



Family Handbook

Important Information

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The Hand in Hand Family Handbook has been prepared by Hand in Hand to provide families with general information about the various policies and programs that affect their care. This handbook is not intended to be a legal statement or a comprehensive explanation of our policies and practices. Its sole function is to give families a general understanding of how Hand in Hand views the family-care provider relationship and approaches programming.

The policies and programs outlined in this handbook are those presently in effect but may change from time-to-time. Although we will periodically update this handbook to keep families informed of changes, we may implement changes immediately.

Additional details about specific policies can be accessed at any time with a request to the appropriate Program Director.

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HAND IN HAND HISTORY AND PURPOSE

Hand in Hand is a non-profit organization that provides inclusive programming for children and adults of all abilities. We exist to expand the capabilities, confidence, and quality of life for children and adults by providing programs designed to encourage fun, learning, and social interaction in a positive environment.

MISSION STATEMENT

Our mission is to provide fun, inclusive learning, and recreational opportunities for people of all abilities, including those with disabilities.

HAND IN HAND CORE VALUES STATEMENT

Commitment: We passionately serve individuals of all abilities and their families.

Empowerment: We encourage individuals of all abilities to live without limits.

Caring: We foster relationships based on respect and value for all individuals.

Fun: We enrich the lives of our participants through fun inclusive activities.

Resourcefulness: We steward our resources toward innovative programs & creative events.

Inclusion: We believe that individuals with disabilities have the right to be included in learning and social activities with their peers and siblings.

VISION STATEMENT

People across the community embracing inclusion

OUR PHILOSOPHY

At Hand in Hand, we encourage discovery, creativity, development, and exploration in a safe, secure, relationship-based environment. We believe that children and adults should be allowed to gain confidence as they experience success, regardless of ability. To meet this objective, we stimulate each child/adult to think, reason, and problem solve. We strive to strengthen each child's identity while instilling a respect and appreciation for others.

HOW IT BEGAN

In 2000, Mark and Vinnie Smith and Dave and Joanie Steil, two sets of parents from the Quad Cities, agreed that they wanted their children with disabilities to have the same opportunities for fun and learning as their typically developing peers. They decided to start by offering a one-week summer camp for children with disabilities, where they could enjoy a full camp experience.

The first year of Camp Hand in Hand was so successful, our co-founders knew they had created something really special for our participants. This special program is still going strong today.

OUR FACILITY

Hand in Hand's center is in Bettendorf Iowa and is named to honor the memory of Tessa Steil, who passed away in May of 1999. Hand in Hand is licensed by the State of Iowa and adheres to all policies and regulations of the State of Iowa. Additionally, Hand in Hand participates in Iowa's Quality Rating System with the highest rating possible, 5 stars. We are also certified provider of Home and Community Based waiver services and accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

HAND IN HAND PROGRAMS

Inclusive Child Care

Hand in Hand's inclusive childcare and preschool program is unique in the Quad Cities. Many childcare facilities can't accommodate every child's needs or adapt activities for different abilities, but that's exactly what we pride ourselves on.

We welcome children ages 6 weeks to 18 years of all abilities, including those with disabilities, and we adapt activities so each participant can have fun and learn new skills.

Recreation

Hand in Hand's evening and weekend programs are designed to give participants ages 5 to adult a chance to have fun with their friends while also giving parents/guardians and primary caregivers respite from their caregiving duties. Each activity has its own suggested target age group.

Programs range from fitness classes (such as adaptive Zumba and yoga), to a cooking and nutrition class, to adaptive sports and other social experiences.

Important outcomes from these programs include learning new skills, increasing independence and social skills, and improving self-esteem and mental health. We hope that every participant who comes to evening and weekend programs feels welcomed, encouraged, and respected.

Program examples include:

Movies & Popcorn: Friday evenings 6:00-10:00pm, ALL ages welcome!

Unwind after a long week with movies, snacks, and your friends at Hand-in-Hand. We offer two movie options each night to appeal to both older and younger participants. All movies are rated PG or PG-13.

Saturday Night Social: Saturday nights 6:00-10:00pm, 11+

Stay up late with some fun activities designed with teens in mind! Teen night is all about music, laughter, snacks, group activities, and making friendships. Let the fun begin!!

Inspiration Studio: 9:30-11:30am, ALL ages welcome!

This art class is led by local professionals, encourages participants who like art to develop new skills and create unique masterpieces. Participants who are not interested in art should choose a different activity as this is solely an artistic creative class.

Crafts, Friends, & Fun: Thursday evenings 6:00-8:00pm, ALL ages welcome!

Crafts, Friends and Fun. Come and enjoy a night of fun crafts while socializing with friends.

Get Fit: Evenings 6:00-8:00pm, for ages 11+

Team up with your Hand-in-Hand buddies for some physical activity and fun! Meeting locations vary between North Family YMCA for Friday night swimming and hot tub relaxation as well as Bowlmor Lanes for Tuesday night events.

Young Adult Events: Evenings usually 6:30-8:30pm for teens and young adults 15+

These activities are designed to provide fun, age-appropriate social experiences for teens and young adults. ALL activities are community based and meeting places/activity fees will vary and be announced via email later.

Zumba: Evenings 6:00-8:00pm, ALL ages welcome!

Get your body moving and active by dancing the night away! Hand in Hand has partnered up with Bettendorf Life Fitness Center once monthly to learn new dances and enjoy fun music. A Zumba Instructor will typically be teaching at 6:45-7:45pm, before and after will be free choice in the gym of basketball, games, etc.

Adaptive Taekwondo 6:00-8:00pm, All ages welcome!

Enjoy a night of Taekwondo with our Black Belt instructor! You may also buy your very own Taekwondo outfit. We meet at Bettendorf Community Center! Snacks and Drinks provided. Come and get your kick on!

Altitude Trampoline Park! All ages welcome!

Jump and Jive at Davenport's first Trampoline Park! Get in shape without the boredom! Meet your friends in a fun, active environment. First pair of Socks free!

The calendar for programs is posted a month in advance. Participants must sign up via the application by the 15th of the month prior to the activity.

People with Purpose:

Hand in Hand's adult Dayhab program, People with Purpose, gives participants a chance to volunteer in the Quad Cities community while also working on life and work skills.

Participants volunteer at various organizations doing tasks ranging from cleaning, to working in gardens, to making sandwiches.

Any individual 18 years or older who would like to make an impact in the community and have fun with others their age would be a great fit for this program!

Summer Camp

Camp Hand in Hand was the very first program offered by Hand in Hand. Mark and Vinnie Smith and Dave and Joanie Steil wanted their children (and other children with disabilities) to have the same opportunities for fun, learning, and recreation as typically developing children. They decided a one-week summer camp for children of all abilities would be a good place to start.

Since the first camp in 2000, Camp Hand in Hand has grown into a two-week summer camp that serves 60 campers each July. Campers of all abilities are welcome and are partnered with a buddy, who provides support as needed as they enjoy all the typical camp activities: horseback riding, archery, crafts, swimming, canoeing, and fishing. We are proud of this partnership with the Scott County YMCA's Camp Abe Lincoln!

HAND IN HAND VALUES

Commitment to Diversity, Respect, and Inclusion

Hand in Hand is a non-profit organization dedicated to improving the quality of life for all individuals. We believe that because we all experience the world differently, every member of the Hand in Hand community makes a unique and positive contribution to our program.

To accomplish the mission of Hand in Hand, we believe that we must be responsive to the needs of everyone in the community who may receive services. We create and implement programs using our awareness of cultural differences and treat all clients with respect. Furthermore, we will create an organizational culture that values people of all racial and ethnic backgrounds and that is based on our organizational values of respect, integrity, and honesty. Our commitment to inclusiveness is evident in our organizational policies and procedures, as part of our strategic plan, and within our organizational goals.

To achieve these goals, we respect, value, and celebrate the unique attributes, characteristics, and perspectives that make each person who s/he is. Bringing together diverse individuals allows us to address issues facing our communities collectively and more effectively. Therefore, it is part of our mission that our employees, volunteers, board and reflect these core values.

Equity means that all have equal access to opportunities, which may require accommodations to ensure access. Equity requires recognizing past exclusion and achieving genuine inclusion. Achieving equity requires deliberately applying time, resources, and consideration to achieve this goal.

Inclusion means an environment in which all individuals are treated fairly and respectfully; are valued for their distinctive skills, experiences, and perspectives; have equal access to resources and opportunities; and can contribute fully to the organization's success. Inclusion requires intentional, ongoing effort to ensure that diverse individuals fully participate in all aspects of organizational work, including decision-making processes. It also refers to the ways that diverse participants are valued as respected members of an organization and/or community.

We recognize, respect and value the unique qualities, abilities and potential of our staff, participants and all who help create and maintain the culture of Hand in Hand.

We encourage discovery, creativity, development, and exploration in a safe, secure, relationship-based environment and embrace diversity by creating a culture of inclusion.

By welcoming people of diverse backgrounds, ethnicity, traditions, ages, attitudes, abilities, and beliefs, we strive to strengthen everyone's identity while instilling a respect and appreciation for others.

As the Quad-Cities area becomes increasingly culturally diverse, we strive to create an environment that reflects the community in which our staff and participants live.

Accessibility and Accommodation

Hand in Hand was founded with the belief that all children and adults should have access to play, friendships, fun, and learning. It is this belief that drives us to create an accessible environment so that all participants can experience success without barriers.

From our earliest beginning as a one-week summer camp for children with disabilities held at a camp that was not designed with accessibility in mind, Hand in Hand staff have adapted activities, equipment, and environments so that all who choose to can participate and belong. This attitude of accessibility makes us fierce advocates of more inclusive spaces and places that truly welcome people of all abilities.

Hand in Hand complies with all federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, sex, religious beliefs, socioeconomic status or

disability. As an inclusive program for all, we welcome people of all abilities, ages, countries of origin, races and ethnicities, spoken languages, spiritual beliefs, sexual orientation and gender identities to participate in the Hand in Hand community.

Participation in all Hand in Hand activities is voluntary, and our program opportunities are developed and adapted based on valuable feedback and suggestions from our participants and their families. Activities are additionally planned with flexibility to allow for the individual choices and preferences of our participants.

Hand in Hand strives to make our programs financially accessible to all. Thanks to generous contributions from our donors throughout the year, Hand in Hand can provide scholarships to families to assist them with out-of-pocket program costs. Hand in Hand maintains affiliations and compliance with the Iowa Medicaid Waiver and Child Care Assistance programs to provide additional sources of financial assistance and quality care for participating families. These programs are important resources for our families and our community as they allow parents/guardians to engage in competitive employment, knowing their children are being cared for in a safe, stimulating environment.

Translation and Interpretation

Hand in Hand is committed to building and supporting inclusive and well-informed family partners. This includes making reasonable efforts that policies, notifications, and information about our services are provided in a manner that is relevant and timely. This policy is designed to promote fair and equitable access to Hand in Hand information and programs.

If it is identified that a family needs language or reading assistance, Hand in Hand will make reasonable accommodations to provide translation, interpretation, or support for reading, completing, and understanding documents.

Hand in Hand is committed to using competent, trained, and culturally sensitive translators and interpreters. Hand in Hand participants and parents/guardians may use their own interpreters for information that is neither sensitive nor critical. To ensure accuracy, confidentiality, and in consideration of family dynamics, minor children (under 18) should not translate or interpret vital documents or messages for family members when possible.

HAND IN HAND STRUCTURE

Hand in Hand is a registered 501(c)3 nonprofit entity that is governed by a volunteer Board of Directors. The Board of Directors includes individuals from diverse economic, professional, and geographic backgrounds and represents many skills and points of view. To help Hand in Hand ensure it continues to provide a high-quality program with

appropriate services and supports for child/adult and young adults with disabilities, a minimum of two board members must be child/adult, past child/adult, or parent(s)/guardian(s) of current or past child/adult at Hand in Hand.

The Hand in Hand board provides continual oversight of Hand in Hand's operation including services we provide to HCBS Waiver children/adults.

ROLE OF THE PARENT

At Hand in Hand, we understand and appreciate the great trust parents/guardians are placing in us each time they drop their child/adult off. We take this trust very seriously and believe the relationship between care providers and parents/guardians is essential to the success of the children and adults in our programs.

Families are encouraged to be actively involved in their child/adult's care and are welcome to visit and observe their child/adult any time.

LICENSING, QUALITY, AND ACCREDITATION

Hand in Hand is licensed by the Iowa Department of Human Services. State licensing regulations stipulate the minimum standards for staffing, square footage, equipment, training, teacher-child/adult ratios and more.

In Iowa, the Quality Rating System (QRS) is the statewide quality system for childcare. It is a voluntary program that offers providers a way to improve the quality of care they provide. Rated programs must meet key indicators of quality in the areas of professional development, health and safety, environment, family and community partnerships, and leadership and administration. Programs are rated on a scale of Level 1-Level 5, level 5 being the highest possible quality rating. Hand in Hand has been awarded a 5-star rating.

Commission on Accreditation of Rehabilitation Facilities (CARF) is an independent, nonprofit organization focused on advancing the quality of services children and adults use to meet their needs for the best possible outcomes.

CARF provides accreditation services worldwide at the request of health and human service providers. Providers that meet CARF standards have demonstrated their commitment to being among the best available.

Additionally, all direct care staff complete finger printing and background checks. Teachers are required by licensing and accreditation to have a minimum of 20 training hours annually on early childhood topics. In addition to this annual training, all teaching staff are current on CPR/First Aid, Universal Precautions, Mandatory Reporter, Fire Extinguisher Training, Shaken Baby Syndrome, and Sudden Infant Death Syndrome Training.

PROGRAM OPERATION

LICENSED CARE PROGRAM HOURS

Licensed Care is open from 7:00 a.m. to 5:30 p.m. Monday through Friday except major holidays and occasional in-service learning days.

LICENSED CARE SCHOOL AGE PROGRAM HOURS AND REGISTRATION

Participants are informed of the times and dates school age care and activities will be provided at Hand in Hand through seasonal registration forms and monthly schedules. In addition, participants are also provided with field trip information and/or any special requirements in advance of activities so they can plan accordingly.

Participation in all Hand in Hand activities is voluntary, and activities are planned with flexibility to allow for the individual choices and preferences of participants.

Hand in Hand maintains postings of weekly after school routines and snack menus during the academic year and daily postings of activities/field trips during summer months or on school holidays. These are shared with parent(s)/guardian(s) on a public communication board in our center and are copied upon request.

If a school closes or dismisses early due to severe weather, Hand in Hand school age programs will also be closed. However, if this means extreme hardship for a family, please call the Director of Licensed Care. If staff are available, we will accommodate families if possible.

PEOPLE WITH PURPOSE PROGRAM HOURS

People with Purpose is open from 8:30 a.m. to 2:30 p.m. Monday through Friday except major holidays and occasional in-service learning days.

HOLIDAYS

Holidays typically include New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day and the day after, Christmas Eve, Christmas Day. If a holiday is celebrated on a Monday or Friday, it is observed on the previous Friday or following Monday. This list is subject to change and parents/guardians will be provided a 30-day notice before any planned closures when possible.



ENROLLMENT

INTAKE PROCESS AND FORMS

Hand in Hand programs are designed for children and adults including those who have disabilities. Many Hand in Hand participants have a diagnosed disability, however, as we are an inclusive program, this is not a pre-requisite for participation in Hand in Hand activities. A child/adult's parent(s)/guardian(s) begins the application process for Hand in Hand activities by contacting one of our Program Directors.

In compliance with The State of Iowa Licensing regulations for Child Care Centers, all children/adults must complete an enrollment packet to be updated annually or when the parent(s)/guardian(s) notifies Hand in Hand of a change or Hand in Hand becomes aware of a change. All forms in the provided enrollment packet must be on file before a child or adult can participate in programs.

As Hand in Hand is an approved HCBS Waiver provider agency, individuals who plan to allocate waiver dollars to Hand in Hand must first contact their Department of Human Services/MCO case manager and participate in a Plan of Care meeting. Participants who contract with Hand in Hand for waiver services must meet with the Director of Waiver Care & Program Development for an intake which includes signing a service agreement (contract for services to be provided), release(s) of information for the appropriate agencies/individuals, and a Client Bill of Rights and Responsibilities.

Once the application steps outlined above are completed, and the proper staffing has been arranged, a child/adult may begin Hand in Hand activities. This process can take a few days to up to 2 weeks, depending on how quickly the child/adult's family completes the application process.

Prior to starting, each participant must have on file a completed enrollment paperwork and preparation to include:

Checklist of Required Paperwork:

- Orientation Checklist and Acknowledgement
- Enrollment Information
- Emergency and Health Information
- Authorization to Exchange Information
- Healthcare Provider Information Exchange Form
- Participant Emergency Plan
- Permission to Apply Sunscreen, Lotion, Other Products
- Permission to Utilize Bounce House
- Hand in Hand Family Handbook Acknowledgment
- Photo and Security Camera Release



- Permission for Field Trips and Walks
- Child/adult Profile
- Participant Questionnaire
- Fee Agreement

Additional Paperwork Required for Licensed Care

- Iowa DHS Physical Form (utilize form appropriate for your child's age)
- Child and Adult Care Food Program Application

In addition to this paperwork Hand in Hand will also need:

- Copy of most current immunization records. *This record must include the name and address of the clinic where the immunizations were received and the name of the medical professional who administered the medication.*
- Copy of most current physical (required form included)
- Weather appropriate extra clothes
- Diapers and wipes (if necessary)
- Formula/Breastmilk (if necessary)

LICENSED CAPACITY AND PARTICIPANT:STAFF RATIOS

Hand in Hand is licensed by the state of Iowa to serve 111 children. The facility has a Preschool, Toddler, and Infant classroom as well as a School Age.

The Preschool classroom is licensed for 21 children. We maintain an 8:1 ratio and keep group sizes no larger than 20 children, reduced to 18 when there are more three-year-old children registered.

The Toddler classroom serves 10 children from ages 20 months – 3 years. Children under 24 months of ages are served at a 4:1 ratio and children over 24 months in age are served at a 6:1 ratio.

The Infant classroom is licensed for up to 15 infants. However, we serve 8 children from ages 6 weeks – 20 months, at a 4:1 ratio.

The school age program serves 30 children from 5 – 18 years old with a program capacity of 61 children. The School Age program provides a ratio of 3-5 children per one staff member.

Hand in Hand provides a lower ratio for the children/adults we serve to provide the best individualized care.

Participants who attend night and weekend recreation activities are most frequently paired in small groups of 3-4 child/adult per staff, as this ratio encourages both independence and increased peer interaction. Sometimes a child/adult's needs are better suited with a 1:1 ratio and more staff guidance and encouragement. Regardless

of the level of care a child/adult receives, he/she is encouraged to try new experiences, interact socially with peers, and participate as fully in planned activities as he/she chooses.

FULL-TIME AND PART-TIME CARE

To ensure adequate staffing and predictable enrollment, Hand in Hand will give preference to those looking for full time enrollment for childcare. However, when we can accommodate families, we will enroll for a part-time slot. Part-Time is care for 3 or fewer days a week. Full-Time is care for 5 days a week.

PRE-ENROLLMENT PHYSICAL FOR LICENSED CARE

Each child enrolled in licensed childcare, unless exempt for clinical reasons, must be given a complete examination by a licensed physician not more than 12 months prior to admission. This physical must be updated annually thereafter. In addition, Hand in Hand must have current immunization records or an immunization exemption for every individual in attendance. We ask that parent(s)/guardian(s) to bring updated immunization records upon each new set of shots.

INDIVIDUALIZED HEALTH PLAN

Children/adults with unique health or care needs will also be asked to complete an individualized health plan. This plan will address unique care needs, signs, and symptoms to monitor and emergency plans.

ADMISSION CONSIDERATIONS

Because of the vulnerability of many of Hand in Hand's children/adults, administrators must carefully consider referred individuals who have a history of violent or aggressive behavior, sexual perpetration, or conduct disorder as a primary diagnosis.

Individuals may find their needs which Hand in Hand is unable to provide are better met in another program. If this happens, appropriate services are identified and are personally contacted by a Hand in Hand administrator to refer the individual.

REFERRAL SERVICES

Hand in Hand administrators and staff network with many community agencies to provide resources and referrals to families who inquire about services and supports Hand in Hand may not provide. We use e-mail, social media, and other methods to inform our families and other community members of upcoming events and

opportunities offered by outside agencies to assist them with coordinating a variety of activity choices.

We additionally have a resource link on our website, www.handinhandqc.org and on our shared Family Fair website <https://www.qcafamillyfair.com/>, highlighting national and local organizations that may be of interest to individuals with disabilities and their families. Hand in Hand also hosts an annual Family Resource Fair, inviting many area organizations to share information about their services during this free and open to the public event.

PROGRAM REGISTRATION AND SCHEDULING

Hand in Hand strives to provide quality care in fun environments, with friendly staff and safe experiences for individuals of all abilities. Participation in all Hand in Hand activities is voluntary, and activities are planned with flexibility to allow for the individual choices and preferences of our participants. To ensure that everyone is welcomed and given the care that best meets his/her individual needs, parent(s)/guardian(s) are required to pre-register their children/adults for all Hand in Hand programs. Pre-registration allows time to schedule supervisors and caregivers for participants, prepare the materials needed, and ensure that each child/adult receives an appropriate level of care. Because these elements are essential for the provision of a quality program, Hand in Hand does not provide drop-in care, and children/adults who arrive at programs without being registered will not be allowed to participate in the activity that day.

A child/adult's caregiver staff is scheduled based on the level of care that is the least restrictive yet will provide the level of supervision and experience to best suit his/her individual care needs.

REGISTRATION FOR RECREATION PROGRAMS

To sign up for recreation programs visit <https://signup.com/go/EXCWWcS>

You will need to register for an account. Once you register, you can go to the calendar and click on any activity you would like to be signed up for. There is a description on each activity, which will also tell you if we are meeting at a different location or any other information you may need on that program. You will receive emails reminding you that you have signed up for a program a few days before the event. We recommend downloading the Sign Up app to your phone. This will tell you all the programs you are signed up for or if you forget, by pulling up the app.

Sign up must be done by the 15th of the previous month for the next month, to ensure staff are available.

PROGRAM ORIENTATION

Prior to the individual's first day of attendance, or on the first day of enrollment if necessary, families will receive an orientation which includes:

- Tour of the facility.
- Introduction to teaching staff.
- Visit with classroom teacher.
- Review of parent(s)/guardian(s) handbook.
- Discuss the expectations of the family and the needs of the child/adult.
- Review available family support resources and activities.
- Opportunity for extended visit in the program area by both parent(s)/guardian(s) and child/adult for a period to allow both to be comfortable in the new surroundings.

ADJUSTMENT/TRIAL PERIOD

During the first few weeks your child/adult will be adjusting to a new place and many new faces. We are committed to making this adjustment as easy as possible for participants and families. If a child/adult would be better served with an alternate schedule easing the child/adult into the program, the Program Director will accommodate these schedules.

If, after six weeks in the program, the child/adult is continuing to experience challenges to the new environment, the Director and caregiver may request a meeting with the parent(s)/guardian(s) to identify challenges and create a plan to support the individual's needs. If it is determined the program does not fit the needs of the child/adult, every effort will be made to identify an alternative community program to refer the family.

PROGRAM SAFETY

WEAPONS

Hand in Hand has a "Zero Tolerance" policy regarding weapons brought into the program. Anyone who uses, possesses, controls, or transfers a weapon, or any object that can reasonably be considered, or looks like a weapon, shall be asked to leave, and not return. The Director will determine expulsions for a child/adult who bring weapons on a case-by-case basis.

A "weapon" means (1) possession, use, control or transfer of any gun, rifle, shotgun, or firearm, (2) any other object if used or attempted or intended to be used to cause bodily harm, including, but not limited to knives, brass knuckles, clubs, fireworks, or (3) "look-a-likes" of any weapon as defined above. Items such as baseball bats, pipes, bottles,

locks, sticks, pencils, and pens may be considered weapons if used or attempted to be used to cause bodily harm. The Directors or designee shall notify the parent(s)/guardian(s) of the child/adult as well as the proper criminal justice or juvenile delinquency systems.

COURT ORDERS

Court orders can be an unfortunate reality in a family's life. Hand in Hand strives to be supportive to all parties during what can be a difficult process. Hand in Hand requires that the most current court order be on file.

Changes in custody, parent(s)/guardian(s) visitation and other issues would warrant a court order. All court orders will be followed. If court orders change custody arrangements, new emergency contact cards will need to be completed. If both parent(s)/guardian(s) continue to have full legal custody of a child/adult or child/adult, Hand in Hand will not restrict access or adjust information until there is a legal and valid court order to do so.

Hand in Hand staff and administrators will call the police if a parent(s)/guardian(s) with a court ordered restriction attempts contact with their child/adult either at Hand in Hand or at any off-site location, such as a community field trip or activity.

OPEN DOOR

Hand in Hand has adopted an open-door policy that welcomes parent(s)/guardian(s) and allows parent(s)/guardian(s) unlimited access to their child/adult and to the provider(s) caring for their child/adult during the center's normal business hours and whenever their child/adult are in the care of Hand in Hand staff, unless parent(s)/guardian(s) contact is prohibited by court order.

If a parent(s)/guardian(s) is prohibited from having contact with their child/adult or picking up their child/adult from care, Hand in Hand administrators must be notified, and a copy of the court order of protection or restraint must be kept in the child/adult's file. Administrators should also be updated if there are changes to the protective order which affect the contact the child/adult can have with that parent/guardian.

We welcome parent(s)/guardian(s) to visit our center often, especially during times of transition for their child/adult and are open to feedback and questions you may have regarding your child/adult care, caregivers, daily routine, or any other concerns.

SEX OFFENDERS

A sex offender who has been convicted of a sexual offense (even if the sex offender is the parent/guardian) who is required to register with the Iowa sex offender registry (Iowa code 692A) shall not be on the property of Hand in Hand without written permission of the center director except for the time reasonably necessary to transport the offenders own minor child/adult or ward to and from the center.

The Program Director is not obligated to provide written permission and must consult with the licensing consult before providing this permission. If written permission is granted it shall include the conditions under which the sex offender may be present including: the precise location in the center where the sex offender may be present, the reason for the sex offender's presence at the facility, the duration for the sex offender's presence, and a description of how the center staff will supervise the sex offender to ensure the sex offender is not left alone with a participant. This written permission must be signed and dated by the director and the sex offender and be kept on file for review by the center licensing consultant.

MEDICAL EMERGENCY

In cases of medical or dental emergencies, Hand in Hand staff will respond by providing first aid or CPR. Each classroom, the Hand in Hand vehicles, and outside play areas are equipped with a first aid kit, checked monthly for adequacy.

Employees at Hand in Hand are CPR and First Aid Certified. In cases of serious emergencies, 911/ Emergency Medical Services (EMS) will be contacted. Children requiring further medical intervention will be transported to a medical facility by first responders. The director, or classroom teacher will accompany the child/adult until parent/guardian arrives. Hand in Hand will notify parent(s)/guardian(s) as soon as it is practical after child/adult's urgent care needs have been met and will complete a full incident report detailing what occurred and what steps first aid steps were taken.

SAFETY/EMERGENCY PROCEDURES

Hand in Hand has well-defined plans for fire, weather/disaster, active shooter, bomb threats, lost child, and other criminal act according to best practices and licensing requirements. Emergency Exit Plans are posted in each room and are practiced with each regular drill.

PROGRAM CLOSURE

Hand in Hand will close and cancel activities when extreme weather or other unexpected circumstances (e.g. civil unrest) makes it too dangerous for staff and families to drive. Parents/guardians should be prepared to pick up early or stay home as needed.

All closures will be communicated with local media, on the Hand in Hand social media pages, and via email.

SECURITY CAMERAS

Hand in Hand has 24 surveillance cameras outside and inside the program and keeps all video for a minimum of 30 days. The cameras ensure the safety of the children and staff of the program. At times video footage may be saved for training or for other documentation reasons. Individuals in the video will be notified if it is utilized for this purpose.

NO-SHOE POLICY

To meet National Health and Safety Performance Standards, Hand in Hand has a shoe-free infant classroom. Infant hands and toys are always on the floor and in their mouths. Because of this, we want to ensure this floor is clean and free of disease-causing organisms and chemicals found outside.

We ask that all parent/guardians, caregivers, and participants comply with our policy and not wear shoes in the infant classroom that have been worn outside of the infant classroom.

All other program areas require shoes. However, we will accommodate individuals who struggle to wear shoes. If an individual is unable to wear shoes, their parent/guardian will be required to sign a waiver.

INTOXICATED PARENT

If a parent(s)/guardian(s) arrives to drop off or pick up a child/adult and they are determined to be intoxicated, Hand in Hand employees will respectfully request the parent(s)/guardian(s) allow an emergency contact to provide safe transportation for them and their child/adult. If a parent(s)/guardian(s) refuses, Hand in Hand employees will notify the police with information about a parent/guardian's intoxication, and vehicle information. The department of Human Services will also be contacted and provided a mandatory report.

PARENT INVOLVEMENT

PARENT COMMUNICATION

Parents are encouraged to become actively involved in programs at Hand in Hand. Parents are welcome to come visit any time, share their talents or knowledge of a specific skill, or join in on planned field trips. Hand in Hand also plans events throughout the year that are welcome to all Hand in Hand child/adult and their families.

It is important to provide continuity between a child/adult's home and child/adult care setting.

Parents, teachers, and directors have the opportunity to exchange information regarding your child/adult at least twice daily, during arrival and departure.

Infant and toddler room children will receive a daily communication sheet providing information on naps, feeding, mood and activities. Caregivers are pleased to answer any questions or help with any problems parent(s)/guardian(s) may have regarding the care of their child/adult. If there is any language barrier or a need of assistance, please contact the Director to set up consultation.

TRANSPORTATION

PARTICIPANT TRANSPORTATION

For field trips, children/adults will be transported in the Hand in Hand vehicles, rented transportation service agencies (e.g. "Tots to Teens"), or school bus unless otherwise specified. Field Trips are planned events and require parent(s)/guardian(s) permission prior to the event.

Hand in Hand's vehicles are maintained in clean, safe, and serviceable conditions, as recommended by the manufacturer, and equipped with a fully stocked first aid kit, emergency phone numbers and parent(s)/guardian(s) emergency contact information.

Passengers shall always remain seated and make use of seatbelts. No passenger shall extend any part of their body out of the vehicle while in motion, nor throw items from the vehicle. A first aid kit will be present in all vehicles. Hand in Hand will require parent(s)/guardian(s) to provide car seats for transporting children/adults in a Hand in Hand van or another designated parent(s)/guardian(s) vehicle.

The same policies that are in effect at Hand in Hand should be implemented while traveling in a vehicle. (Respectful behavior, same ratios of child/adult, etc.)

In cases of medical/ dental emergencies, Hand in Hand staff will not transport children/adults but will rely on first responders or parent(s)/guardian(s) to transport child/adult to a medical facility.

FOOD AND NUTRITION

MEALS

Hand in Hand participates in the Federal Child and Adult Food Care Program for our Licensed Care programs. All meals and snacks are prepared in Hand in Hand's kitchen by Hand in Hand employees or contracted via a commercial provider such as HyVee and are enjoyed together utilizing family-style serving.

Hand in Hand posts weekly menus inside and outside of each classroom. These menus rotate weekly to provide a healthful mix of grains, fruits, vegetables, proteins, and dairy foods.

For individuals in licensed care programs up to age 5: Breakfast is served from 8:00 AM, Snack at 10:00 AM, Lunch at 12:00 PM, and Snack at 3:00 PM.

For school age licensed care programs Hand in Hand will serve a snack at 3:00 PM (or when the child/adult arrives from school). Families are required to bring lunch for their school age child/adult.

Hand in Hand staff understand that for various reasons, parent(s)/guardian(s) prefer to send meals and snacks from home rather than eat the food provided by Hand in Hand. If caregivers choose to bring food from home, it must meet the following Child and Adult Food Program Guidelines or be supplemented by Hand in Hand:

Breakfast must have one whole grain and one fruit and be accompanied by milk.

Lunch must have one protein source, two servings of fruit or vegetables, one whole grain and milk.

Snacks must have two food sources represented. (Fruits/veggies, grain, protein, dairy).

Children enjoy celebrating their special day with their friends at Hand in Hand; food items brought to the site should be for special occasions only and be of sufficient quantity for the entire class. In compliance with licensing standards, such food items **MUST** be commercially prepared and unopened. No homemade items can be accepted according to licensing guidelines.

Due to choking hazards, children younger than four years old will not be served the following foods: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw

peas and hard pretzels; spoonful of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole. Staff will cut foods into pieces no larger than ¼-inch square for infants and ½-inch square for toddler/twos.

Children with medical conditions, food allergies or religious beliefs that require special diets are accommodated. Your physician will be required to complete a form, which can be obtained from the Program Director detailing the food to avoid and what foods to supplement.

INFANT FEEDING

Infants using bottles will be fed on demand by few and consistent caregivers. Caregivers must hold infants while feeding them. Bottles will never be propped, allowed in cribs, or allowed to be carried around by a mobile infant.

Bottles will be served at room temperature. Dry formula will be mixed per the manufactures' instructions with Infant bottled water only (no juice or cereal without a health professional's written documentation). This water is stored at room temperature.

Human milk will be labeled with the child's first and last name, dated, and stored in an individual container labeled with the child's name and date in the refrigerator until needed. Human milk will be heated to room temperature using a bottle warmer.

Prepared formula will be discarded after 24 hours and Human Milk 48 hours if unused. If not refrigerated for more than one-hour, human milk and prepared formula bottles will be discarded.

Hand in Hand staff will clean and sanitize all bottles and nipples between each use using a dishwasher. Bottles/ nipples are cleaned and sanitized between each use using a dishwasher. The bottle warmers used to warm the water will be emptied and cleaned daily and dish washed weekly.

Children will be introduced to solid foods at the request of their parent(s)/guardian(s) but never before at least four months of age. Food will be introduced one item at a time to ensure no food allergies. After 12 months of age and at the request of parent/guardians, infants will be allowed to follow Hand in Hand's meal plan which includes whole milk.

BEHAVIOR SUPPORT

DISCIPLINE AND CONFLICT RESOLUTION

We strive to positively direct child/adult's behavior by creating a supportive environment which:

- Allows expression of feelings/ emotions
- Adopts a problem-solving approach
- Gives clear expectations
- Provides active and quiet times
- Encourages choices
- Focuses on strengths
- Has age/ ability appropriate expectations
- Is aware of child/adult development
- Provides a consistent, yet flexible schedule
- Supports child/adult's play

Caregivers will help facilitate the resolution of conflicts by offering guidance that is solution focused. Hand in Hand teaches children/adults how to respect the needs of others while meeting their own needs through a problem-solving approach:

STEP FOR PROBLEM SOLVING

1. Caregiver approaches calmly to address child/adult, kneeling to their level and immediately stopping any hurtful actions
2. Caregiver addresses each child/adult's feeling using a statement to validate their emotions (i.e. "You are really mad")
3. Caregiver gathers information from the child/adult
4. Caregiver restates the problem
5. Caregiver solicits solutions from the child/adult, chooses one and ensures all involved agree with this solution
6. Caregiver assists with follow up support.

Parents will be notified about their child/adult's successes and concerns related to behavior. If a child/adult is struggling, Hand in Hand will invite the parent(s)/guardian(s) to share more about their child/adult and successful strategies they have found at home. Together Hand in Hand will work toward each child/adult's success.

Hand in Hand will notify caregivers immediately if they believe a child/adult has a significant behavior concern. If the behavior intensifies and places other children/adults at risk, Hand in Hand will meet with caregivers to discuss concerns further. If needed, Hand in Hand staff will meet with the family to discuss plans. If, after making every effort to modify a significant behavior concern, other children/adults continue to be at risk, Hand in Hand may suggest parent(s)/guardian(s) consider alternative programs as outlined in the discharge policy.

CRISIS PREVENTION POLICY

Nonviolent Crisis Intervention training equips our staff with skills, confidence, and effective framework to safely manage and prevent difficult behavior. Hand in Hand

strives to create a safe and secure environment for all within our program, to help we have designated certain staff members to be certified in the Crisis Prevention Institute (CPI) training program.

The use of holds remains contentious particularly due to the specific concerns and risks associated with such practice. As such, this resource is intended to support and promote positive practice and to ensure that physical interventions are used as part of our commitment to Care, Welfare, Safety and Security. In accordance with current legislation and guidance, the circumstances that may justify the use of holds include:

- When an individual poses a significant risk to self or others.
- When an individual causes damage to property that may result in significant risk of harm to self or others

DISCHARGE/WITHDRAW

Hand in Hand offers a wide range of activities for both children and adults. Although many children/adults remain at Hand in Hand for several years, there are circumstances, such as families moving away from the area, changes in health, or changes in family dynamics that cause a child/adult's family to re-evaluate their care needs. When this occurs, a child/adult or his/her parent/guardian(s) may contact the Director to request a voluntary discharge from the program. Requests for a voluntary discharge may also occur when a child/adult ages out of the program or makes a personal choice to no longer attend Hand in Hand activities. Hand in Hand requires a written two-week notice if a child/adult withdraws from the program.

Special arrangements for lengthy absences, such as maternity leaves, unemployment, or extended leaves of absences can be discussed with the director.

The circumstances that may lead to an involuntary discharge from Hand in Hand Programs include failure to meet health standards, failure to follow policies or payment agreements, an increase in the severity or occurrence of aggressive behavior of a child/adult toward other children/adults/staff/volunteers that puts others at significant risk for injury. Such aggressive behavior may include biting, kicking, pinching, hitting, hair pulling, or scratching or other harmful behaviors. A child/adult may also be involuntarily removed from Hand in Hand activities if he/she sexually exploits another child/adult or staff/volunteer, including any form of inappropriate touch, fondling private body parts and indecent exposure.

Hand in Hand's Behavior Policy states that when a child/adult exhibits aggressive or sexually exploitative behavior or any other behaviors that cause **emotional** or **physical harm** to another individual, or is destructive to Hand in Hand property or the property of a child/adult or staff the following steps will be followed:

- The child/adult will initially be re-directed to stop or de-escalate the behavior.

- If a behavior or pattern of behavior persists or increases in frequency or severity, a meeting will be arranged with the child/adult and his/her team (IDT) to discuss intervention strategies and decide the circumstances under which the child/adult will be allowed to participate in future Hand in Hand activities (ex. A higher staff to child/adult ratio, limited participation in certain activities).
- Any behavior that *significantly* threatens immediate harm of Hand in Hand staff or child/adult will necessitate the immediate withdrawal of the child/adult from Hand in Hand activities.

If a child/adult's care team (IDT) or the child/adult's parents and program director, decide that a child/adult will no longer be able to safely participate in Hand in Hand activities, the child/adult will be *temporarily* suspended from participation. At this time, the Hand in Hand administrators will provide the child/adult and/or his/her guardian(s) with information about other community respite providers and/or resources appropriate for the child/adult during the interim.

If a child/adult's care team (IDT) or the child/adult's parents and program director, decide it may be best if the child/adult does not resume Hand in Hand programming at that time, the child/adult and/or his/her guardian(s) will be given a written notice no less than 14 days prior to his/her discharge from the program.

Any person in disagreement with a discharge decision may appeal it through the process outlined in the Appeals and Grievances policy.

BITING

As upsetting as it is, biting is not unusual toddler behavior, especially when toddlers are in groups. Individuals bite for many reasons, most of which are related to the development of the child. When a child bites, the most effective way to get them to stop is an approach that combines observation, understanding, teaching, and environmental changes.

There are a number of reasons individuals may bite. They include:

Development

- Teething pain;
- Experimenting with the movement of their mouths as they learn to chew and swallow without choking;
- Feeling that others are too close because they don't yet have a good understanding of the space around them;
- Their developing autonomy – feeling a sense of independence and power; and
- Struggling to be understood as they learn to talk.

Expressing Feelings

- Feeling frustrated or angry;
- Anxious or tense about situations they don't understand; and
- Excited, even for happy reasons.

Environment

- Overstimulation and overcrowding;
- Inappropriate expectations, such as having to wait; and
- A schedule that doesn't meet their needs.

Responses to both the child who bit and the child/adult who was bitten are required.

The child/adult who was bitten needs:

- Comfort and care;
- Reassurance and recognition;
- Advice and support;
- First Aid techniques administered washing the area and applying a bandage if necessary, as well as applying a cold pack;
- An incident report; and
- Confidentiality.

The child who bites needs:

- A clear message of disapproval;
- An understanding how his or her biting affected the other child/adult;
- Advice about what the child/adult should do instead of biting ;
- Redirection or a resulting action that relates to the reason for the bite;
- Adults to look at the situation and environment;
- First Aid techniques administered including rinsing the mouth out with water due to possible blood/bodily fluids being transferred;
- An incident report; and
- Confidentiality.

If a child is biting chronically, and attempts to adapt the environment, schedule and the use of reminders do not help to curb the behavior, parent(s)/guardian(s) may be asked to meet with care givers and the director to address possible solutions or more effective interventions. It is not Hand in Hand's policy to discharge a child who bites chronically.

While biting is a normal toddler behavior, with proper interventions, most kids stop biting after a few days or weeks.

TOILET TRAINING

It is not required that a child/adult is toilet trained to attend any Hand in Hand program.

A consistent toileting routine at school and at home is essential for successful potty training. Parents and care givers must keep communication open and work together during this important developmental step in any child/adult's life.

Children are ready for toilet teaching when they exhibit the following signs:

1. Can sit and walk easily
2. Can remove and pull-on loose-fitting pants and underwear
3. Can understand and follow simple instructions
4. Remains dry for several hours at a time
5. Is aware when s/he has eliminated

Once the child is ready to begin toilet teaching, the following will occur:

1. The teaching team and family agrees the child/adult is developmentally ready
2. The child is dressed appropriately (sweatpants, elastic waist pants or shorts – avoid one-piece outfits, bib overalls, belts, and snap/button jeans)
3. Everyone involved is consistent
4. The child receives praise in the form of hugs, smiles, etc. instead of “bribes” such as food or stickers
5. The child receives positive attention, and everyone understands that accidents will happen and minimize the focus on accidents

Upon beginning toilet teaching, the adults must consistently assist the child in the bathroom by removing/replacing diapers and clothing and helping with the child's hygiene. Parents will be asked to bring extra changes of clothes during this time.

HEALTH

ILLNESS

As a center-based program, with communal space and resources, Hand in Hand realizes that monitoring children/adults for illness allows them to respond quickly to child/adult needs and reduces the spread of communicable illnesses among Hand in Hand children/adults, staff and volunteers.

Hand in Hand does not provide sick care. Hand in Hand policy requires a child/adult's parent/guardian, or primary caregiver to notify caregiver staff of any injuries or illnesses that have occurred prior to care provision. Participants should not enter the center with

any unidentifiable symptoms. All parent(s)/guardian(s) will be notified when a contagious illness is circulating among the child/adult. Any contagious conditions confirmed by child/adult, staff, or volunteer's physician will be posted to inform our participants, their parent(s)/guardian(s) and staff. The identity of the contagious person will always be kept confidential in these postings. Additionally, the Iowa Department of Health will be notified by the Program Director.

If a child/adult is excluded from care, he or she may return when he or she: 1) is fever free without fever reducing medication for 24 hours **and** 2) is not displaying any signs of vomiting or diarrhea for 24 hours unless otherwise noted in policy.

Daily, staff will evaluate all participants upon arrival for early detection of signs of illness or unusual behavior. Caregiver staff are also required to observe children/adults on an ongoing basis for changes in appearance or behavior which may indicate he/she is not feeling well.

When a child/adult becomes ill but does not require immediate medical help, a determination will be made regarding whether the child/adult should be sent home. Most illnesses do not require exclusion but, the Program Director will determine if the illness:

1. Prevents the child/adult from participating comfortably in activities.
2. Results in a need for care that is greater than the staff can provide without compromising the health and safety of other participants.
3. Poses a risk of spread of harmful diseases to others.

The following conditions/symptoms **do not** require exclusion unless it is determined they meet one of the above considerations:

- **Common colds**, runny noses (regardless of color or consistency of nasal discharge).
- **Bed bugs**: child/adult will not be excluded if a bed bug is found on them or in their belongings.
- **Fifth disease**: child/adult will not be excluded unless the child/adult meets other exclusion criteria such as a fever.
- **Hand Foot and Mouth**: child/adult will not be excluded unless child/adult meets other exclusion criteria such as fever. Child/adult will be excluded if they are drooling with mouth sores, even without a fever.
- **Otitis Media** (ear infection): child/adult will not be excluded unless they meet other exclusion criteria.
- **Thrush (Candidiasis)**: child/adult will not be excluded unless child/adult meets other exclusion criteria.
- **A cough** not associated with fever, rapid or difficult breathing, wheezing or cyanosis (blueness of skin or mucous membranes).

- **Pinkeye** (bacterial conjunctivitis) indicated by pink or red conjunctiva with white or yellow eye mucus drainage and matted eyelids after sleep. This may be thought of as a cold in the eye.
- **Watery, yellow or white discharge or crusting eye** discharge without fever, eye pain, or eyelid redness.
- **Yellow or white eye drainage** that is not associated with pink or red conjunctiva.
- **Rash** without fever and behavioral changes.
- **Molluscum contagiosum** (does not require covering of lesions).
- **Shingles**, child/adult will not be excluded if sores are covered.
- **Thrush**.
- **Fifth disease** (slapped cheek disease, parvovirus B19) child/adult will not be excluded once rash has appeared.
- **Methicillin-resistant Staphylococcus aureu, or MRSA** without an infection or illness that would otherwise require exclusion. Those known as MRSA carriers or colonized individuals should not be excluded. Child/adult may return with covered wound as long as the wound is covered and does not ooze or escape the covering.
- **Cytomegalovirus infection**.
- **Chronic hepatitis B infection**.
- **Human immunodeficiency virus (HIV) infection**.

Children with chronic infectious conditions that can be accommodated will not be excluded from the program according to legal requirement of federal law in the Americans with Disabilities Act. The act requires that child/adult care programs make reasonable accommodations for child/adult with disabilities and/or chronic illnesses, considering each child/adult individually.

Conditions/Symptoms that **do not** require immediate exclusion, but treatment **must** be started before returning to care:

- **Impetigo** lesions should be covered, but treatment may be delayed until the end of the day. Child/adult can return after being seen by the doctor, treatment has started, and blisters are covered.
- **Lice or nits** treatment may be delayed until the end of the day. Individual may return the next day after treatment is started.
- **Ringworm** treatment may be delayed until the end of the day. Child/adult may return to the program the day after treatment begins as prescribed by the child/adult's physician if the lesions are kept covered, or 48 hours after treatment begins.
- **Scabies** treatment may be delayed until the end of the day. Individual may return after treatment has been given.

For the health and safety of all participants, a child/adult will either need to be picked up **immediately (within one hour)** or kept at home if they exhibit any of the following symptoms:

- The illness **prevents the child/adult from participating comfortably in activities**. Individual must remain home for at least 24 hours **and** symptoms improve.
- The illness results in a **need for care that is greater than the staff** can provide without compromising the health and safety of another child/adult. Individual must remain home for at least 24 hours **and** symptoms improve.
- An **acute change in behavior** - this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash. Individual must remain home for at least 24 hours **and** symptoms improve.
- **Displaying other symptoms of a contagious disease**. Individual must remain home for at least 24 hours **and** symptoms improve.
- **Fever –**
 - Infants under 2 months: above 100.4°F taken by any method. with or without a behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea) requires exclusion and immediate medical attention.
 - Infants – adults ages 2 months+: temperature above 101°F taken by any method with a behavior change.
- **Blood or mucus in the stools** not explained by dietary change, medication, or hard stools.
- **Diarrhea** (a watery stool that is not associated with changes in diet). In diapered children/adults, this is a stool that is not contained in the diaper. For toilet-trained children/adults, if the child/adult is unable to make it to the toilet and soils clothing. Diapered children/adults with diarrhea should be excluded if the stool frequency exceeds two stools above normal for that child/adult during the time in the program day, because this may cause excess work for the caregivers/teachers, or those whose stool contains blood or mucus. Readmission after diarrhea can occur when diapered child/adult have their stool contained by the diaper (even if the stools remain loose). Upon a child/adult's return to Hand in Hand after being sent home with loose stools, the child/adult will be sent home if they have one episode of loose stools or vomiting.
- **Abdominal pain** that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness.
- **Mouth sores** with drooling unless the child/adult's primary care provider or local health department authority states that the child/adult is noninfectious.
- **Rash with fever or behavioral changes**, until the primary care provider has determined that the illness is not an infectious disease.
- **Vomiting**, if it is more than 2 times in 24 hours, unless it is determined to be caused by a non-infectious condition and the child/adult remains hydrated. Upon

a child/ adult's return to Hand in Hand after being sent home with vomiting, the child/adult will be sent home if they have one episode of vomiting.

For the health and safety of all participants, a child/adult will either need to be picked up **immediately (within one hour)** or kept at home if they have any of the following illnesses:

- **Chickenpox (varicella):** Individual may return when all lesions have dried or crusted (usually six days after onset of rash).
- **Coronavirus (COVID-19):** We will follow the current guidelines recommended by the Center for Disease and Control (CDC) for exclusion time. Most recent updates will be available through the Program Director. Please visit www.cdc.gov for most recent information.
- **E.Coli, Shigella, Giardia, Campylobacter Infections:** Individual may return when stools are be formed and test results of two stool cultures obtained from stools produced twenty-four hours apart are negative for these organisms.
- **Hepatitis A Viral Infection:** Individual is excluded from programming until one week after onset of illness or jaundice if the child's symptoms are mild or as directed by the health department. Note: immunization status of childcare contacts should be confirmed; within a fourteen-day period of exposure, incompletely immunized or unimmunized contacts from one through forty years of age should receive the hepatitis A vaccine as post exposure prophylaxis, unless contraindicated.
- **Hib Disease (haemophilus influenza):** Individual may return to the program with approval from their physician as long as mouth sores do not cause excessive drooling or fingers/hands to be in the mouth.
- **Influenza A or B:** Individual may return after they are fever free without fever reducing medication for 24 hours and resolution of other exclusion criteria.
- **Measles:** Individual may return four days after onset of rash.
- **Meningitis (Viral or Bacterial):** Individual with bacterial meningitis may return after 24 hours of antibiotics and written permission from their physician. Child/adult with viral meningitis may return when feeling better and physician's written permission.
- **Mumps:** Individual may return five days after onset of parotid gland swelling
- **Pertussis:** Individual may return after five days of appropriate antibiotic treatment
- **Pinworms:** Individual may return to the program the day after treatment begins as prescribed by their physician.
- **Pneumonia:** Individual may return with written permission of the physician and be fever free without fever reducing medication for 24 hours prior to returning.
- **Roseola:** Individual may return to the program when fever free without fever reducing medication for 24 hours.
- **Rotavirus:** Individual may return to the program when he/she is fever free without fever reducing medication and diarrhea free for 24 hours.

- **Respiratory Syncytial Virus (RSV):** Individual may return once symptoms have resolved and meets other exclusion criteria.
- **Rubella:** Individual may return six days after the rash appears
- **Salmonella Serotype Typhi Infection:** in children younger than five years of age they may return when they receive three negative stool cultures obtained with 24-hour intervals; children/adults five years of age or older may return after a 24-hour period without a diarrheal stool.
- **Streptococcal pharyngitis** (strep throat or other streptococcal infection): Individual may return twenty-four hours after treatment has been started.

Parents/guardians will be notified when a new symptom occurs, even if the child/adult doesn't meet exclusion criteria. Some symptoms won't require a doctor's visit before returning. Each child/adult should be evaluated individually to see if they meet criteria to be sent home.

RETURNING FROM SURGERY

If a child/adult has a surgery, we request a doctor's note indicating readiness to rejoin the program to ensure their immune system is ready for group care.

TOBACCO AND DRUG FREE PROGRAMS

Hand in Hand is a drug and tobacco free program. The use of any tobacco or vaping products, alcohol or drugs is strictly prohibited on the premises.

STORAGE AND PROVISION OF MEDICATION

A child/adult or their guardian must give medication directly to a Hand in Hand administrator or supervisor and it will be stored inside of a locked cabinet inaccessible to child/adult. Keys to the medication cabinet will be kept in the main office at all times.

Prescription medication must be prescribed by a physician and be in its original labeled container. The label must have the child/adult's name, the name of the medication, the prescribing physician, name of pharmacist, date the prescription was filled, prescription number, instructions for use, dosage, strength, and duration.

Over the Counter Medication must also be in its original container labeled with the child/adult's name. A medication sheet must also accompany OTC medications. This medication sheet indicates the name of the medication, correct dosage, and times for administration.

A *Medication Sheet*, completed by a parent/guardian, must accompany all medication. This form provides information regarding the name of the medication, the time(s) and

date(s) the medication must be dispensed, and the dosage and route of administration. Each time a medication is administered, the staff who gave the dose will document the date and time it was given and his/her name on the medication form as well as in the child/adult's documentation for that shift. A medication form must be completed monthly for any medications given daily or over an extended period.

For those who can self-administer medications, support staff will assist by providing verbal reminders if necessary and note this in the child/adult's documentation. As most of Hand in Hand's child/adult are minors or have nominated guardians, parent(s)/guardian(s) will be responsible for assessing an individual's cognitive and/or physical ability to self-administer medications.

Supervisory staff who administer medication to children/adults attend yearly medication dispensation training. Only staff who have received such training are authorized to give medications to child/adult at Hand in Hand. By limiting medication administrators, Hand in Hand reduces the incidence of possible medication errors.

Medications for which there is no current medication consent form on file will not be administered to a child/adult. Any expired or unused medications will be removed from the medication storage cabinet and child/adult will be contacted to take this medication home or consent to its disposal. This includes daily use medications as well as PRN medications such as Epi Pens and albuterol inhalers.

It is a person's right to choose not to follow their physician's orders, including the choice to refrain from taking prescribed medications, as well as the accept responsibility for the consequences of not doing so.

HAND WASHING

To reduce the incidence of illness, Hand in Hand requires hand washing of all child/adult, visitors, and teachers at the following times:

Hand in Hand Staff and Volunteers must wash hands:

- Upon arrival
- Upon entering the classroom
- Before and after eating, preparing, or serving food or before preparing or feeding an infant a bottle
- After Diapering/ Use of Bathroom
- After outside play
- Before and after messy or water play.
- Before and after activities involving cooking, food tasting, clay or play doh.
- Before and after giving medication or applying topical creams.
- Handling bodily fluid (including mucus, nasal drainage, blood, urine, vomit)

- After using a tissue to wipe noses, eyes or mouths.
- After handling garbage.

Participants must wash hands:

- Upon arrival (we ask parent(s)/guardian(s) to help with this as part of their drop off procedure)
- Upon entering the classroom
- Before and after eating
- After Diapering/ Use of Bathroom
- After outside play
- Before and After messy or water play
- Before and after activities involving cooking, food tasting, and clay or play doh
- After using a tissue to wipe noses, eyes or mouths
- Handling garbage

We use the following hand washing procedure:

1. Wet hands with water between 60-120 degrees
2. Add soap to wet hands
3. Scrub hands vigorously for at least 20 seconds, making sure to pay attention to areas between fingers, under nails, back of hands and under rings
4. Rinse hands of soap until free of soap and dirt
5. Dry with paper towel
6. Use paper towel to turn off faucet
7. Throw paper towel in hand's free garbage

INCIDENT REPORTING

INCIDENT REPORTING

Incidents involving a Hand in Hand child/adult, including minor injuries, minor changes in health status, or behavioral concerns will be documented in a written report prepared by the staff member(s) who observed the incident. Each report will include the child/adult's name, the date and time the incident occurred, a thorough description of the incident including the action the child/adult's support staff and other staff took in response to the incident or injury and any follow-up steps taken to resolve the incident. A brief note stating that an incident report was written and filed will also be included in the child/adult's service documentation for the shift during which the incident occurred if applicable.

ABUSE AND PREVENTION RESPONSE

Types of abuse

1. Physical abuse is injury that is intentionally inflicted upon a child/adult.
2. Sexual abuse is any contact of a sexual nature that occurs a child and adult or an adult and a dependent adult. This includes any activity which is meant to arouse or gratify the sexual desires of the adult or the other child/adult.
3. Emotional abuse is mental or emotional injury to a child/adult that results in an observable and material impairment in the child/adult's growth, development, or psychological functioning.
4. Neglect is the failure to provide for a child/adult's basic needs or the failure to protect a child/adult from harm.

Hand in Hand has **zero tolerance** for abuse and will not tolerate the mistreatment or abuse of children/adults in its programs. Any mistreatment or abuse by an employee or volunteer will result in disciplinary action, up to and including termination of employment or volunteer service and cooperation with law enforcement.

Hand in Hand has **zero tolerance** for abuse, mistreatment, or sexual activity among children/adults within the organization. We are committed to providing all children and adults with a safe environment and will not tolerate the mistreatment or abuse of one child/adult by another child/adult. Conduct by children/adults that rises to the level of abuse, mistreatment, or sexual activity will result in intervention or disciplinary action, up to and including, dismissal from the program.

In addition, our organization will not tolerate any behavior that is classified under the definition of bullying, and to the extent that such actions are disruptive, the organization will take the necessary steps to eliminate such behavior.

Physical Contact

Hand in Hand promotes a positive, nurturing environment while protecting participants, employees, and volunteers. We encourage appropriate physical contact with participants and prohibit inappropriate displays of physical contact. Any inappropriate physical contact by employees or volunteers towards any child/adult in Hand in Hand programs will result in disciplinary action, up to and including termination of employment.

Examples of appropriate physical interactions: handshake, high five, pats on the back

Examples of inappropriate physical interactions: Kisses, showing affection in isolated areas, wrestling, tickling, any type of massage outside of accepted and documented medical treatment.

Verbal Interactions

Employees and volunteers are prohibited from speaking to a child/adult in a way that is, or could be construed by any observer, as harsh, coercive, threatening, intimidating, shaming, derogatory, demeaning, or humiliating.

Examples of appropriate verbal interaction: positive reinforcement, lighthearted jokes not at the expense of any individual, encouragement, praise

Examples of inappropriate verbal interaction: cursing, secrets, name-calling, belittling, shaming.

One on One Interactions

To protect all participants and staff, Hand in Hand prohibits private one-on-one interactions unless approved in advance by the organization administration.

Off-hours contact

Hand in Hand strongly encourages employees and volunteers to refrain from outside contact with children/adults with which they do not already have a familial or social relationship (i.e., child/adult are friends at school, families attend same religious institution). However, if interactions with a child/adult outside of regularly scheduled program activities are otherwise unavoidable, the employee is required to disclose these interactions with the Program Director immediately. This disclosure and any necessary plans will be documented in the employees' file.

Gift Giving

Employees and volunteers may not give gifts to individual children. They should only give gifts to groups of children/adults, and/or only under the following circumstances:

1. Program Director must be made aware of and approve the gift.
2. Parents/guardians must be notified.

Private Body Parts

By giving private body parts different names we unintentionally put children/adults at risk by not giving them the necessary language to get help and/or indicating to the child/adult that talking about their private body parts is wrong or shameful.

Hand in Hand will not allow the use to "nicknames" for private body parts. Instead, we will identify those parts as "private body parts" or those parts covered by a swimsuit or their correct name.

Furthermore, Hand in Hand will teach the private body part rule, "No one may look at or touch my private body parts except to keep me clean and healthy," and the response steps should someone ask a child/adult to look at/touch private body parts or do other behaviors that make a child/adult feel uncomfortable:

1. Try to get away
2. Tell a trusted grown up

Monitoring High Risk Activities

Hand in Hand has thorough and detailed policies to protect staff, volunteers and participants during activities such as going to the bathroom, showering, or overnight events.

ABUSE REPORTING

All Hand in Hand administrators, supervisors, and direct care staff are mandatory reporters of child/dependent adult abuse and are required to complete 2 hours of approved training relating to the identification and reporting of abuse within 6 months of hire, and every five years thereafter.

Because Hand in Hand is dedicated to maintaining zero tolerance for abuse, it is imperative that every adult actively participates in the protection of children/adults. We take our role in keeping our participants safe very seriously. Parents are not allowed to approach children other than their own with the intent to discipline. Parents are also not allowed to use corporal punishment, verbal abuse and/or removal of food as punishment while on the premises.

PARTICIPANT CARE

DOCUMENTED INDIVIDUAL, PERSON-CENTERED ASSESSMENT PROCESS

Upon intake of each new Hand in Hand child/adult utilizing HCBS services, an individual and/or his/her parent(s)/guardian(s) will meet with Program Directors as well as the Director of Waiver Care & Program Development to identify the individual's abilities and strengths as well as his/her physical, emotional, and behavioral needs and the needs of the family. Since many of Hand in Hand's participants are minors, and may be unable to communicate this information, their parent/guardian often give a verbal report of their child/adult's likes, dislikes, hopes and desires on their behalf.

Parent(s)/guardian(s) are asked to complete a *School-age Assessment* and *Health Form and Participant Support Plan* which addresses the topics of health needs and abilities, personal care needs, level of adaptive behavior, level of social independence, safety awareness and self-control/behaviors/injurious behavior.



The combination of written and verbal assessments guides each person's care and is used by the Hand in Hand team to design individualized supports, which are shared with staff to guide each child/adult's care while at Hand in Hand.

A copy of everyone's *Participant Support Plan* is kept in his/her chart and updated annually. A child/adult or his/her parent(s)/guardian(s) can request that copies of the plan be shared with other team members by notifying the Director of Waiver Care & Program Development.

TRANSITION TO NEW CLASSROOMS/PROGRAMS

In the first few years of your child/adult's life there are many transitional periods. As they grow and develop, they will move to different classrooms/programs to accommodate their age and skills. Each time your child/adult transitions into a new group or room parent(s)/guardian(s) will be consulted and approve of the pending move.

Transitioning into a new classroom:

Prior to child/adult's start date:

1. Parents and child/adult tour the new classroom/program
3. Parents and child/adult meet with the child/adult's new caregivers
4. Review the daily schedule and routines of the program
5. Review the curriculum and schedule
6. Discuss the child/adult's dietary, religious, and cultural needs
7. Child/adult will gradually transition into new program by visiting for short periods over several days
8. Caregivers meets with new teacher to share assessments, likes & dislikes, and favorite toys

Prior to the child/adult's last day in their current classroom:

1. Caregivers and parent(s)/guardian(s) will prepare the child/adult for the transition by talking to them and asking what their feelings are about moving to a new classroom

On the child/adult's last day:

1. Caregivers will encourage the child/adult to say goodbye to friends in the classroom/program
2. Caregivers will say goodbye to the child/adult and share a favorite memory
3. Classroom will celebrate promotion to the next room

On the child/adult's first day:

1. Parents and child/adult learn where the child/adult's cubby and sleeping arrangements will be

INDIVIDUAL SUPPORT PLANS

Many Hand in Hand participants have an individual support plan to meet their personal goals, this is required if the individual utilizes HCBS services. An individual's Support Plan addresses his/her needs and the supports required to meet these needs. If possible, a person will participate in his/her Individual Care Plan meeting where these needs are addressed individually by the child/adult's interdisciplinary team (IDT) and shared afterward with all IDT members not in attendance.

The plan includes a written medical profile/accommodations section, detailing the medications a child/adult takes (if applicable), as well as the condition the medication treats. This portion of the plan also addresses any emergency medications the child/adult takes as well as potential emotional, environmental, or physiological factors that may trigger such a response for the individual. Lastly, any special accommodations specific to the person's disability, allergies or any other needs are highlighted in this section of the Support Plan.

The Support Plan also addresses the activities he or she attends at Hand in Hand as well as any individual supports the child/adult would need to safely navigate in the community, such as increased supervision by staff or avoidance of risk and how the child/adult may react in case of an emergency-such as a fire, tornado or getting separated from staff in a community setting. The plan also identifies steps taken by Hand in Hand staff and administrators to prevent injuries and strategies staff can use to assist the individual in emergency situations.

A child/adult's Support Plan identifies if he/she exhibits any aggressive behaviors, what may trigger aggressive behavior, strategies staff can take to de-escalate the aggressive behavior and details a crisis intervention plan to support the child/adult if his/her behavior becomes aggressive toward him/herself or others.

Finally, the Individual Support Plan outlines any personal goals members develop and wish to accomplish with the assistance of Hand in Hand or other support staff. These goals are time-limited, measurable, have incremental steps for staff to follow and are usually met through Supported Community Living (SCL) services. When goals are being designed, the team considers each individual's personal hopes and dreams for independence and then identifies the steps it will take to achieve those dreams, as well as the supports that will be required to assist the person in his/her achievement.

The process of creating and updating an individual's support plan includes input from the person for whom supports are provided, their parent/guardian, case managers from Department of Human Services/MCOs and community service providers -*including*

Hand in Hand- and the individual's supported community living staff, who are all part of a person's interdisciplinary team (IDT). This team meets annually to develop or make changes to the individual's service plan. Each service plan addresses goals, identified by an individual or by his/her parent/guardian, which will allow the child/adult to achieve greater independence. When goals are being designed, the team considers the person's personal hopes and dreams for independence and then identifies the steps it will take to achieve those dreams, as well as the supports that will be required to assist the person in his/her achievement.

Within 30 days of the IDT meeting, the Department of Human Services/MCO case manager is responsible for typing the service plan and distributing it to the child/adult, and/or his/her guardian(s) as well as all other members of the interdisciplinary team. The final draft of the service plan states each goal discussed, the supports needed by the child/adult to reach that goal, specific steps support staff can take to assist with achievement, the way progress will be measured and a reasonable time frame set for an individual's achievement of the goal.

Service plans are renewed at least annually, and goal achievement is assessed at this time. Any goals that have not been achieved are adjusted and given a longer time frame for achievement. Any goals achieved are removed from an individual's support plan or continued as a maintenance goal.

A copy of each child/adult's Individual Support Plan is kept in his/her chart for easy reference.

INTERDISCIPLINARY TEAM MEETINGS FOR HCBS PARTICIPANTS

Individual participants, their parent/guardian, case managers from Department of Human Services/MCOs and community service providers *-including Hand in Hand-* and supported community living staff are all part of an interdisciplinary team (IDT). The IDT is set up and facilitated by the individual's Department of Human Services/MCO case manager. A person's IDT can also include other important people in their life. This team meets annually to develop or make changes to an individual's Support Plan.

Within 30 days of the IDT meeting, the child/adult's case manager is responsible for typing the service plan and distributing it to the individual, and/or his/her guardian(s) as well as all other members of the interdisciplinary team.

Service plans are renewed at least annually to assess an individual's needs, supports and goal achievement. Any goals that have not been achieved are adjusted and given a longer time frame for achievement. Any goals achieved are removed from the support plan or continued as maintenance goals for the person.

INDIVIDUAL SUPPLIES FOR PARTICIPANTS

Parents are responsible for providing formula, wipes, and diapers, when needed. Parents should always supply an extra set of clothing in a child/adult's cubby/bag. If wet or dirty clothing is sent home, parent(s)/guardian(s) will be reminded to bring new clothing the next day. Per licensing requirements, Hand in Hand is not allowed to rinse out or wash soiled clothing.

Children/adults should wear clothing that is comfortable, washable, and suitable for all activities including craft activities, sitting on the floor, and outdoor play. It is recommended that participants wear supportive shoes. Cowboy boots, flop flops and dressy shoes may present a variety of safety and activity limitations that we prefer to avoid.

OUTDOOR PLAY

All participants enrolled in Hand in Hand's programs are taken outside daily allowing them the opportunity to get ample physical activity. Participants will go outside so long as the windchill is above 20 degrees and the heat index is below 90 degrees. Participants should always be dressed to go outside with coats, mittens, hats, and boots or whatever the season requires.

SUNBLOCK/SUNSCREEN

Annually, Hand in Hand will assess a fee to purchase sunblock for use during spring, summer and early fall. Parents will be required to sign a Permission to Apply Sunscreen Form annually. Parents should apply sunscreen in the morning before arriving, reducing program interruptions for application as much as possible.

BRINGING ITEMS FROM HOME

Hand in Hand strongly discourages bringing toys from home. If a child/adult brings something from home for rest, it will be placed in their cubby until naptime. This item will then be placed back in the cubby immediately after an afternoon nap. Other toys will be kept outside of the classroom.

Sometimes specific items or photos are comforting for a child/adult to hold, etc. We will accommodate these needs for each child.

Hand in Hand is not responsible for lost or broken toys brought from home.

DROP OFF/PICK UP PROCEDURES

Parent(s)/guardian(s) or adults designated by parent(s)/guardian(s) to accompany the child/adult inside the classroom and sign in the child/adult's arrival/departure time in the sign-in book located just inside the classroom. Despite a child/adult's desire to be independent, children/adults are never to be left unattended in the building. When dropping off a child/adult, parent(s)/guardian(s) should make sure the car is turned off and any additional children/adults are not left unattended.

If a child/adult is to leave with a designated adult, the parent(s)/guardian(s) must inform Hand in Hand staff of this ahead of time and ensure this person is on the official pick-up list. This person will need to show identification before a child/adult will be released. If a designated person arrives to pick up a child/adult and their name does not appear on the pick-up list, Hand in Hand will hold your child/adult until you are contacted.

Parents should arrive no later than 5 minutes before program close to pick up their child/adult and receive any information regarding the child/adult's day at Hand in Hand.

If a program is being held outside of the building (e.g. a field trip or volunteer site), and the child/adult arrives after the group has left, the parent/guardian must deliver the child/adult to the location. Hand in Hand does not have additional staff to provide care while the child/adult waits for the groups return.

Participants will not be let into the program more than 5 minutes before the program is scheduled to begin to ensure adequate staffing for the safety of the child/adult.

LATE PICK UP

It is costly for Hand in Hand to retain a child/adult in the program after closing hours. As a result, parent(s)/guardian(s) will be required to pay a fee to offset this cost. Late fees will be added to the invoice for care and are as follows:

Any time between program end + 10 minutes (5:30 pm – 5:40 pm for Licensed Care), an emergency contact will be called and parent(s)/guardian(s) will be charged \$5.00 each additional minute

After 10 minutes (5:40 for Licensed Care) parent(s)/guardian(s) will be charged \$1.00 for each additional minute.

Hand in Hand will continue to attempt to contact you and any adults designated for pick-up. If at 30 minutes after program closure (6:00 pm for Licensed Care), no contact has been made, Hand in Hand will notify the appropriate authorities to pick your child/adult up from the center. Exceptions may be made in extraordinary circumstances. Parents who consistently arrive late may be asked to find another program to better meet their scheduling needs.

PARTICIPANT RECORDS

SERVICE AGREEMENTS

All children/adults utilizing HCBS waiver services will be asked to review and sign a Service Agreement with Hand in Hand prior to service provision. Each Service Agreement will specify the child/adult's name, date of birth, Medicaid identification number, address, and the date of intake into Hand in Hand services.

The Service Agreement will further detail the Waiver service(s) to be provided to the child/adult by Hand in Hand as well as the procedural billing code, a short description of the service(s) desired by the child/adult, the number of billable units that will be provided, an hourly billable rate, the payer source (Intellectual Disabilities or Health and Disability Waiver) and the beginning and ending dates of service.

Service Agreements are updated annually or updated according to changes in a child/adult's plan of care, whichever comes first.

SAFEGUARDING PERSONAL PARTICIPANT RECORDS

Hand in Hand is committed to protecting, maintaining privacy, and restricting access to confidential information of participants, parent/guardians, and their families. Confidential information may include but is not limited to enrollment information, health information, financial information, screening, and assessment information.

Upon initial intake, when applicable, enrolling children/adults are given Release of Information forms for agencies and/or individuals Hand in Hand may need to obtain information from, exchange information with or release information to relevant to the child/adult's care. The agencies/individuals named on the Release of Information are voluntary, however, it is recommended that the child/adult limit releases to members of a child/adult's individual team, and only those the child/adult or his/her parent(s)/guardian(s) decides would be in contact with Hand in Hand to plan services or to determine eligibility for services. Release of Information consents are additionally signed for any individual listed in a child/adult's file as an emergency contact or anyone authorized to pick-up and assume care of a child/adult from Hand in Hand's care.

Consent to release, obtain or exchange information is limited to the agencies, groups, or persons named and this information is not be passed on to anyone else or be used for any purpose(s) other than those specified. Signed consents are valid for one year and a child/adult can revoke the consent privileges of any individual/agency during this time period by notifying both the persons giving and receiving the information in writing.

PARTICIPANT RIGHTS

RIGHTS AND RESPONSIBILITIES

At the time of intake, HCBS participants are asked to read and sign a Client Bill of Rights and Responsibilities, which highlights each child/adult's rights in the areas of informed care provision, respect and confidentiality and self-determination as well as specific financial aspects of their care and information about Hand in Hand's complaints and grievance policy. It also lists those areas for which a child/adult has responsibilities relating to his/her care provision, treating staff and administrators with respect and participating in a plan of care that reflects his/her desires and preferences.

Each year, a child/adult will receive and sign a new Client Bill of Rights and Responsibilities, usually at the time of his/her service plan renewal. The child/adult is then also provided with a copy for his/her own reference. If a child/adult, his/her parent(s)/guardian(s) requests to have his/her Client Bill of Rights and Responsibilities read or explained to him/her, the Director of Waiver Care & Program Development will do so.

As most of Hand in Hand's child/adult are minors and/or have nominated guardians, on-going communication with parent(s)/guardian(s) about their child/adult's needs and requests for their care are an important part of child/adult advocacy. Parents, the child/adult him/herself and the child/adult's inter-disciplinary team (IDT) communicate regularly (no less than annually) to ensure that these care needs are being met with the fewest restrictions to a child/adult's rights and human dignity.

RIGHTS RESTRICTIONS AND ASSURING CLIENT DIGNITY

As stated in Hand in Hand's *Client Bill of Rights and Responsibilities*, every child/adult has the right *"To receive services appropriate to [his/her] needs and expect Hand in Hand to provide safe, professional care at the level of intensity needed, without unlawful restrictions by reason of age, sex, race, creed, color, national origin, religion or disability."* (p. 1, pp. 1)

Occasionally, a parent(s)/guardian(s) will advocate for a change in a child/adult's care that is more restrictive, but within the boundaries of respecting the child/adult's human dignity. When such a request is made, the IDT will meet to discuss whether the restriction is necessary, humane and in the best interest of the child/adult's needs. If the restriction is deemed to be necessary for a child/adult's progress, increased independence or age-appropriate care provision, the team may approve it for a specified period. If one or more interventions are less restrictive to a child/adult's rights, these will be identified, discussed, and implemented before a more restrictive option.

It is our policy at Hand in Hand to always advocate for the least restrictive intervention that still allows a child/adult to thrive and achieve greater independence.

Any restrictions to an individual's rights, privacy or preference will be identified, approved, documented and signed by the appropriate members of the inter-disciplinary team. In addition, these restrictions will be evaluated on an on-going basis by the child/adult, his/her caregivers, supervisors, parent(s)/guardian(s) and other IDT members to determine if the intervention is still appropriate for the care and well-being of the person.

Rights restrictions will be formally reviewed quarterly by Hand in Hand's Director of Waiver Care & Program Development for their relevance and modified as needed. These reviews will be documented and kept in the individual's care chart. Restrictions will additionally be reviewed by the child/adult's inter-disciplinary team a minimum of one time annually, at which time the team will decide to continue, discontinue or modify the restriction intervention to one less restrictive to the child/adult.

CURRICULUM

CLASSROOM CURRICULUM

Hand in Hand's early education program fully embraces Teaching Strategies' Creative Curriculum.

The Creative Curriculum® for Preschool is a comprehensive, bilingual set of research-based resources that helps teachers establish effective, developmentally appropriate preschool programs for children with diverse family backgrounds, life experiences, languages, and skill levels. The curriculum's 38 objectives include predictors of school success, and they align with the state early learning standards, the *Head Start Early Learning Outcomes Framework*, and the *Common Core State Standards* for kindergarten. The objectives address 10 domains: social-emotional, physical, language, cognitive (including approaches to learning), literacy, mathematics, social studies, science and technology, the arts, and English language acquisition.

The Creative Curriculum® for Infants, Toddlers & Twos is a comprehensive, research-based curriculum that helps teachers and caregivers understand developmentally appropriate practice and how to offer nurturing daily routines and meaningful experiences that meet children's strengths, interests, and needs. It explains how to provide the responsive care that helps very young children develop secure attachments with the important people in their lives and gain confidence in themselves as learners. The curriculum's 38 objectives for development and learning include critical predictors of school success and align fully with the *Head Start Early Learning Outcomes*

Framework and state early learning standards. The objectives identify critical knowledge, skills, and behaviors in 10 developmental domains: social–emotional, physical, language, cognitive, literacy, mathematics, social studies, science and technology, the arts, and English language acquisition.

Hand in Hand classrooms have a structured day with a mix of free choice and teacher led activities, active and quiet times, and inside and outside experiences.

To promote health, Hand in Hand plans at least one hour of large motor (active) play time daily for all children enrolled, regardless of age or ability. This is a time where children are encouraged to jump, run, climb and be otherwise physically active either through involvement in a planned game or activity or free play. Large motor time is carried out either outside, weather permitting or inside (small groups in the cabin room). Infants will participate in large motor time, which is used as “tummy time”, rolling or crawling time on a blanket or mat outside/ inside.

Although children follow the same schedule daily, activities designed to promote the acquisition of various skills are planned daily. These activities will include health, safety, nutrition, science and literacy topics, open-ended art and music creation, building and pretend play, with a focus on hands-on learning. Focus will be placed on gaining skill at a pace that is appropriate for each child/adult, regardless of age or ability.

Skill acquisition is monitored using *GOLD*. This platform can be used to assess all students, including children with disabilities and children who have limited English proficiency. Teachers use the same process and rating scale for all children. The scale enables users to focus on each child's strengths rather than on what the child cannot yet do. With accurate assessment information, teachers can identify supportive strategies and individualize instruction. When using *GOLD*®, the teacher considers the idea captured by each objective as it applies to individual children. The teacher observes how each child progresses toward meeting the objective while using individualized modification, assistive devices, or adult support as necessary to participate in learning activities. *GOLD*® uses universal language that reflects an understanding that children show what they know and can do in various ways. The rating scale accounts for the many emergent skills that precede mastery, so teachers can document increments of developmental progress.

PROGRAM MATERIALS

Hand in Hand equips program spaces with age-appropriate toys and activities that have not been recalled. For this reason, we request you do not bring toys from home. Toys that cannot be cleaned and sanitized are not used. Toys that children/adults have placed in their mouths or that are otherwise contaminated by body secretion or excretion are set aside until they are cleaned by hand with water and detergent, rinsed, sanitized, and air-dried or run through the dishwasher.

FIELD TRIPS

Throughout the year, caregivers plan field trips to enhance the learning, socialization, and enjoyment of the child/adult. Parents/guardians must sign a permission slip for each activity. Caregivers bring these permission slips, emergency contact numbers and a first aid kits on every outing. All children must have a car seat available for transportation use if necessary. Parents/guardians are welcome to join their child/adult's group on any field trips in the community.

APPEALS AND GRIEVANCES

APPEALS AND GRIEVANCE PROCESS

Due to the frequent (often daily), ongoing communication Hand in Hand administrators have with our child/adult, the incidence of formal appeals or grievances to our policies is rare and child/adult concerns are listened to and addressed immediately.

However, all members of the Hand in Hand community have the right to voice grievances regarding treatment or care that is, or fails to be, provided, or regarding the lack of courtesy or respect to the person or the person's property without reprisal or discrimination for same and the right to be informed of the procedure to voice complaints/grievances with Hand in Hand. Complaints or questions may be registered by phone, in person or in writing to:

Molly Steil Rowland

Director of Waiver Care & Program Development

(563) 332-8010

molly@handinhandqc.org

The Director of Waiver Care & Program Development will review the complaint/grievance, share it with the CEO of Hand in Hand, and provide a written response within 30 days. The provider shall document in writing all complaints as well as document, in writing, any resolution of the complaint against anyone providing services on behalf of the agency. This policy applies to both past and present child/adult of Hand in Hand as well as prospective child/adult and referrals from another agency.

HAND IN HAND BOARD OF DIRECTORS

The goal of the Hand in Hand Board of Directors is to ensure quality care, establish policies, oversee fiscal accountability and to aid in achieving Hand in Hand's mission and various objectives.

Any member of the Hand in Hand community who voices a complaint/grievance with the Director and does not receive a satisfactory response may appeal to the Hand in Hand Board of Directors. To access a list of Advisory Board members, contact Hand in Hand's the CEO at 332-8010. The Board of Directors will provide a written response within 30 days of receipt of the grievance.

Participants and community members may also submit suggestions or concerns to Hand in Hand's Board of Directors. This independent group of professionals and parent(s)/guardian(s) will review any written suggestions/concerns and provide a written response within 30 days.

Participants, their parent(s)/guardian(s) also have the right to be advised of the phone number to the Bureau of Long-Term Care (515-281-8061) if there is a question or complaint regarding HCBS Waiver Services.

HAND IN HAND FINANCIAL POLICIES

Hand in Hand is a non-profit organization in which all program revenue is invested directly back into our programs for further development of enriching activities and expansion for new activities to be created. We keep activity expense at a minimum for families, while providing a low client-to-staff ratio in conjunction with supervisory staff necessary to ensure a quality experience for each child. Fees do not fully cover the cost that Hand in Hand incurs each year, so we rely heavily on donations and fundraising to keep our programs running.

Activity Fees are fees paid by individuals who utilize waiver services from the state of Iowa. Families pay a minimal daily or per activity fee on top of what we bill Medicaid to cover the additional expenses associated with programs such as admission and supplies.

Tuition are fees paid by parents/guardians not utilizing another source of funding, often referred to as "full fee." These families don't have waiver services and/or state funded childcare assistance.

Waiver Services are paid for out of Medicaid. The activity an individual chooses to participate in, the number of hours they are allowed by Medicaid ruling, and the reimbursement rate are all set based on an individual's specific needs.

Iowa Department of Human Services Childcare Assistance are funds paid by the state of Iowa will provide assistance for childcare costs to parents/guardians

demonstrating financial need. Parents are assessed a co-pay based on time and care is provided based on the state's formula.

BILLING

REGISTRATION FEES

Hand in Hand assesses fees based on the service provided and requires a \$25 deposit upon registration.

FAMILY BILLING FOR LICENSED CARE AND PEOPLE WITH PURPOSE

All families are billed at the first of the month for the month of services for the schedule the child/adult is signed up.

All child/adult care fees must be paid on Monday morning for the upcoming week. Checks can be made payable to Hand in Hand. Families may pay for more than one week at a time. If families wish to pay via credit card, they may request a credit card authorization form and we will automatically bill them each month.

FAMILY BILLING/PAYMENT FOR RECREATION SERVICES

For all recreation programs: All families are billed mid-month prior for service and provided invoices dated the first of the month the activity occurs.

Example: a family signs up for recreation activities by June 15 June for programming in July and receives an invoice for July. This ensures Hand in Hand has appropriate staffing and supplies.

Participants must cancel by the end of the month prior to receive credit for the service. Failure to cancel prior to the first of the month of the activity will result in program charges. Exceptions may be made in certain circumstances (e.g. illness, family emergency) approved by the CEO.

All child/adult recreation fees must be paid by the first of the month the activities occur.

FAMILY BILLING FOR CAMP HAND IN HAND

All families are billed the cost of Camp Hand in Hand at sign up to hold their spot. A refund of 50% will be granted if a camper cannot attend and Hand in Hand is given at least a three-week notice. After that date, refunds are not available.

All camp fees must be paid at time of sign up.

PROGRAM ATTENDANCE

Hand in Hand offers both full time and part time care for families but still requires a consistent schedule to be communicated and adhered to. If needed, scheduling changes must be made with Program Director approval with a two-week notice.

Families will be billed for the schedule for which they signed up for, regardless of attendance.

If a child/adult will not be in attendance, a parent(s)/guardian(s) must call to inform the child/adult's care team. If a child/adult is absent more than one week without contact, he/she will be discharged from the program.

If families utilize State of Iowa Childcare Assistance, it is expected they meet their allowed DHS attendance units regularly. Consistent underuse of these units without appropriate reason will result in forfeiture of the childcare slot. Children may not exceed the units approved by DHS. If a child is present for more units of care than they are approved the family will be billed for each day (rate will be calculated at weekly rate / 5).

NON-ATTENDED DAYS: VACATION, ILLNESS, HOLIDAYS, PROGRAM CLOSURE

Hand in Hand understands unavoidable absences and the importance of vacations. However, to ensure we are adequately staffed and provide necessary stability for qualified staff members, families pay the same weekly rate even if there is a holiday, a day missed due to illness, a family vacation, or a program closure due to in-service, severe weather or other extreme situations and conditions.

FEE INCREASES

To keep up with supply cost and wage increases, Hand in Hand regularly analyzes fees charged to ensure they adequately cover the expense. Families should expect occasional to regular fee increases. Any fee increases will be communicated to families with a minimum of a 30-day notice.

DISCONTINUING SERVICE

Parents/Guardian must provide a written two week notice prior to terminating care. If a two-week notice is not provided, families will pay for an additional two weeks after their last date of care.

CHECKS WITH NON-SUFFICIENT FUNDS (NSF)

Families will be charged all bank service fees associated with NSF checks plus a \$25 fee.

SCHOLARSHIPS

Financial Assistance funds may be available for those who apply. These funds are obtained through generous donations. Funds are limited and granted when available. Please inquire with your Program Director for more information.