
POLICIES AND PROCEDURES UPDATE

March 2026

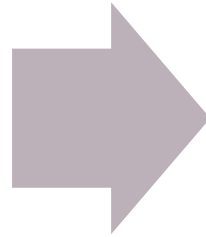
EQUIPMENT

Per 2CFR Part 200.1, equipment is defined as tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost that equals or exceeds the lesser of the capitalization level established by the recipient or subrecipient for financial statement purposes, or \$10,000.

Prior written approval must be obtained for the purchase and disposition of equipment and other capital expenditures as described in 2CFR Part 200.407.

CLASSROOM ILLNESS POLICY

A temperature will be taken only if a child appears warm, flushed, unusually fussy, lethargic, or shows other signs of illness. To prevent inaccurate readings, staff will wait at least 15 minutes after outdoor play, crying, or physical activity before checking. If an elevated reading is obtained, the temperature will be rechecked after 10–15 minutes. A child will not be excluded based on a single questionable reading.



A fever is defined as 100.4°F (38°C) or higher. Teething alone is not cause for exclusion. While teething may cause drooling, mild irritability, or a slight temperature increase, exclusion will occur only when symptoms meet established illness criteria, including fever of 100.4°F or higher with behavior changes, repeated vomiting or diarrhea, significant respiratory symptoms, rash with fever, or when the child cannot participate or requires more care than staff can safely provide.

EXTREME BEHAVIORS

- **If a child continues to exhibit extreme behaviors, where children and staff are unsafe and behaviors occur three times within 10 school days, despite classroom interventions, the Mental Health Consultant, Director, and Education Manager may determine that a formal Behavior Plan or Safety Plan is necessary. The Mental Health Consultant will develop the plan. A Safety Plan outlines procedures to follow when Safe School violations occur. A Behavior Plan identifies classroom strategies based on the Pyramid Model to support the child's behavior.**
 - **The Mental Health Consultant will share the plan with the teaching team. The Education Specialist will ensure the team understands the plan and how to implement it with fidelity. The Mental Health Consultant will contact the parent or guardian to explain the plan and the implementation process. Safety plans may include procedures such as contacting parents to come to the program to provide support if Safe School violations occur.**
 - **If persistent or extreme behaviors continue, and/or parents or guardians are unable to come to the classroom to provide support as outlined in the Safety Plan, the Mental Health Consultant, Education Manager, FCP Manager, and Director will meet to determine an individualized plan for the child and family. All individualized plans will be based on Safe School violation data. The plan will be discussed with the parents or guardians and the teaching team and will be reviewed regularly to monitor effectiveness. The individualized plan may include one or more of the following actions:**
 - a. **Parents or guardians may be asked to attend the classroom with their child to provide additional support. Parents will be given a packet to help them stay actively engaged with their child during classroom time.**
 - b. **Parents or guardians may be asked to keep the child home temporarily until additional intervention strategies can be added to the Positive Guidance Plan. This action must be approved by the Education Manager and Program Director. During this time, the child will receive home visits and home learning packets, and comprehensive services will continue.**
 - c. **The child's school day may be shortened to four hours, or the child may be moved to a different classroom placement to better support their needs. If the child's behavior shows improvement over a period of two weeks on the shortened schedule, a plan to gradually increase classroom time will be implemented.**
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