

CHILDREN'S HEALTH AND FITNESS POLICY

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PERFORMANCE OBJECTIVE: 1302.31(e)(4)The program must recognize physical activity as important to learning and integrate intentional movement and physical activity into curricular activities and daily routines in ways that support health and learning. A program must not use physical activity as a reward or punishment.

PROCEDURES:

Physical Activity

1. All staff will receive training on developmentally appropriate physical activity practices.
2. Lesson plans will include at least 60 minutes of unstructured free play daily. Children will have an outdoor active play at least once daily, weather permitting. Teachers will adjust their schedules to meet their classroom and center needs and to take advantage of the day's best weather.
3. Teacher-led movement activities are provided for at least 30 minutes daily. This activity split into several smaller segments throughout the day. These activities can be done indoors or outdoors.
4. Teachers will provide an active learning environment where children learn through play and movement.
5. Staff must come to work dressed appropriately for physical activity. Teachers/aides are expected to participate in activities along with the children.
6. Teachers/aides will individualize outdoor play. Planned intentional games and activities will be available during each outdoor play period as an extension of the classroom's Unit of Study.
7. The skill level of each child will be taken into consideration.
8. Water will be available for drinking outside at all times.
9. Staff will follow the "Child Care Weather Watch" guide to determine if outside play is safe during extreme heat and cold temperatures. In addition, children will not play outside if it is raining regardless of the temperature.
10. During the summer months, teachers will follow our Sunscreen Policy guidelines.
11. Children will be asked to sit in the shade, or go inside for a cooling-off period if they are observed to be overheated.
12. Teachers must establish bathroom routines to foster independence and allow children more frequent bathroom visits without leaving the classroom and/or playground. Suggested bathroom breaks are in the morning at arrival time, prior to any meal/snack, before going outside, and after coming in from

- outside.
13. Teachers/aides will follow the Head Start Birth to Five Active Supervision Policy at all times. Teachers must develop plans to ensure that all children are supervised appropriately and staff is monitoring all areas of the playground using the same staff-to-child ratio and group size required in the classroom.
 14. No child is to leave the playground or classroom unless accompanied by staff or the child's parent. No child is to be left in the care of volunteers at any time.
 15. Children are expected to play outside unless they have a dated, doctor's note excusing them from outdoor play for a specified period of time.
 16. Staff will ensure that all children wear helmets when using riding toys such as bikes, trikes, and wagons.
 17. Teachers/aides are encouraged to send home Family School Readiness Connections that include physical activity.
 18. The program will only use classroom television and videos, for educational purposes. Examples: WOW experiences, virtual field trips, ebooks/read aloud links, music, and movement. Screen time is limited to 30 minutes per week. Screen time is not allowed for children under 2 years of age.
 19. EHS Home Visitors will follow the guidelines of having water available, follow the Head Start Birth to Five Active Supervision Policy, and the Sunscreen Policy guidelines while they are conducting their socializations.
 20. EHS Home Visitors will incorporate physical activity into their socializations. Activities will be individualized based on the age and developmental level of the children present.

Parent Involvement and Referral

1. During cold weather, parents are responsible to see that the children come to school with coats, socks, mittens, and head covering.
2. Children must come to school with shoes on. Tennis shoes are recommended for everyday wear. Children cannot be admitted to the program barefoot.
3. When planning parent meetings and home visits, the staff must include nutrition and health information such as understanding food labels, cooking classes and family physical activities.

Head Start Only

1. Based on the results of the height and weight assessments or physician exam, some children will be identified as "at-risk". Children may be assessed as either underweight or overweight based on the Center for Disease Control Body Mass Index. These children will be referred for additional services. In addition, any child marked as "abnormal" on their growth assessment by the physician will also be referred for additional services.
2. If a child is identified as "at-risk" due to a growth assessment, the

Family Resource Specialist will refer the family to the Women, Infants and Children program, (WIC) or verify participation if already signed up.

3. If a child is identified as “at-risk” on two consecutive growth assessments, the FRS will provide the family with an information packet on nutrition and healthy eating.
4. If a child is identified as “at risk” on three consecutive growth assessments, (only possible with returning children), the FRS and Nutrition Consultant will meet together with the family to answer questions and provide one-on-one nutrition counseling.
5. FRS’s must follow-up with the families that do not complete the referral process.