get a copy of the exemption form signed by an immunizing provider.
- ii. The Certificate of Nonmedical Exemption must be filed each time a student is due for vaccines, according to the Advisory Committee on Immunization Practices (ACIP) schedule:
 1. Parents of students in preschool or child care must submit nonmedical exemptions at 2, 4, 6, 12, and 18 months of age. Forms must be submitted to TCHS annually after that.
 2. These exemptions expire when the child enrolls in kindergarten.

c. Medical Exemptions

- i. Students with a completed Certificate of Medical Exemption—signed by a medical doctor, doctor of osteopathic medicine, advanced practice nurse, or delegated physician's assistant—need to file a Medical Exemption only once unless the student's information or school changes.
- ii. **Families must provide a completed Certificate of Medical Exemption to TCHS.** TCHS staff can provide this form to families: [English](#) (additional languages coming to the CDPHE vaccine exemption page).
- iii. **Exclusion from child care and school**
 1. If there is an outbreak of a vaccine-preventable disease at your child's school, and your child has not received the vaccine for that disease, they may be required to stay home for multiple days depending on the recommendation from public health officials. That could mean lost learning time for them and lost work and wages for you. For example, if your child has not received

an MMR vaccine, they may need to stay home from school for 21 days after someone gets sick with measles.

Medication Administration Policy

If medication must be given at school, we must first have a completed Permission for Medication Administration form on file before the medication can be administered. This form must be signed by the parents/guardians, the child's medical provider, and the TCHS Child Care Health Consultant, which can take some time to coordinate. For the comfort and safety of your child, we may recommend that you keep your child at home until the medication is authorized to be given. Please note: all staff providing medication undergo special training with the TCHS Child Care Health Consultant, a Registered Nurse. Please notify staff as soon as you are aware of a health condition or medical issue that may require medication at school or a written Health Care Plan to effectively provide care for your child.

See our Medication Administration Procedure in the Appendix.

Health Activities Provided for Your Child by TCHS

Activity	When	Results
Vision & Hearing Screenings	Within 45 days of the first day of attending school	Re-screening and/or referral to doctor, vision or hearing specialist
Height and Weight Measurement	Annually; done in-house if not on physical exam record	If there are concerns, results and resources are shared with the family
Hand washing	Multiple times each day	Lifelong healthy habits
Toothbrushing with fluoride toothpaste	Every day	Lifelong healthy habit
Dental Screening* (including fluoride treatment if approved by parent/guardian)	Annually, in the fall	Report of results is sent home to families; referral to a dentist as needed

Nutrition/Health/Safety training	These activities are included routinely	Lifelong healthy habits
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*We participate in La Plata County Public Health Department's dental screening program when it is offered. The permission form is included in your orientation paperwork. This voluntary, no cost program meets screening requirements, but does not replace your child's regular dental exams. A current dental exam with a dentist is still required within 90 days of attending.

Program Height and Weight Screening

As part of the program's health requirements, height and weight measurements are taken for all enrolled children or obtained from a current physical exam. Body Mass Index (BMI) is a number calculated from a child's weight and height. According to the Centers for Disease Control and Prevention, BMI is used to screen children for a healthy weight, obesity, overweight, or underweight. If a child's Body Mass Index (BMI) is found to be at or above the 85th percentile or at or below the 5th percentile for their age, the program will follow-up with their family to provide healthy tips to get their child to a healthy weight.

We want to be as supportive as possible because your child's health is a very important part of overall growth and development. We realize our measurements do not show the full picture of your child's health history. Staff can provide you with more information on related topics and connect you with services as requested.

What To Do When Your Child Is Sick

Most children with a mild illness can safely attend school. If your child is out due to illness, please notify the center **as soon as possible**.

Your child may be too sick to attend if:

- The staff cannot adequately care for the sick child without compromising the care of the other children.
- The child does not feel well enough to participate comfortably in the program's activities.
- The child has symptoms or a diagnosed illness on the illness chart and staying home is required per the policy

See Appendix for Tri-County Head Start's Illness Policy
outlining which diseases/symptoms may require a temporary absence from school.

We may need to contact you to pick up your child from school due to illness, so

please be sure to keep your emergency contact information up-to-date, so we can reach you or one of your Authorized Pick-Up people from your Emergency Contacts list.

If you keep your child home for an illness, please contact your Center Director to notify them that your child is ill.

If your child has been exposed to a contagious disease, notify the classroom staff or Center Director who will discuss with our nurse and determine if your child should stay home.

In emerging illness or pandemic situations, such as COVID-19, we will follow the TCHS Evidence-Based COVID Mitigation Policy. It is available for review [on our website](#) or a copy can be requested at your center.

Remember: good hand washing habits and staying home when sick are the best ways to prevent the spread of illness!

Facility Safety

TCHS facilities and grounds may be under video camera security. TCHS classrooms are under video monitoring. All TCHS centers are secure and access is strictly limited to authorized personnel only. Security measures including locked external and internal doors and surveillance systems are in place to ensure the safety of everyone on site. Unauthorized individuals are not permitted to enter at any time. Firearms are prohibited on the premises, both indoor and outdoor, and in any vehicle children are transported.

Center Video Surveillance

The use of video cameras in all common work areas along with the classrooms and playgrounds is to promote your child's safety and security while in our care. The cameras are intended to serve as a resource for reviewing specific incidents and to provide a factual record when needed. They will be recording audio and visual images at all times and saved for a minimum of 30 days. Extreme care is used to safeguard the surveillance media against unauthorized use. Cameras may also be used for classroom observations and professional development. The full *Video Surveillance Policy* is available upon request.

Tri-County Head Start Complaint Procedure

It is the policy of Tri-County Head Start to afford program participants and the general community the opportunity to complain about any program services or delivery systems.

Unresolved complaints regarding TCHS will be referred to the Head Start Center

Director and/or the Executive Director. If you are a TCHS family and are not satisfied with the services provided by TCHS, you can contact your Center Director and fill out a complaint form found here: <https://tinyurl.com/6ajkx87n>, or you may contact the Executive Director at executivedirector@tchs4c.org. Complaints will be handled by our Executive Director and every attempt will be made to resolve the complaint immediately.

Reporting of Licensing Complaints

When should parents file a complaint?

Parents are encouraged to file a licensing complaint if they believe a child care program is not meeting state licensing requirements. This may include concerns related to child safety, supervision, facility conditions, staff conduct, health practices, or any other issue that may place children at risk or violate licensing standards.

How to file a complaint:

To report a concern, contact the Division of Early Care and Learning by phone: 303-866-5958, Monday through Friday, 8:00 a.m. – 5:00 p.m.

If calling outside of business hours, you may leave a message. Be sure to provide the following information:

- Your **name**
- Your **telephone number**
- Your **mailing address**

This will help ensure that the Division can follow up on your concern appropriately.

Call 911 immediately if you witness a child in a life-threatening situation.

Child Abuse and Neglect Reporting

Required by State Licensing Authority, as stated in “Rules Regulating Child Care Centers:” A child care facility must require each staff member of the facility to read and sign a statement clearly defining child abuse and neglect pursuant to state law and outlining the staff member’s personal responsibility to report all incidents of child abuse or neglect as a “mandated reporter.”

This means that we are required to call Child Protective Services if we suspect

or witness child abuse or neglect with any of our children and families. According to the Colorado Children's Code, abuse is defined as an act or omission by the caregiver which threatens the health or welfare of a child, including physical, sexual, and emotional abuse. Neglect occurs when a child's environment is injurious to their welfare, a child lacks proper nutrition, education, medical care, or other care necessary for their health, guidance, and well-being.

If you have any questions regarding mandated reporting, please call the Family & ERSEA Manager at 970-828-5906.

Colorado Office of Early Childhood

Report Child Abuse or Neglect

1. Call 1-844-CO-4-KIDS (844-264-5437) to report child abuse or neglect.
2. Reports must be made by a witness or someone that has first-hand knowledge of the abuse.
3. It is Division policy not to accept anonymous complaints except for unlicensed provider complaints. Please be prepared to give your name, telephone number, and mailing address to the intake person.
4. The Division will keep all information about families and children in care confidential.

Anti-Discrimination Statement

Tri-County Head Start does not discriminate based on race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, or any other protected status in its programs, services, employment, or activities. We comply with all applicable state and federal laws, including Affirmative Action, Equal Employment Opportunity, Title VII, and the ADA.

As a Child and Adult Care Food Program (CACFP) provider, we follow USDA civil rights regulations. Discrimination is prohibited on the basis of race, color, national origin, sex (including gender identity and sexual orientation), age, disability, or reprisal for prior civil rights activity. Program information is available in other languages and accessible formats upon request.

To file a complaint, complete the USDA Program Discrimination Complaint Form (AD-3027) online or call 866-632-9992. Submit by mail to USDA, Office of the Assistant Secretary for Civil Rights, 1400 Independence Ave, SW, Washington, DC 20250-9410; by fax to (833) 256-1665; or by email to program.intake@usda.gov.

APPENDIX

TCHS Illness Policy

(adapted from CDPHE [How Sick is Too Sick?](#), updated May 2024)

This document outlines guidance for routine decisions about when children and staff should stay home from school or child care. There may be situations where public health determines more stringent return-to-school requirements.

There are four main reasons for children and adults to stay home:

1. The child or staff member could infect others with a contagious illness, either because of symptoms, a diagnosis, or recent exposure to a contagious illness.
2. The child or staff member does not feel well enough to take part in usual activities. For example, a child is overly tired, fussy, or will not stop crying.
3. A child needs more care than teachers and staff can give while still caring for the other children.
4. The child or staff member has symptoms or an illness on this list, and staying home is required.

When to seek emergency medical attention:

- Trouble breathing
- Persistent pain or pressure in the chest
- Confusion
- Inability to wake or stay awake
- Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone

These are not all possible indications of a medical emergency. Call 9-1-1 or your health care provider for any other symptoms that are severe or concerning to you.

If a contagious illness is identified in the center, the Center Director/Team Lead will post the appropriate [Medical Alert](#) on the front entrance of the center and/or classroom for a minimum of 1 week based on diagnosis from a medical provider/confirmed case (post Medical Alert longer as needed).

Not all illnesses or symptoms can be covered in a grid like the one below. Please stay alert to changes in a child's health status. Speak with parents/guardians about any changes you notice. **Call the Health & Safety Program Specialist or Child Care Health Consultant if you have questions.**

Guidance for Symptoms Not Due to a Specific Disease	Child or Staff Must Stay Home?
Severe or new cough, including croup	YES – Severe cough is often present in people with infectious respiratory illness. A person with severe, uncontrolled coughing, wheezing, or rapid or difficulty breathing (if new or worsening) should not attend school or child care and should talk to a health care provider. If all symptoms are consistent with the usual symptoms of a known chronic condition and the person is otherwise well enough to return to school, no further evaluation is necessary. Students and staff may return to school, even if the cough is not fully resolved, as long as exclusion is not required for other symptoms or diagnosis.
Diarrhea Frequent, loose, or watery stools (poop) compared to normal ones that are not caused by food or medicine.	YES – Unless the diarrhea is related to an existing chronic condition, is explained by a diagnosed condition not requiring the person to stay home, or is consistent with the person's baseline. The child or staff member may return to school or child care 24 hours after their last episode of diarrhea unless the diarrhea is caused by an illness that requires them to stay home longer. If the diarrhea is explained by a specific illness, then the child or staff can return to school following exclusion guidelines for that illness.
Fever Fever is a temperature of 100.4°F or greater.	YES – The child or staff member may return to school if the fever has been resolved for 24 hours without fever-reducing medications, unless the fever is caused by an illness that requires them to stay home longer. If the fever is consistent with the usual symptoms of a known chronic condition and the person is otherwise well enough to return to school, no further evaluation is necessary. A temporary, elevated temperature due to overexertion or overdress, without other symptoms of illness, should not be considered a fever. For more information about fever, read Children's Hospital Colorado's recommendations on fever care.
Flu-like Symptoms Fever with sore throat or cough Other symptoms can include runny nose, congestion, fatigue, body aches, vomiting, diarrhea.	YES – Children and staff may return to school or child care as long as they are fever-free for 24 hours without the use of fever-reducing medications and other symptoms are improving, unless the symptoms are caused by an illness that requires them to stay home longer. If the symptoms can be explained by a specific illness, then follow the exclusion guidelines for that illness. In consultation with a health care provider, additional evaluation for flu-like illnesses, sore throat, and upper respiratory symptoms may be appropriate, including evaluation for strep throat.
Vomiting	YES – Unless the vomiting is related to an existing chronic condition or is explained by a diagnosed condition not requiring the person to stay home. If the vomiting is unexplained and inconsistent with the person's baseline state of health, the child or staff member may return 24 hours after their last episode of vomiting. If the vomiting can be explained by a specific illness, then follow the exclusion guidelines for that illness. If a child with a recent head injury vomits, seek immediate medical attention.

Guidance for Specific Diagnosed Illnesses	Child or Staff Must Stay Home?
Chicken Pox	YES – Until the blisters have dried and crusted (usually 6 days), or in immunized people without crusting, until no lesions within 24-hour period.
Conjunctivitis (pink eye) Pink color of eye and thick yellow/green discharge	NO – Children and adults do not need to stay home unless they have a fever or are not able to participate in usual activities. Practice good hand hygiene.
Fifth's Disease (parvovirus)	NO – The illness is no longer contagious once the rash appears.
Hand Foot and Mouth Disease (Coxsackie virus)	NO – Exclusion is not necessary unless the child or adult meets other exclusion criteria, is drooling uncontrollably, and has mouth sores or is not able to take part in usual activities.
Head Lice or Scabies	YES – Children and staff may stay at school or child care until the end of the day, but cannot return until after a pediculicide treatment has been applied. Until the end of the school day, the individual with the infestation must avoid head-to-head contact or sharing of head gear. If they cannot effectively do so, they must be excluded until after their first treatment.
Hepatitis A, Salmonella, Shigella, or Shiga Toxin-Producing E. coli	YES – Children and staff may return to school or child care when cleared by the health department.
Herpes	NO – Exclusion is not necessary unless there are open sores that cannot be covered or there is uncontrollable drooling.
Impetigo	YES – Children and adults need to stay home until 24 hours after antibiotic treatment has started.
Norovirus	YES – Exclude children and staff for at least 48 hours after their last episode of vomiting and/or diarrhea. During an outbreak of confirmed or suspected norovirus, exclusion may be increased to 72 hours after the last episode of vomiting and/or diarrhea.
Ringworm	YES – Children may stay at school or child care until the end of the day but cannot return until after they have had the first treatment. Keep the area covered for the first 3 days if participating in activities with person to person contact.
Roseola	NO – Exclusion is not necessary unless there is a fever or behavior changes.

Guidance for Specific Diagnosed Illnesses	Child or Staff Must Stay Home?
Respiratory viruses COVID-19, Influenza, RSV (Respiratory Syncytial Virus)	VARIES – Children and staff with symptoms must remain out of school or child care until they are fever-free for 24 hours without the use of fever-reducing medications and other symptoms have been improving for 24 hours. If an individual tests positive for COVID-19 but has no symptoms, they may return to school or child care. Additional precautions are recommended for at least 5 days following the return of anyone recovering from respiratory symptoms, including hand and respiratory hygiene, improved ventilation, masking, physical distancing, and testing. Refer to CDC’s Respiratory Virus Guidance for additional information. During an outbreak or when case rates are high, exclusion times may be increased.
Strep Throat	YES – Exclude for 12 hours after starting antibiotics.
Other vaccine-preventable diseases Measles, Mumps, Rubella (German Measles), Pertussis (Whooping Cough)	YES – Children and staff can return to school once they are no longer contagious (see Infectious Disease Guidelines). Public health consultation may be necessary.
Yeast infections Thrush or Candida diaper rash	NO – Follow good hand washing and hygiene practices.
Other Symptoms or illnesses not listed	Contact the Center Director/Team Lead to see if the child or staff member needs to stay home (see Infectious Disease Guidelines). They will engage the Health & Safety Program Specialist and/or Child Care Health Consultant as needed. Public Health consultation may be necessary.

The CDPHE “How Sick Is Too Sick” document was developed in collaboration with pediatricians, medical epidemiologists, and public health professionals.

The information presented is intended for educational purposes only. It is not intended to take the place of your personal doctor’s advice and is not intended to diagnose, treat, cure or prevent any disease. The information should not be used in place of a visit, call or consultation or advice of your doctor or other health care provider.

Tri-County Head Start Medication Administration Procedure

Colorado Law regarding medication administration to children during program hours

Medications may be needed at school for some acute or chronic conditions. If your child needs medication administered at school, Tri-County Head Start has trained staff on site to safely administer prescription medication or FDA-approved over-the-counter medication as indicated by your child's doctor. In these cases, the following will apply:

1. You may come to the center and give the medication to your child at the appropriate time, or program personnel who have been trained to administer medications may give the medication. **Any medication given, whether by the parent/guardian or staff member, must be recorded on the Medication Log.**
2. In order for a staff member to give medication at the center, the following forms need to be completed and on file at the center:
 - a. *Permission for Medication Administration at School and Child Care* - For any type of medication to be given by staff at the center, this form must be completely filled out by your child's health care provider. It must then be signed by the health care provider, the TCHS Child Care Health Consultant, and the parent/guardian. This applies to both prescription and over-the-counter medication.
 - b. *Health Care Plan* - For a chronic health condition, such as asthma, an individualized and detailed Health Care Plan must be provided by the child's health care provider and signed by the parent/guardian and TCHS Child Care Health Consultant.
3. Prescription medication must be in the original labeled container with a prescription label that includes all of the following: the child's name, name of the medication, expiration date, dosage, prescribed timing for the medication to be administered, the route of administration, any special instructions, storage instructions, and the name of the prescribing health care provider. This must match what the same health care provider wrote on the Permission for Medication Administration form.
4. FDA approved over-the-counter medications, such as Benadryl or Tylenol, must be in the original store-bought container. The child's full name must be on the container.
5. The parent/guardian is responsible for bringing any equipment that may be needed to administer the medication, such as a spacer for an asthma inhaler or nebulizer machine. Your child may not be allowed to attend if the required equipment or medication is not brought to the center.

Thank you for your cooperation regarding these requirements. These procedures ensure the program's compliance with state and federal regulations and ensure the health and safety of the children in our care. If you have any questions, please feel free to contact the TCHS Health and Safety Director at 970-828-5912.



Flu Information

The Flu:

A Guide for Parents



Influenza (also known as flu) is a contagious respiratory illness caused by influenza viruses that infect the nose, throat and lungs. Flu is different from a cold, and usually comes on suddenly. Each year flu viruses cause millions of illnesses, hundreds of thousands of hospital stays and thousands or tens of thousands of deaths in the United States.

Flu can be very dangerous for children. CDC estimates that between 6,000 and 26,000 children younger than 5 years have been hospitalized each year in the United States because of influenza. The flu vaccine is safe and helps protect children from flu.

What parents should know

How serious is flu?

While flu illness can vary from mild to severe, children often need medical care because of flu. Children younger than 5 years and children of any age with certain long-term health problems are at high risk of flu complications like pneumonia, bronchitis, sinus and ear infections. Some health problems that are known to make children more vulnerable to flu include asthma, diabetes and disorders of the brain or nervous system.

How does flu spread?

Flu viruses are thought to spread mainly by droplets made when someone with flu coughs, sneezes or talks. These droplets can land in the mouths or noses of people nearby. A person also can get flu by touching something that has flu virus on it and then touching their mouth, eyes, or nose.

What are flu symptoms?

Flu symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, feeling tired and sometimes vomiting and diarrhea (more common in children than adults). Some people with the flu will not have a fever.



Protect your child

How can I protect my child from flu?

The first and best way to protect against flu is to get a yearly flu vaccine for yourself and your child.

- Flu vaccination is recommended for everyone 6 months and older every year. Flu shots and nasal spray flu vaccines are both options for vaccination.
- It's especially important that young children and children with certain long-term health problems get vaccinated.
- Caregivers of children at high risk of flu complications should get a flu vaccine. (Babies younger than 6 months are at high risk for serious flu complications, but too young to get a flu vaccine.)
- Pregnant women should get a flu vaccine to protect themselves and their baby from flu. Research shows that flu vaccination protects the baby from flu for several months after birth.
- Flu viruses are constantly changing and so flu vaccines are updated often to protect against the flu viruses that research indicates are most likely to cause illness during the upcoming flu season.

Is flu vaccine safe?

Flu vaccines are made using strict safety and production measures. Millions of people have safely received flu vaccines for decades. Flu shots and nasal spray flu vaccines are both options for vaccination. Different types of flu vaccines are licensed for different ages. Each person should get one that is appropriate for their age. CDC and the American Academy of Pediatrics recommend an annual flu vaccine for all children 6 months and older.

What are the benefits of getting a flu vaccine?

- A flu vaccine can keep you and your child from getting sick. When vaccine viruses and circulating viruses are matched, flu vaccination has been shown to reduce the risk of getting sick with flu by about half.
- Flu vaccines can keep your child from being hospitalized from flu. One recent study showed that flu vaccine reduced children's risk of flu-related pediatric intensive care unit admission by 74%.

- **Flu vaccine can prevent your child from dying from flu.** A study using data from recent flu seasons found that flu vaccine reduced the risk of flu-associated death by half among children with high risk medical conditions and by nearly two-thirds among children without medical conditions.
- **Flu vaccination also may make your illness milder if you do get sick.**
- **Getting yourself and your child vaccinated also can protect others** who may be more vulnerable to serious flu illness, like babies and young children, older people, and people with certain long-term health problems.

What are some other ways I can protect my child against flu?

In addition to getting a flu vaccine, you and your child should take everyday actions to help prevent the spread of germs.

Stay away from people who are sick as much as possible to keep from getting sick yourself. If you or your child are sick, avoid others as much as possible to keep from infecting them. Also, remember to regularly cover your coughs and sneezes, wash your hands often, avoid touching your eyes, nose and mouth, and clean surfaces that may be contaminated with flu viruses. These everyday actions can help reduce your chances of getting sick and prevent the spread of germs to others if you are sick. However, a yearly flu vaccine is the best way to prevent flu illness.

If your child is sick

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child's illness.

Make sure your child gets plenty of rest and drinks enough fluids.

If your child is 5 years or older and does not have a long-term health problems and gets flu symptoms, including a fever and/or cough, consult your doctor as needed.

Children younger than 5 years of age – especially those younger than 2 years – and children with certain long-term health problems (including asthma, diabetes and disorders of the brain or nervous system), are at high risk of serious flu complications. Call your doctor or take your child to the doctor right away if they develop flu symptoms.

What if my child seems very sick?

Even healthy children can get very sick from flu. If your child is experiencing the following emergency warning signs, you should go to the emergency room:

- Fast breathing or trouble breathing
- Bluish lips or face

- Ribs pulling in with each breath
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children less than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions



This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Is there a medicine to treat flu?

Yes. Antiviral drugs are prescription medicines that can be used to treat flu illness. They can shorten your illness and make it milder, and they can prevent serious complications that could result in a hospital stay. Antivirals work best when started during the first 2 days of illness. Antiviral drugs are recommended to treat flu in people who are very sick (for example, people who are in the hospital) or people who are at high risk of serious flu complications who get flu symptoms. Antivirals can be given to children and pregnant women.

How long can a sick person spread flu to others?

People with flu may be able to infect others from 1 day before getting sick to up to 5 to 7 days after. Severely ill people or young children may be able to spread the flu longer, especially if they still have symptoms.

Can my child go to school, day care, or camp if he or she is sick?

No. Your child should stay home to rest and to avoid spreading flu to other children or caregivers.

When can my child go back to school after having flu?

Keep your child home from school, day care, or camp for at least 24 hours after their fever is gone. (The fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F (37.8°C)* or higher.

*Many authorities use either 100 (37.8 degrees Celsius) or 100.4 F (38.0 degrees Celsius) as a cut-off for fever, but this number can vary depending on factors such as the method of measurement and the age of the person.

For more information, visit www.cdc.gov/flu/protect/children.htm or call 800-CDC-INFO



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



STANDARD RESPONSE PROTOCOL

INFORMATION FOR PARENTS AND GUARDIANS

Our school has adopted The "I Love U Guys" Foundation's Standard Response Protocol (SRP). Students and staff will be training, practicing, and drilling the protocol.

COMMON LANGUAGE

The Standard Response Protocol (SRP) is based on an all-hazards approach as opposed to individual scenarios. Like the Incident Command System (ICS), SRP utilizes clear common language while allowing for flexibility in protocol.

The premise is simple - there are five specific actions that can be performed during an incident. When communicating these, the action is labeled with a "Term of Art" and is then followed by a "Directive." Execution of the action is performed by active participants, including students, staff, teachers and first responders. The SRP is based on the following actions: Hold, Secure, Lockdown, Evacuate, and Shelter.

HOLD

"In Your Classroom or Area"

Students are trained to:

- Clear the hallways and remain in their area or room until the "All Clear" is announced
- Do business as usual

Adults and staff are trained to:

- Close and lock the door
- Account for students and adults
- Do business as usual



SECURE

"Get Inside. Lock outside doors"

Students are trained to:

- Return to inside of building
- Do business as usual

Adults and staff are trained to:

- Bring everyone indoors
- Lock the outside doors
- Increase situational awareness
- Account for students and adults
- Do business as usual



LOCKDOWN

"Locks, Lights, Out of Sight"

Students are trained to:

- Move away from sight
- Maintain silence
- Do not open the door

Adults and staff are trained to:

- Recover students from hallway if possible
- Lock the classroom door
- Turn out the lights
- Move away from sight
- Maintain silence
- Do not open the door
- Prepare to evade or defend



EVACUATE

"To a Location"

Students are trained to:

- Leave stuff behind if required to
- If possible, bring their phone
- Follow instructions

Adults and staff are trained to:

- Bring roll sheet and Go Bag (unless instructed not to bring anything with them, dependent on reason for evacuation.)
- Lead students to Evacuation location
- Account for students and adults
- Report injuries or problems using Red Card/Green Card method.



SHELTER

"State Hazard and Safety Strategy"

Hazards might include:

- Tornado
- Hazmat
- Earthquake
- Tsunami

Safety Strategies might include:

- Evacuate to shelter area
- Seal the room
- Drop, cover and hold
- Get to high ground

Students are trained in:

- Appropriate Hazards and Safety Strategies

Adults and staff are trained in:

- Appropriate Hazards and Safety Strategies
- Accounting for students and adults
- Report injuries or problems using Red Card/Green Card method.



