WELCOME

We welcome you and your child to our early childhood program. This book contains information about our preschool program, staff, policies, and procedures. We look forward to partnering with you and your family this year.

Our Early Childhood Programs include Head Start and the Great Start Readiness Program. These comprehensive programs provide preschool options for three year olds up to age eligibility for kindergarten and their families. Classrooms are located throughout Livingston County in both public schools and in community based partner programs. Children in our programs have an opportunity to participate in activities in all areas of development (social, emotional, language, cognitive and physical).

Our Philosophy

We believe children learn best through play. Research shows the connection between play and developing abilities such as memory, self‐regulation, oral language, social skills and later success in school.

While in school children are active all day long using their entire bodies and senses. Children explore, investigate and discover their natural surroundings, laying the foundation for future learning and success in life.

We believe:

• Each child is an individual with his or her own pattern of growth and development.
• Each child has unique experiences and interests.
• Each child learns best when experiences and information are meaningful.
• Learning is a life-long process that is shaped by the individual's own thinking and experience.
• Parents are a child’s primary teachers.
• Developing strong, positive relationships between parents and teachers supports a child’s learning and growth.
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Livingston ESA
Early Childhood Preschool Program

GENERAL INFORMATION

Enrollment
Our services include comprehensive preschool programs that are state and federal government grant funded for children who are Livingston County residents between the ages of three and age eligibility for kindergarten. Documentation needed for enrollment includes: completed application, verification of income, up-to-date immunization record, birth certificate or record of birth, medical cards and developmental documents (ex. IEP, IFSP).

Withdrawal Policy
If your child is enrolled and can no longer attend the program, please contact the Family Service and Enrollment Coordinator at 517.540.6847. There are very few reasons a child my be dismissed from our programs. Our staff will work with students and families on an individual needs basis for alternative programming if necessary.

Cost of Program
Our no-cost (or minimal for families above the 250% poverty threshold), comprehensive preschool programs require no enrollment or application fee. For those on the sliding scale, tuition is due the first of the month by check or cash.

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 250%</td>
<td>Free</td>
</tr>
<tr>
<td>251% - 300%</td>
<td>$20.00 per month</td>
</tr>
<tr>
<td>301% and above</td>
<td>$40.00 per month</td>
</tr>
</tbody>
</table>

Attendance
Your child’s attendance is very important. Regular attendance helps children to develop strong routines for later school attendance and supports children so they get maximum benefit from their preschool experience. Our program requires a 85% daily attendance rate for all children. When attendance is irregular, exceeds one day with no contact from parents, or falls below the expected 85% daily attendance rate, families will be contacted by the teacher so we can support you in developing an Attendance Action Plan to help improve attendance.

If your child is not going to be in attendance at school, parents are expected to call the child’s teacher (classroom phone number) to report the absence. Please leave details regarding the reason for absence such as transportation, illness (nature of illness), family issues, appointments, etc.
Did You Know?

Showing up on time every day for preschool is important to your child’s success later in school.

Missing 10% of preschool (equates to only one or two days every few weeks) can:

- Make it harder to develop early reading skills.
- Make it harder to get ready for kindergarten and first grade.
- Develop a poor attendance pattern that’s hard to break.

High quality preschool programs have many benefits. The routines your child and your family develop in preschool will continue throughout school.

Weather

Weather permitting, children play outside during each school day. Children who are not well enough to play outside, he/she is not well enough to be in the classroom.

Each classroom housed in a local district elementary school will follow that district’s weather procedures. For example, if your child attends a preschool classroom in Brighton and Brighton cancels school due to bad weather, your child’s preschool will also be cancelled. Parents should listen to local radio and television news for school cancellations. If your child attends preschool in the Education Center in Howell, you will be listening for Livingston ESA Early Childhood Programs or Howell Public School closing information.

If class is canceled due to inclement weather or for any issues, parents will receive an email and text from Childplus. Please make sure that you opt in for Text Messaging.

Tornado Watches

When a tornado WATCH is in effect during the school day, students will remain in their regular school settings, such as classrooms or play areas. When a tornado WATCH is in effect at the conclusion of the normal school day, students will be released via regular dismissal procedures and transportation plans. Parents or guardians are discouraged from coming to the school to pick up their child(ren) during tornado WATCHES.

Tornado Warnings

When a tornado WARNING is in effect during the school day, students will be placed in the safest locations available at their school. When a tornado WARNING is in effect at the conclusion of the normal school day, students WILL NOT be released from school until appropriate officials cancel the tornado warning. Children may not leave school by any means (i.e. school bus, car pools, private vehicles, walking etc.) until the WARNING is cancelled. In order to keep all building occupants safe, children, staff and parents will not be released from the shelter during a tornado WARNING.

Drills

Tornado drills shall be held in each school during the school year, with at least one of the drills being conducted during the months prior to the normal tornado season.

Fire drills will be conducted at least four times during the school year. Information about fire and severe weather drill procedures will be posted in each classroom and explained to the students. Evacuation routes will also be posted.

Lockdown and intruder drill procedures may be practiced depending on the site. The procedures will be with the teacher of each classroom and explained to the students in an appropriate manner.
Transportation

Parents, grandparents, day-care providers, aunts, uncles, friends, or other adults transporting a child can be easily distracted in parking lots. Other drivers cannot see when they back-up because the car next to them is too large or they are distracted by their cell phones, or blind spots make it easy for them to overlook small children who may be behind them. Also, children do not always do what they are told or stay where they should, it only takes one second for tragedy to strike.

To help avoid injuries to children in our parking lots, please observe the following:

**ALWAYS** hold your child’s hand in the parking lot and while crossing the street.

**NEVER** leave your child or any other young child unattended in the car. It is **ILLEGAL**.

**DRIVE SLOWLY** while entering and exiting school property.

**OBSERVE** posted signs for parking. Cars parked in designated handicapped areas will be ticketed.

**ALWAYS** have your child exit onto the sidewalk, not the street.

**BUCKLE UP!** It is the **LAW**! Both you and your child need to be buckled in the car.

*HOUSE BILL No. 4872 Sec. 135a. (1) A person who is responsible for the care or welfare of a child shall not leave that child unattended in a vehicle for a period of time that poses an unreasonable risk of harm or injury to the child or under circumstances that pose an unreasonable risk of harm or injury to the child.*

Picking up your child

Only you, and people listed on your child’s emergency card, may pick up your child from school or at the bus stop. Your emergency contact person **MUST** be local and have a working phone. If you want someone other than those listed on the card to pick up your child, you must let us know in writing. The person picking up your child will be required to show identification.

It is very important to be on time when bringing your child to school and picking up your child from school. All programs run 8:45am until 3:45pm. Children are actively learning until the end of their day and our grants require that children attend for the full seven hours of class. If you find the need to pick up your child prior to 3:45pm on a regular basis, please contact the Family Service and Enrollment Coordinator to talk about your issue so that we can help in problem solving. Regular attendance patterns are established early and are very important to school success. Please send your concerns to teresagrostic@livingstonesa.org.

If you do not want your child picked up by his/her other parent, a written court order must be on file in our office.

Anyone picking up a child from school must report to the classroom and sign the child out.
The health, safety and nutrition areas of our program include screening, well child visits, and information from parents to determine a child’s health status and identify any issues that affect growth and development. Families and staff work together to complete the required health screenings ensuring children are able to take full advantage of their learning experience.

If your child becomes ill at school, the parents and/or emergency contact person will be notified by telephone within 10 minutes. Your emergency contact person must live close enough to pick the child up within 10-20 minutes.

Physicals

Parents must provide Well Child Physical that is not more than one year old from the first day of school. If it expires during the school year a new physical must be provided.

Screening Services:

Well Child Visits should include:

- A comprehensive health history including assessment of both physical and mental health development.
- Comprehensive unclothed physical exam.
- Appropriate immunizations using the Advisory Committee on Immunization Practices (ACIP) for pediatric vaccines schedule.
- Laboratory tests.
- Childhood (birth-5 years) – sickle cell, hemoglobin or hematocrit, cholesterol, TB screening (yearly, if high risk) and lead toxicity are required to be evaluated by your physician for Head Start.
• Health Education includes guidance regarding safety, nutrition, exercise and physical and mental development and counseling for children, parents/guardians. The purpose of health education is to assist the parent/guardian in understanding what to expect relative to their child’s development and provide information on the benefits of healthy lifestyles and practices, accident and disease prevention.

• Vision Screening (due 45 days after enrollment for Head Start) must be provided according to the periodicity schedule (yearly). Livingston ESA Early Childhood Programs are visited by the Livingston County Health Department to meet this requirement. Further follow up visits to a doctor may be needed for diagnosis and treatment of defects in vision. Please provide documentation of the visits.

• Hearing Screening (due 45 days after enrollment for Head Start) includes a yearly screening. Livingston ESA Early Childhood Programs are visited by the Livingston County Health Department to meet this requirement. Further follow up visits to a doctor may be needed for diagnosis and treatment of defects in hearing, including hearing aids. Please provide documentation of the visits.

• Dental Services (due 90 days after enrollment for Head Start) in accordance with the “well child” schedule. Parents must provide a Dental Exam that is not more than 6 months old from the student’s first day of school. Further follow up visits to a dentist may be needed for diagnosis and treatment. Please provide documentation of the visits.

• Services to be obtained from the dentist:
  • relief of pain and infections
  • restoration of teeth
  • maintenance of dental health
  • direct referral to a dentist by age 3 or sooner if indicated

Diagnosis

• Order diagnostic services based on needs identified during the examination.
• Provide for immediate referral when indicated.
• Follow-up to assure the services are received.

Treatment

• Livingston ESA Early Childhood Programs require documents for completed follow-up care.

Responsibilities of Primary Care Practitioners include:

• Arrange or provide well child check-ups and document the care provided.
• Arrange referral for other preventative health care and medically necessary services to treat identified conditions.
• Report outcomes to the Department of Community Health and/or the appropriate health plan.
• Provide treatment for all of the child’s health care needs.
• Provide treatment or other measures to correct or improve defects, physical and mental illnesses, or any other condition(s) discovered.
## Health Guidelines

Our programs encourage safeguarding the health of young children and staff by requesting families to follow these guidelines when deciding if your child is not going to attend school, parents are expected to call the classroom teacher to report the absence.

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>MANAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temperature 100.4 degrees Fahrenheit or higher when taken by mouth</td>
<td>At least 24 hours with no fever without fever-reducing medication</td>
</tr>
<tr>
<td>Illness that keeps the child from joining activities or going outside</td>
<td>Stay home until the illness gets better and the child can participate in activities</td>
</tr>
<tr>
<td>Illness that requires a need for care that is too great for the classroom staff to handle without affecting the health and safety of others</td>
<td>Stay home until the illness gets better and the child can be properly cared for in the classroom setting</td>
</tr>
<tr>
<td>Rash with fever or behavioral change</td>
<td>Medical evaluation and stay home until the illness is determined non-communicable</td>
</tr>
<tr>
<td>Abdominal pain for two hours or more or on-and-off abdominal pain with fever, dehydration or other systemic signs and symptoms</td>
<td>Medical evaluation and stay home until the symptoms have gone</td>
</tr>
<tr>
<td>Vomiting two or more times in the previous 24 hours</td>
<td>Stay home until symptoms have gone, unless vomiting is determined to be caused by a non-communicable condition and the child is able to remain hydrated and can participate in activities</td>
</tr>
<tr>
<td>Diarrhea if stool is not contained in a diaper or if the child is toilet trained and is having accidents. For all children if more than 2 stools above normal for that child or stools contain blood or mucus.</td>
<td>Medical evaluation for stools with blood or mucus. Stay home until the stools are contained in the diaper or when the toilet-trained children no longer have accidents and when stool frequency becomes less than 2 stools above that child’s normal frequency or a care plan is put in place.</td>
</tr>
<tr>
<td>Oral sores</td>
<td>Stay home if unable to contain drool or if unable to participate for other reasons</td>
</tr>
<tr>
<td>Skin sores</td>
<td>Stay home if lesions are weeping or draining and cannot be covered with a waterproof dressing</td>
</tr>
<tr>
<td>Lice</td>
<td>Stay home until treated and all the nits are picked out; staff will evaluate before returning to class</td>
</tr>
<tr>
<td>Child has been diagnosed with a communicable disease</td>
<td>Exclusion only if required; contact the Health Coordinator</td>
</tr>
</tbody>
</table>

If your child becomes ill at school, the parents and/or emergency contact person will be notified. Your emergency contact person must live close enough to pick the child up within 10-20 minutes.
2020-2021 Staff/Volunteer/Parent Exclusion for Illness

Our program serves an at-risk population as such it is essential that these guidelines are followed.

A facility should not deny admission to or send home a staff member, substitute or parent volunteer with illness unless one or more of the conditions below exist. The staff member should be excluded as follows:

a. **Chickenpox**, until all lesions have dried and crusted, which usually occurs by six days;
b. **Shingles**, only if the lesions cannot be covered by clothing or a dressing until the lesions have crusted;
c. **Rash with fever or joint pain**, until diagnosed not to be measles or rubella;
d. **Measles**, until four days after onset of the rash (if the staff member or substitute is immunocompetent);
e. **Rubella**, until six days after onset of rash;
f. **Hepatitis A virus**, until one week after symptom onset or as directed by the health department;
g. **Pertussis**, until five days of appropriate antibiotic therapy;
h. **Skin infection (such as impetigo)**, until treatment has been initiated; exclusion should continue if lesion is draining AND cannot be covered;
i. **Tuberculosis**, until noninfectious and cleared by a health department official or a primary care provider;
j. **Strep throat or other streptococcal infection**, until twenty-four hours after initial antibiotic treatment and end of fever;
k. **Head lice**, from the end of the day of discovery until after the first treatment;
l. **Scabies**, until after treatment has been completed;
m. **Haemophilus influenzae type b (Hib)**, prophylaxis, until antibiotic treatment has been initiated;
n. **Meningococcal infection**, until appropriate therapy has been administered for twenty-four hours;
o. **Respiratory illness**, if the illness limits the staff member’s ability to provide an acceptable level of child care and compromises the health and safety of the children.
p. **Any other illness** where you are not sure if you should come to work contact the Health Coordinator at 517-540-6845.

Staff/Volunteers/Parents who have **herpes cold sores (fever blisters)** should not be excluded from the child care facility, but should:

1. Cover and not touch their lesions.
2. Carefully observe hand hygiene policies.
Medication Guidelines

When a parent/guardian requests that medication be administered at school, the Health Coordinator must be contacted and arrangements made prior to the medication coming to school.

*If your child has asthma and is prescribed a rescue inhaler, it should be at school with your child in the event there is an emergency.*

**Over-the-Counter Medication (OTC)**

1. The parent/guardian must provide a completed Authorization for Non-Prescribed or Prescribed Medication or Treatment form. This written permission includes:
   - The name of the medication.
   - Date, time, dosage and route to be administered (must comply with the written instructions on the label of the OTC medication; if different, physician documentation must be provided).
   - Phone number where the parent can be reached in case of an emergency.
   - A doctor’s order will be required for over the counter medication.
   - A doctor’s order will not be required for over-the-counter products that are not medications.

2. Medication must be in the original container (labeled with child’s full name) and brought to school by the parent.

3. Our staff will give the medication as indicated, in the presence of another staff member, except for administration by a registered nurse, who will then document on the Medication Administration Log.

4. All medications will be stored in a locked box during the school day.

**Medication Prescribed by a Doctor**

1. The parent/guardian must have the doctor complete an Authorization for Prescribed Medication or Treatment form.

2. Any added “health” forms (as determined by the Health Coordinator), a parent must sign and date the form(s). The form(s) must include the following:
   - The name of the medication
   - Date(s), time, dosage and route to be administered
   - Instructions, restrictions/side effects and storage requirements
   - Phone number where the parent can be reached in case of an emergency
   - Dated physician and parent signatures

3. Medications that are controlled substances will have additional requirements.

4. Medication must be in the original container (the container must have a pharmacy label with child’s full name) and brought to school by the parent.

5. Our staff will give the medication as indicated, in the presence of another staff member and then document on the Medication Administration Log.

6. All medications will be stored in a locked box during the school day. Emergency medications will not be locked but they will be secured by staff for easy access in case of an emergency situation.
Students to Whom Epinephrine Injections May Be Administered

A licensed, registered, professional nurse or trained and authorized employees under this policy may administer EpiPen® injections to:

1. Any student who has a prescription on file with the district, in accordance with the directives in such prescription, and
2. Any individual on school grounds who is believed to be having an anaphylactic reaction.
3. Stock Epinephrine is not available at all sites. The law does not apply to Head Start or Great Start Readiness Programs.

Lice Policy

Students are not allowed in the classroom when head lice (pediculosis) or “nits” are present.

1. Upon discovery of either “live” lice or “nits,” classroom staff will immediately:
   a. Restrict the child from activities involving close contact with other children.
   b. Verbally notify parent/guardian and request immediate pick-up.
   c. If unable to contact parent or emergency contacts (as listed on child’s information card) child will remain in the classroom and will be allowed to ride the bus (if applicable) home.
   d. Send notification letters and head lice information sheets home to classmates’ parents.
   e. Parents to return Head Lice and Nit Check–Log located on the reverse side of the notification letter indicating that they have checked their child’s head for head lice/nits.
2. Classroom staff will complete Checklist for Head Lice form and submit the form to the central office upon completion.
3. Prior to re-admittance to the classroom and transportation, classroom staff will inspect child for live lice and/or nits. If either is present, child will not be readmitted to school.
4. If after seven calendar days of short-term exclusion the child is still not clear to return to school, parent/guardian will be sent a letter notifying them that the child will be dropped from the program if there is no response or resolution within an additional seven days.
   a. The classroom staff will provide follow-up (i.e., person-to-person phone contact, face-to-face contact or home visit) and assistance to family to insure student’s timely return to the classroom.
5. Short-term exclusion for lice is not to exceed 14 calendar days per incidence.
6. If chronic absenteeism due to lice persists, Livingston ESA Early Childhood Programs will follow Sec. 1302.16 of the Head Start Program Performance Standards and the child’s slot will be considered a vacancy.

Adopted by Policy Council, February 2007
Menus

Menus with noted food substitutions will be posted in a place visible to parents.

Our school day programs will be served food three times during the day: breakfast, lunch and p.m. snack. In accordance with the minimum meal requirements of the Child and Adult Care Food Program. The center will comply with rule 400.8330(3) to ensure children with special dietary needs receive meals/snacks in accordance with the child’s needs. Monthly menus will be provided. Monthly menus will be provided.

Meal Time in the Classroom

Breakfast (morning sessions snack) and hot lunch (all sessions) are served every day. Our school day programs will be served food three times during the day. These servings will be breakfast, lunch, and PM snack. Monthly menus will be provided. Children help set up, serve, and clean up for all meals. Mealtime is considered a learning experience. Children learn about math (how many people at the table), cultures (different types of food), the community (people who help grow the food), nutrition (what food helps your body grow), science (changes in food as it is prepared), and much more during mealtime.

Children and adults, including visitors and parents, sit together family style for all meals. A relaxed atmosphere is promoted through conversation. Food is never used as punishment or reward for any reason. New foods are introduced with cooking activities and children are encouraged to try all of their “creations.” Parents are encouraged to plan and present food activities to broaden a child’s cultural experiences or provide a way to learn about nutrition. Please plan this event with the teacher five weeks prior to the event.

Allergies

If a physician has diagnosed food allergies for your child, the Health Coordinator must be notified prior to the first day of school to plan meals and snacks. Documentation from your child’s physician is required by the Child and Adult Care Food Program our program runs. The food services will be notified to ensure extra precautions are taken to prevent cross contamination.

Special Diets

A plan will be worked out between the parents and the Health Coordinator when a physician recommends special diets. Required forms must be completed for the Child and Adult Care Food Program prior to accommodation.

Milk With Every Meal

The USDA Child Care Food Program requires all children be encouraged to drink milk at breakfast and lunch. A milk substitute will be available for those children who have a diagnosed milk or dairy allergy after documentation is on file. Contact the Health Coordinator to receive the required form.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at 800.877.8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) (http://www.ascr.usda.gov/complaint_filing_cust.html) online, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call 866.632.9992. Submit your completed form or letter to USDA by: (1) Mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410 (2) Fax: 202.690.7442 (3) Email: program.intake@usda.gov This institution is an equal opportunity provider.
LEARNING

Lisa Pecorilli-Eoll, Kristen Kostielney
Early Childhood Specialists

Curriculum

Our teachers use Creative Curriculum to plan learning experiences in an environment where children have opportunities to learn and practice new skills. Creative Curriculum is based on 38 objectives for development and learning, which are completely aligned with the Head Start Early Learning Outcomes Framework as well as early learning standards for every state. It offers daily opportunities to individualize instruction, helping teachers meet the needs of every learner. This curriculum addresses all the important areas of learning, from social-emotional and math to technology and the arts, and incorporates them throughout every part of the day. Creative Curriculum offers support for working with English and dual-language learners, including information that helps to build teachers’ knowledge about best practices. The curriculum allows every child to bring particular interests, life experiences, and learning styles and help teachers to make accommodations to service all learners.

We also incorporate, "I Am Moving I Am Learning (IMIL)," which is a proactive approach for addressing childhood obesity in Early Childhood Programs. IMIL seeks to increase daily moderate to vigorous physical activity, improve the quality of movement activities intentionally planned and facilitated by adults, and promote healthy food choices every day.

In addition, the Second Step Early Learning Program, which teaches self‐regulation and thought process, is incorporated daily in every classroom. The purpose is to help children learn skills to manage their feelings, make friends and solve problems. “Home Links” are emailed weekly making it easier for you to talk with your child about what they learned in class. If you do not have email access, let your teacher know and a paper copy will be sent home with your child.

To promote effective oral hygiene, children brush their teeth once a day at school. Teachers also incorporate Brush, which provides activities to promote healthy eating and dental health.

Measuring Growth

In order to provide the most successful classroom experiences, teachers gather information from a brief developmental screening called the Early Screening Inventory (completed during the child’s first home visit or first few weeks of school). In addition, the Ages and Stages: Social Emotional Questionnaire screening tool is filled out by the parent to provide a brief look into the social emotional development of the preschool child.

Teaching Strategies GOLD is the measurement tool used with Creative Curriculum. It is an organized tool used to observe and document student's growth and development over the course of the school year. GOLD assists teachers in: individualizing instruction, measuring progress, guiding planning and instruction, and communicating with families.

See Appendix for Kindergarten Readiness Indicators
Celebrating Special Occasions and the Seasons

We recognize the changing seasons while not promoting any specific holidays. Teachers will have a very long list of activities related to the seasons and will be happy to talk with you about some ideas you could use at home. Below are a few examples of how we celebrate and learn about the seasons:

**Fall**
- Fall colors
- Pumpkins and harvest
- Changing weather

**Winter**
- Changing weather
- Traditions
- Friendship

**Spring**
- Plants and flowers
- Baby animals
- Families

**Birthdays**

Birthdays can be celebrated in the classrooms. Teachers have different ways of acknowledging each child's special day, although food is not allowed in the classroom. Some ways to celebrate may include:

- Have the child share a family photo during large group time
- Make a special birthday symbol in class for the child to wear on his/her special day
- Have a family member volunteer in the classroom
- Sing happy birthday
- Make the child a special helper for the day

Please see your child’s teacher for more ideas.
MENTAL HEALTH AND DISABILITIES SERVICES

Jennifer Lange, LMSW
Mental Health and Disabilities Coordinator

Disabilities Services

Enrollment opportunities are available to children with special needs in our Early Childhood Program. Our Mental Health and Disabilities Coordinator helps to coordinate services for children with special needs by facilitating communication between families and special education providers.

Parents/caregivers are encouraged to contact Jennifer Lange, our Mental Health and Disabilities Coordinator, with any worries or concerns about their child. As an added support, our ancillary staff provide direct or consultative services in all Early Childhood classrooms.

Mental Health Services

One of the primary roles of our Mental Health Coordinator is to ensure the classroom environment supports social-emotional growth, which is the child’s growing ability to:

- Express feelings in healthy ways (without hurting self or others)
- Develop close relationships with others
- Explore his/her surroundings and learn

These abilities help the child to focus, follow directions, share, solve problems, care about how other people feel and experience more success in school.

Through social-emotional screenings, curriculum activities and general classroom observations we ensure that our classroom environments are supportive, responsive and focused on meeting children’s needs. In addition, parents/caregivers complete the Ages and Stages: Social Emotional screening tool. This screening tool is used to provide a brief look into the social emotional development of your child. If concerns are noted on the screening, a staff member will contact the parent/caregiver to discuss and provide any additional supports.
At times, a teacher or parent may feel a child is experiencing difficulties or showing challenging behaviors in the classroom or at home which may benefit the family to seek out additional supports. These may include (but are not limited to):

- Extremely active
- Shows no fear of strangers
- Has sleeping or eating problems
- Lacks interest in other people or playthings
- Rarely seeks or makes eye contact
- Has extreme and frequent tantrums
- Fearful or withdrawn
- Often appears sad
- Extreme mood swings
- Sudden behavior changes

Mental Health staff members are available to meet with the teaching staff or family to discuss concerns and formulate an individual plan, which may include providing supports in the classroom or providing the family with community referrals. It is important for staff and parents to use a consistent approach to support the child in school and at home. If behaviors continue to escalate and cause danger to the child or to others, a plan to modify the child’s day, or program, may become necessary.

If you have a concern or worry about your child, please contact your child's teacher. Staff and families will discuss topics such as:

- Child management, guidance, and discipline techniques to modify behavior
- Literature on discipline, child management, and stress or trauma
- Agency workshops on stress, discipline and behavior management techniques that may support the family
- Referrals to mental health services when needed

A Resource Library is available to parents and staff on a broad range of topics. Books, videos, and pamphlets may be borrowed for up to 2 weeks. Please contact Jennifer Lange at 517.540.6843 if you are interested in hearing more about the topics available.

**Separation Anxiety**

Our program is intentional about supporting children with the transition of starting preschool. Our procedure includes: each child receiving a Home Visit and having an orientation time in the classroom. During the Home Visit children are introduced to their teacher in their own environment; by the end of the visit the teacher is no longer a stranger to the child or the child’s family. Your and your child will also have a 45 minute orientation on the first day of school. This orientation takes place in your child's classroom, you will be able to see the room, meet staff, become familiar with the building, and meet other families.

For many children, preschool is their first experience away from their parents. Some children may meet this challenge with a smile and enthusiasm; other children may experience a few adjustment difficulties. There are also other children who may experience tears, screams, panic and genuine separation anxiety problems. Children who experience separation anxiety and are put on the bus are usually feeling much better by the time they walk into the classroom. Please feel free to contact your child's teacher if you are worried about his/her well-being.

Here are some suggestions to help you nurture your child’s separation:

- Before school, talk about what each of you will be doing that day.
- Always take time to say goodbye.
- Remind your child that you will be home when they return home from school, or remind them where they will be going after school if they are not going straight home (e.g., daycare, grand mother's house, friend's house, etc.)
- Let your child see that you and the teacher are building a relationship (for example, talk to your child’s teacher; call, attend meetings, volunteer).
- Volunteer in the classroom.
• When your child returns home, share your day and ask about his/hers. Be specific with your questions, such as, “Can you tell me one thing you played with today? I wonder what you had for snack? Did _____ come to school today? Did you play outside?”

• Congratulate yourself for sending your child to preschool. He/she is increasing self-confidence, making new friends and preparing for kindergarten.

If you have any concerns about your child, please speak with the teacher.

Child Guidance/Discipline

Our program uses an approach to discipline and guidance that emphasizes respect for each child, age appropriate expectations of children’s behavior and the use of positive discipline and guidance strategies. Our staff members strive to create a relaxed, positive environment that enables children to explore and experiment while remaining safe and feeling well-supported.

Through positive guidance strategies and modeling social skills, staff help children learn pro-social behaviors, build confidence and self-esteem, and develop greater respect for others’ rights and feelings, as well as a sense that they are themselves respected.

Discipline concerns are handled by staff in ways that encourage children to solve problems and develop a sense of inner self-control. Children are given choices and opportunities to be an active part of decision-making in their environment. This helps to foster a sense of personal responsibility. Staff help children understand the reasons for rules and limits and to help children feel good about the choices they make.

Our staff will use a variety of strategies for positive discipline and guidance in the classroom which are age appropriate including the following:

• Plan ahead in order to anticipate problems.

• Limit expectations to what is realistic for the developmental level of each child (and make these expectations clear to children). E.g. understand that young children are not ready to share yet; model and encourage sharing, but do not insist on it.

• Create a “yes” environment: rather than telling children what they cannot do, give them choices of the things they can do.

• Talk about children’s positive behavior: “Thank you for giving the truck to Daniel when you were finished with it.”

• Set a few simple, clear rules, focused around health and well being, safety, respect for property and respect for others.

• State rules positively rather than negatively: “Please walk” instead of “Don’t run.” Offer reasons for rules: “I know you really want to paint, but it is not safe to run inside the classroom. I don’t want you to slip and fall. Please use your walking feet when you are inside.”

• Model behaviors that we wish children to use, such as always being courteous and attentive. Give children clear, simple directions and positive reminders.

• Pay close attention to children in order to prevent and/or intervene in challenging behaviors (especially important with children who are likely to escalate, hit or bite.)

• Redirect children from unacceptable to acceptable behavior: “I am going to help you stop kicking. We’ll find something else for you to do.” Share our own feelings about certain behaviors: “I get worried when you climb on the bookshelf.”

• Help children deal with frustration and anger through words or pretend play. Focus on the child’s behavior, not on the child’s value as a person.
Unacceptable Discipline Methods:
The following methods are prohibited by staff at all times, under any circumstances:

- Hitting, spanking, shaking, biting, pinching, or inflicting other forms of corporal punishment.
- Restricting a child’s movement by binding or tying him or her.
- Inflicting mental or emotional punishment, such as humiliating, shaming, or threatening a child.
- Depriving a child of meals, snacks, rest, or necessary toilet use.
- Excluding a child from outdoor play or other gross motor activities.
- Excluding a child from daily learning experiences.
- Confining a child in an enclosed area, such as a closet, locked room, box, or similar cubicle.
- Use of food as reward.
- Abusive or profane language.
- Punishment for soiling, wetting, or not using the toilet.
- Bribes, false threats or false choices.
- Retaliating or doing to the child what she/he did to someone else.
- Labeling a child as “bad” or otherwise implying that s/he is a problem, rather than the behavior.
- Placing any substances in a child’s mouth, including but not limited to, soap, hot sauce, or vinegar.
Research shows parent engagement supports a child’s success in school. We believe that you, as a parent and/or legal guardian, are the most important influence in your child’s education and development. You are your child’s first teacher and we look forward to supporting you in this role. Parents can help plan activities in the classroom for children, plan with teachers and staff during home visits and parent/teacher conferences, volunteer in the classroom, attend parent meetings, attend family fun events, or participate on committees such as Policy Council.

In addition to volunteering in the classroom and on committees, there are learning opportunities for families on different topics such as health, nutrition, child development, community resources and job readiness. Our program may be your child’s first time attending school and our goal is to partner with you to create the best experience for your child. You are encouraged and invited to:

- Attend parent activities throughout our Early Childhood Community.
- Volunteer in the classroom and encourage grandparents, other family members and members of the community to volunteer.
- Participate in Center Parent Meetings and learning opportunities throughout the year.
- Serve on the Early Childcare & Community Partner Committee, Health and Family Services Advisory Committee or Policy Council/Parent Advisory Committee.
- Plan classroom activities.
- Drive your child to school and school-related activities.
- Encourage learning and exploring at home by following our ‘Ready Rosie’ parent program.
• Read our weekly “Home Links” from the Second Step Program and try out some of the activities.
• Help plan parent trainings and ways to help other parents to be involved.
• Work with preschool staff when you think there may be an issue that may require a referral for outside support services.
• Participate fully in home visits, conferences and school events.

We want all parents, grandparents and family members to feel welcome to volunteer in our program at any time.

Get Involved!

Studies show that parental involvement in a child’s education is one of the most important factors in raising student self-esteem and academic achievement. We would love to have you volunteer in your child’s classroom.

Parent Volunteer Guidelines

If you are interested in limited volunteering in the classroom you must have:
• A signed Child Abuse and neglect statement
• A signed Oath of Confidentiality Statement

If you are interested in regular volunteering (more than four hours a week for two consecutive weeks) you must have:
• A signed Child Abuse and neglect statement
• A signed Oath of Confidentiality Statement
• A Comprehensive Fingerprint
• A TB
• A physical

When you volunteer in the classroom:
• Actively engage with the children
• Assist children during transitions such as washing hands, lining up, getting snack or lunch, dismissal, etc.
• Remember that adults may assist children, but allow them to exercise self-help skills.
• Observe children and be aware of the environment. Let the teacher know of any potentially harmful situation.
• Inform the teacher of any behavioral issues so that she may address the behavior and communicate with the parent directly. Please exercise discretion and do not discuss with any one other than the teacher. Confidentiality is to be maintained at all times.
• Inform the teacher of any injured child so that she may tend to the child.

Classroom Tips
• When you talk to children, get to their level both in your choice of words, and by kneeling down.
• Give children choices when possible. For example, ask: “Where would you like to build your train, here or there?” This guides the child to the area the train may be built and gives the decision and the power to the child.
• Phrase necessary tasks in this way: “Hands need washing before snack” rather than “Do you want to wash your hands?”
• Let children learn by experience. Encourage them to help themselves. Offer assistance only when it is necessary to avoid a feeling of failure or discouragement. Through doing things themselves children assert their independence and learn.

• Encourage children whenever possible. “That was hard work, but you kept on trying.”

• When possible let the children experience materials in their own way as long as they are safe and respectful. At the art table help children to use the materials, but avoid making models or samples for children to copy. Comments on a final creative product aren’t necessary and judgments of a finished masterpiece are to be avoided. The goal is to have children tell us how they feel about their work. “Would you like to tell me about your picture?” If you are asked if you like their work, feel free to admire the effort, the colors, the shapes, the size and blending of the colors.

• Assist children when working through conflict. Approach the children calmly and stop any hurtful actions. Acknowledge each child’s feelings. Ask each child to state the problem and help the children choose a solution together.

• Refer to the teacher for further guidance issues.

REMEMBER THAT WE ARE ALL LEARNING AND YOU AREN’T EXPECTED TO BE THE PERFECT PARENT VOLUNTEER!

Calling All Fathers

Men uniquely contribute to the healthy development of children. Boys and girls that grow up with an involved father and an involved mother have advanced physical and mental skills, better physical mental health, are better problem solvers and are more confident, curious and empathetic. They also show greater moral sensitivity and self-control (U.S. Department of Health and Human Services, 2004).

Moms and Livingston ESA Early Childhood Staff can encourage men to become more involved with their children, with their families, and with activities. Fathers, grandfathers, uncles, brothers, other relatives, or other male friends can all be important contributors to your child’s life.

Follow the Livingston ESA Early Childhood website, lesaearlychildhood.weebly.com for fun activities that can be done at home, articles that encourage men to become a stronger presence in a young child’s life and tips on how to help raise sons and daughters.

Our program is designed to involve a male role model in children’s lives. We encourage dad, grandpa, uncle, brother, cousin or even a male family friend to participate with their child. Join your child in his/her classroom and be a part of his/her day. You are invited to:

• Come for mealtime
• Come in and play
• Read a book
• Stop in during your work break
• Play with the children on the playground during outside time

Did you know:

✓ Children are most successful at school when the family and the school work as partners.

✓ Children whose fathers take an active role in school earn better grades, score higher on tests, enjoy school more and are more likely to graduate from high school and attend college.

✓ Children with involved parents are more likely to have better social skills, show improved behavior and succeed in school.

Confidentiality Policy

Livingston ESA Early Childhood staff and volunteers are expected to maintain confidentiality at all times. Head Start Performance Standards, Section 1302.21 applicable confidentiality provisions and the Livingston Educational Service Agency Procedures and Policies, Section D, 1-5(b) Access to Records. The unauthorized release of confidential information may result in disqualifying you from spending time in the classroom. (Head Start Performance Standards Section 1303 Livingston ESA Board Policy). When volunteering, you agree to maintain confidentiality by never divulging any information or records concerning any of the children or families without proper written authorization.
PARENTS AS DECISION-MAKING PARTNERS

There are many ways to be involved in your child’s education while enrolled in our preschool programs, such as becoming a member of a committee. These committees are important components of our program and by being a member, parents can help in our decision-making process as we work toward continual improvement. On the following pages you will find contact information for each committee and a brief description of the purpose of the committee:

Center Parent Committee

Each center (or school) has a Center Parent Committee and every family is encouraged and welcome to attend Center Parent Committee meetings. This committee meets at least four times per year to plan events for families and children, talk about center issues and hear reports from the Center’s Policy Council/Parent Advisory Committee representatives. Each classroom should have at least one parent representative at the Center Parent Committee meetings. Contact your Lead Teacher or Family Advocate for more information about how to join.
Policy Council
Candice Davies, Director, Early Childhood Programs

Policy Council Committee is the advisory and decision making body for Livingston ESA Early Childhood Head Start Programs, similar to Parent Teacher Organizations in public school. Each center should have at least one parent represented on the Policy Council. The majority (51%) of the representatives are parents of currently enrolled children.

Meetings are generally held every other month beginning in October. During the October meeting the new Policy Council will set the schedule for the rest of the year.

• Held at Livingston ESA Education Center in Howell, parents are reimbursed for mileage
• Free childcare is provided at each meeting

Responsibilities of members include, but are not limited to:

• Approval of grant applications
• Review and acceptance of quarterly budgets
• Approval of recommendations for staffing of programs
• Approval of service plans
• Participating in annual self-assessment and data analysis
• Planning for staff recognition
• Assisting with recruitment of children
• Approval of program options

School Readiness Advisory Committee/Curriculum Committee
Sean LaRosa, Assistant Superintendent for Early and Elementary Learning

This committee is a work group of the Great Start Collaborative. Members include Great Start Collaborative staff, Livingston ESA teachers and administrators, parents whose children attend our programs, personnel from local schools and other community members. The committee provides an opportunity for members to meet, share information and offer guidance related to school readiness in our county. Meetings are held the second Thursday of the month at the Livingston ESA facilities in Howell.

Health & Family Services Advisory Committee
Patricia Jansen, Health Coordinator and Jennifer Lange, Mental Health Coordinator

The Health & Family Services Advisory Committee is a part of the Great Start Pediatric Health Committee. This committee includes parents, community members and early childhood staff whose task is to advise in the planning, operation and evaluation of health and family services within the Livingston ESA Early Childhood Programs and children through age 8 throughout Livingston County. The group meets to provide input in the development of health and family services policies and procedures. It assists families to find continuous and accessible health care and other family support services.

Meetings are held the second Wednesday of each month 10 a.m.–11:30 a.m. at the Livingston County Health Department. Mileage reimbursement and childcare are provided. The following meetings will focus on Livingston ESA Early Childhood Programs health and family service needs, although issues are discussed monthly:

October 14, 2020; January 13, 2021; March 10, 2021; May 12, 2021
Great Start Livingston
Kindergarten Readiness Indicators

**Perceptual, Motor and Physical Development**
Developing age appropriate fine motor skills (ex. developing the ability to work with pencils and scissors).
Growing in hand-eye coordination in building with blocks, putting together puzzles, reproducing shapes and patterns, stringing beads and using scissors.
Demonstrating a growing independence in self-care when eating, dressing, washing hands and toileting (ex. able to put on coat and zip it).

**Social and Emotional Development**
Often or very often exhibits positive social behaviors when interacting with others.
Developing ability to self-regulate and manage strong feelings.
Able to follow simple rules and routines and manage transitions.
Displaying a growing awareness of where his/her body is in relation to others and the consequences of his/her movements and actions.

**Approaches to Learning**
Approaching tasks with initiative and curiosity (or is willing and eager to try new things).
Displaying a growing capacity to maintain concentration and attention.
Developing ability to transition from one task to another.
Developing an ability to follow directions for individual, small- and large-group activities.

**Language and Literacy**
Showing progress in expressing feelings, needs and opinions in a range of situations including conflicts with others.
Using expanded vocabulary and language for a variety of purposes.
Progressing in abilities to initiate and respond appropriately in conversations and discussions with peers and adults.

**Cognition**
Beginning to understand the relationship between numbers, letters, sounds and words.
Experimenting with a variety of writing tools and materials, such as crayons, pencils and computers.
Developing a growing understanding of the different functions of forms of print such as books, signs, letters, newspapers, lists, messages and menus.

Developed by the Kindergarten Readiness Ad Hoc Committee (Great Start Collaborative – Livingston) August, 2009.
## Livingston ESA Early Childhood Programs

### FREQUENTLY USED NUMBERS

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Contact Information</th>
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| Sean LaRosa       | Assistant Superintendent for Early and Elementary Learning | 517.540.6886  
|                   |                                               | seanlarosa@livingstonesa.org         |
| Candice Davies    | Director, Early Childhood Programs           | 517.540.6840  
|                   |                                               | candicedavies@livingstonesa.org      |
| Amy Manosky       | Executive Assistant to the Director          | 517.540.6827  
|                   |                                               | amymanosky@livingstonesa.org         |
| Teresa Grostic    | Family Services and Enrollment               | 517.540.6847  
|                   |                                               | teresagrostic@livingstonesa.org      |
| Lisa Pecorilli-Eoll | Early Childhood Specialist                   | 517.540.6844  
|                   |                                               | lisapecorilli@livingstonesa.org      |
| Kristen Kostielney | Early Childhood Specialist                   | 517.540.6852  
|                   |                                               | kristenkostielney@livingstonesa.org  |
| Nancy Rennie      | Associate Teacher Coach Trainer              | 517.540.6767  
|                   |                                               | nancyrennie@livingstonesa.org        |
| Patricia Jansen   | Health Coordinator                           | 517.540.6845  
|                   |                                               | patriciajansen@livingstonesa.org     |
| Jennifer Lange    | Mental Health and Disabilities Coordinator   | 517.540.6843  
|                   |                                               | jenniferlange@livingstonesa.org      |
| Dotty Lang        | Health Support Specialist                    | 517.540.6841  
|                   |                                               | dottylang@livingstonesa.org         |
| Tracey Pacza      | ERSEA Support Specialist                     | 517.540.6855  
|                   |                                               | traceypacza@livingstonesa.org       |
| Lori Gnegy        | Social Emotional Support Specialist          | 517.540.6824  
|                   |                                               | lorignegy@livingstonesa.org         |
| Rebecca Combs     | Social Emotional Support Specialist          | 517.540.6828  
|                   |                                               | rebeccacombs@livingstonesa.org      |

To Reach: General Information, report attendance after 9:00 a.m. or to set up an enrollment appointment call **517-548-2100**

Call the classroom for attendance calls before 9 a.m.
EMERGENCY NUMBERS

Ambulance  911
County Sheriff  911
Fire Department  911
State Police  911
State Police non-emergency  810.227.1051
Federal Bureau of Investigation  313.965.2323  www.fbi.gov
Poison Control  800.222.1222  www.poison.org

COMMUNITY AGENCIES

211
Health, human and community service resource information is available to all community residents, faith based organizations, libraries, governmental agencies and local businesses at 2-1-1, 24 hours a day, seven days a week. Call Specialists assist callers using sophisticated software containing up-to-date data on services in the community and surrounding area. The primary goal is to connect residents with available service(s) with one call. Not only are callers able to better access basic needs such as food, shelter and clothing, but information is also available on accessing support groups, recycling, county services, public health service and much more.

Contact: www.Centralmichigan211.org for more information.

ARC  517.546.1228
Advocacy agency serving persons with developmental disabilities
www.arclivingston.org

CHILD CONNECT FOR FAMILY SUCCESS  517.548.9112
Child care information for parents, providers and employers
www.childconnectmi.org

CHILDREN’S SPECIAL HEALTH CARE SERVICES  517.552.6823
Public Health program that provides help to children who qualify.
www.livgov.com/health/ph/Pages/childhealthcare.aspx

COMMUNITY MENTAL HEALTH (CMH)  517.546.4126 | 800.615.1245
Mental health counseling and services for families www.cmhliv.org

DEPARTMENT OF HUMAN SERVICES (DHS)  517.548.0200

GLEANERS COMMUNITY FOOD BANK OF LIVINGSTON  800.552.4483
www.fbcmich.org

HOUSE AND CHOICE VOUCHER PROGRAM  517.548.9611

LACASA & Family Resource Center  517.548.1350 | Crisis Line 866.522.2725
lacasacenter.org
LOCAL SCHOOL DISTRICTS

BRIGHTON AREA SCHOOLS 810.299.4000 | bas.k12.mi.us

FOWLERVILLE COMMUNITY SCHOOLS 517.223.6000 | FowlervilleSchools.org

HARTLAND CONSOLIDATED SCHOOLS 810.626.2100 | www.hartlandschools.us

HOWELL PUBLIC SCHOOLS 517.548.6200 | www.howellschools.com

PINCKNEY COMMUNITY SCHOOLS 810.225.3900 | www.PinckneyPirates.org

Annual Notification: Pesticides

The Great Start Pesticide Control Act 171, regulation 637, requires that we inform you that pesticides are occasionally applied. You will be informed prior to any pesticide/herbicide application made to the building and/or grounds. We are required to give two notices prior to any application. You will be notified by a posting on your classroom door, email, and/or district newsletter depending on the which district your classroom resides. The notice...
will contain information about the pesticide, including the target pest or purpose, approximate location, date of the application, contact information at the center, and a toll-free number for a national pesticide information center recognized by the Michigan department of agriculture. In certain emergencies, pesticides may be applied without prior notice.

Livingston ESA Early Childhood Grievance Procedures

It is expected that differences, complaints or disagreements will be settled between the involved parties first. If no resolution is reached, issues may be taken up as follows:

Nothing contained herein will be construed to limit the right of any parent or community member having a complaint to discuss the complaint informally with the individual causing the complaint, and to have the complaint addressed without the intervention of the Administrator and Policy Council.

If the parent or the community member is not able to satisfactorily resolve the complaint, he or she shall first discuss the complaint with the Director of Early Childhood Programs within 10 days of the event causing the complaint. The Director of Early Childhood Programs shall respond in writing within 10 working days of the discussion.

If the parent or community member is not satisfied with the response, they may submit a formal written complaint within 10 working days to the Director of Early Childhood Programs. The director shall respond in writing within 10 working days of the receipt of the formal written complaint.

If the parent or community member is still not satisfied with the response, they may submit the formal written complaint within 10 working days to the chairperson of the Policy Council in care of the Livingston Educational Service Agency. The Policy Council will respond in writing within 10 working days following their next scheduled Policy Council meeting.

If the parent or community member is still not satisfied with the response, they may submit the formal written complaint within 10 working days to the Executive Director of Early Childhood Programs at the Livingston Educational Service Agency. The Executive Director of Early Childhood Programs (Livingston ESA Superintendent) will respond in writing within 15 working days following receipt of the complaint. The decision of the Executive Director of Early Childhood is final.

Child Abuse and Neglect Policy/Mandated Reporting

We strongly believe that children should grow up in a community where adults care about them and keep them safe. Providing this safe community takes the determination and commitment on the part of everyone involved in your child’s life. All employees and volunteers (including minors) of a child care centers are mandated reporters. Under the Child Protection Law, center employees and volunteers must contact Children’s Protective Services (CPS) immediately when they suspect child abuse and/or neglect. The immediate verbal report must be made to Centralized Intake by calling (855) 444-3911. The verbal report must be followed by a written report. The written report must be submitted within 72 hours. DHHS encourages the use of the Report of Suspected or Actual Child Abuse or Neglect (DHS-3200) form which includes all the information required by the law. The written report may be faxed to (616) 977-1154 or (616) 977-1158 or emailed to DHS-CPS-CiGroup@michigan.gov. Reporting the situation to administration or other staff person does not relieve the center employee or volunteer of their mandated responsibility to report to CPS.