

Macon County School District Board of Education



HIPPY

Policy & Procedure Manual

Macon County Board of Education

HIPPY

(Home Instruction for Parents of Preschool Youngsters) Policy and Procedure Manual



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HIPPY Coordinator

Dr. Melissa Williams
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MCBOE:

Katy Campbell, Esq. – Board President
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Elnora Love – Board Member
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Sawanda Wilson – Board Member

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**Macon County BOE
HIPPY Staff**

**Dr. Renata Bryant – Coordinator
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MCBOE School Academic Calendar of Events:

Macon County School District
2024-2025 Academic Calendar (Students and 187-Day Employees)

July 2024						
Student Days: 0 Work Days: 0 Additional Work Days: 0						
S	M	T	W	TH	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

January 2025						
Student Days: 18 Work Days: 19						
S	M	T	W	TH	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

August 2024						
Student Days: 18 Work Days: 22						
S	M	T	W	TH	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

February 2025						
Student Days: 19 Work Days: 19						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

September 2024						
Student Days: 20 Work Days: 20						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

March 2025						
Student Days: 16 Work Days: 16						
S	M	T	W	TH	F	S
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

October 2024						
Student Days: 22 Work Days: 23						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

April 2025						
Student Days: 21 Work Days: 21						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

November 2024						
Student Days: 15 Work Days: 15						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

May 2025						
Student Days: 16 Work Days: 17						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

December 2024						
Student Days: 15 Work Days: 15						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

June 2025						
Student Days: 0 Work Days: 0 Additional Work Days: 0						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

Academic Calendar Key	
Teal	Teacher or Additional Workday (No Students)
Green	School Day for Students
Yellow	School Day for Students and Early Dismissal- 11-30 AM
Red	Non-Work Day (No School)
Gray	Weekends (No School)
Orange	School Day for Students and Special Announcement for Grading Periods

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Personnel

Required Training/Parent Educator Safety

Policy: All direct staff are trained on and demonstrate competency in specific areas pertinent to their job functions.

Procedure:

Home Visitors must receive training or demonstrate competence in the following areas, as appropriate:

1. Agency protocols for intake and enrollment of families, goal setting and review of progress, child screening and referral, resource connections and follow up, family engagement, transition planning, confidentiality, data collection and documentation of services, orientation for new staff, and supervision/professional development.
2. Establishing professional boundaries and employing appropriate methods of support
3. Encouraging independence
4. Understanding child, adult, and family functioning
5. Educating individuals and families about child development, child rearing, positive personal development, and health
6. Identifying and building strengths and protective factors
7. Assessing needs, risks, and safety
8. Recognizing and responding to problems related to substance use, mental health, domestic violence, and child abuse and neglect
9. Recognizing and responding to signs of prenatal and postpartum depression.
10. Administering early intervention techniques
11. Understanding issues of relevance to families of children with developmental delays or disabilities
12. Helping families learn to support and promote their children's healthy development
13. Engaging and motivating group members
14. Understanding group dynamics
15. Use of the ETO Software-Efforts to Outcome (AL Dept Early Childhood Education database)

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A mandatory Parent Educator Safety training (Home Visitor Training) is required for all Parenting Support and Education Personnel.

All staff will be provided with a copy of the Affiliate plan for review and compliance. This plan is updated annually.

Staff may demonstrate competency through completion of post-training quizzes, regular supervision and feedback with their supervisor, and observation of skills in action.

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Personnel

Case Assignments and Workload

Policy:

Caseloads are restricted to ensure workloads support the achievement of child and family outcomes.

Procedure:

Full time Home Visitors may carry a caseload of 15 families/cases and a part time Parent Educator may carry a caseload of 12 families/cases.

The HIPPY Coordinator manages the caseloads of each Home Visitor and reviews them on a regular basis.

The individual caseloads are organized in a manner that best supports families.

When assigning families to Home Visitor, the Coordinator utilizes the following factors to ensure the best match between Home Visitors and families to prevent disruption of services and limit reassignment of cases:

- a. The qualifications and competencies of the individual Parent Educators
- b. Family complexity and status including the intensity of child and family needs and travel time
- c. Case status, including progress towards achieving desired outcomes; the work and time to accomplish assigned tasks
- d. Whether services are provided by multiple professionals; and the level of need of new and current families.

In the event of staff turnover, the coordinator will review the caseload of the employee leaving and reassign families to another staff member based on the criteria identified above. The family will be notified within 2 business days of their new Home Visitor if there is a change in employees. Ideally, new case assignments will be made prior to the Home Visitor exiting the agency to allow for a smooth transition.

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Intake and Assessment

Community Outreach to Recruit Service Recipients

Policy: The agency actively engages in community outreach and collaborates with other providers who may serve families in need of services to ensure families are made aware of the program as early as possible and to identify families who may need help maintaining or strengthening family functioning.

Procedure:

Community Outreach should occur monthly and may include:

1. In-services at local county Dept of Human Resource offices
2. Presentations/Materials provided to local pediatricians, hospital social workers, schools
3. Targeted mailings to potential families
4. Presentations/Materials provided to local community groups or churches
5. Group Connections
6. Advisory Board Meetings
7. Personalized contact (face to face/phone/virtual meeting) with identified potential families to provide information about the program and encouragement to enroll.

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Intake and Assessment Screening, Intake, and Enrollment

Policy:

The agency strives to match families and individuals to Parenting Education and Support Services appropriately and to provide prompt intake and enrollment for qualifying families.

The agency avoids dual enrollment of families in services funded by the Federal government whenever possible.

Procedure:

Once a family has been recruited, they are assessed to determine eligibility for services. Families that are deemed ineligible for services are referred to other community resources as available.

Eligibility requirements:

The family must have a child that has not yet entered kindergarten. A pregnant mother can also begin services. The family must reside in a county inside the designated catchment area.

No family will be screened out based on any other demographic criteria.

Intake Steps:

Once eligibility is established, the following intake process is initiated within 2 weeks (unless there is a waiting list):

1. Participation Agreement and Consent for Services Form
2. Welcome to HIPPY Handout
3. Family, Child and Parent Information Records (includes demographic and cultural information)
4. Family Intake Record
5. Goals Record
6. Education, Employment, and Income Form
7. Primary Caregiver and Childhood Enrollment Forms

Avoiding Dual Enrollment

The agency tracks all individuals and families receiving services in a web-based Client Information System. The agency avoids dual enrollment of clients in multiple programs with state and federal funding, unless doing so is counterproductive to the best interests of the child and/or family.

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During the screening process, information is gathered regarding any providers the family is actively engaged with for service delivery. If a family is engaged in a similar service with another provider, the staff member screening the family will consult with their direct supervisor to determine the appropriateness of providing services immediately or waiting until the family has completed service delivery with the similar service provider.

Waiting List

In the event the agency does not have capacity to serve an eligible family, the family should be pre-enrolled in the ETO System until services can be established.

The family will be immediately referred to other appropriate service providers.

The Home Visitor will make periodic contact with families on the waiting list to provide updates regarding service delivery and make updated referrals to other providers as needed.

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Intake and Assessment

Policy: Families served are engaged in an individualized, culturally and linguistically responsive assessment, which includes the use of standardized assessment tools to identify family strengths and protective factors; assess for needs and risk factors; assess child development.

Procedure:

Within the first two meetings, the parent and a certified Home Visitor complete the intake process and completes the Family Centered Assessment which helps the Home Visitor get to know and genuinely understand a family. The intake process and assessments guide the family and Home Visitor in recognizing a family's strengths and protective factors in addition to areas where the family may have room to grow/improve. The assessment addresses seven core areas:

- Parenting
- Family relationships and support systems
- Parent education and vocation
- Parent general health
- Access to medical care including health insurance
- Adequacy and stability of income
- Adequacy and stability of housing

The Home Visitor also facilitates the *HOME inventory*, *Domestic Violence Assessment (DOVE)*; *Depression Assessment (PHQ-9)*; and a *Family Assessment including a trauma component*.

Within the first three months of service, children (infants to 5 years old) are screened using the Ages & Stages Child Development Questionnaire. If the child does not evidence appropriate development in personal and social development, the Home Visitor completes the Ages and Stages Social and Emotional Questionnaire (ASQSE).

The ASQ is re-administered on each child's birthday, though parents are welcome to request an additional screening if they have concerns. When screening indicates a need for additional assessment, families are given community resource information regarding that need.

The ASQ and ASQSE have child development questionnaires for every other month from 4 months to 24 months and then every third month from 27 months to 60 months. They are parent completed questionnaires that reflect the child's development in the areas of communication, gross motor, fine

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motor, problem solving, personal and social and overall development such as hearing, vision, medical issues of any other parent concern about the child's development.

Questionnaires are completed during home visits as the home environment provides an ideal testing environment for young children.

The program utilizes parent reports, reports from team members and child observation for collection of data. The data will be recorded on the standardized ASQ forms. Each ASQ and ASQSE has an attached scoring sheet. Parent Educators are trained in analyzing the scoring sheets. In addition, the supervisor reviews any scoring sheets which indicate a concern or need for additional testing.

Data results of the questionnaires are shared with parents.

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Goals Recording and Monitoring (Retention)

Policy:

All family members participate in the development and ongoing review of a Goals Record that is the basis for delivery of appropriate services and support.

Procedure:

The process for setting and achieving goals begins at the first visit through conversation, observation, family-centered assessments, child development screenings, and the parents' sharing of expectations.

Using the information gathered from these different sources assists Home Visitors facilitate the parents' ability to:

- Identify their desires, needs and concerns.
- Determine their strengths and resources, as well as challenges and barriers
- Prioritize next steps and set goals.

Within the first two meetings, the parent and the Home Visitor complete a HIPPY assessment/ questionnaire to assess the current needs of the family and develop a Goals Record. The assessment/ questionnaire is designed to obtain general demographic information about the family as well as information about any other services or support that the family currently receives. The profile provides information on health insurance, concrete needs, family violence, environmental concerns, and safety concerns for home visitor. A Goals Record is designed utilizing this information.

The Goals Record includes a discussion with the parent about goals for their parenting abilities and desired outcomes from the visits. Goals Records are developed in a culturally responsive manner.

Goals are regularly reviewed with the family and the Goals Record is updated at least every three months. These goals are also reviewed in individual supervision sessions with the Home Visitor and coordinator at least twice a month.

In the event a family has a significant change or crisis, the family may request additional support, referrals, and goal changes at any time.

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Family-Focused Approach to Service (Retention)

Policy:

The agency strives to provide services to families of the appropriate type and intensity needed to build on strengths, address risks, and improve family functioning.

Procedure:

Ideally services are provided on for a minimum of 2 years. Services must terminate when the youngest child in the family enters Kindergarten. An exception may be granted for a child in Kindergarten with an IEP. Services would then conclude at the end of their Kindergarten year.

Agency staff will strive to establish respectful relationships which facilitate productive Goals Records and delivery. Staff will encourage program participation and families' willingness through positive engagement, using a non-threatening manner, respecting each person's autonomy and confidentiality, providing flexible scheduling, and persistently attempting to engage families.

The frequency, intensity, and duration of services are based on each family's strengths, needs, and circumstances.

Services are provided in the family's home or other community settings of the family's choosing whenever possible.

Steps to reengage families if scheduled visits are missed or when there is a gap in service delivery:

1. Home Visitor attempt a telephone contact to reschedule or reengage with 5 working days of a missed appointment.
2. The Home Visitor will continue weekly attempts to reach the family or reengage with services for four weeks.
3. If a family misses three consecutive appointments without notice, the Home Visitor will review the program with the family and re-evaluate the appropriateness of the HIPPY program for the family.
4. The Home Visitor will mail a final contact to the home with reminders of the incentives and benefits of program participation.

Families are encouraged to provide feedback during all interactions with the Home Visitor. Satisfaction Surveys are provided to formally gather feedback annually.

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Family Support Services and Incentive Plans (Retention)

Policy:

Families are linked to services and supports and encouraged to identify and utilize an informal support network. When appropriate, the agency utilizes incentive plans to encourage and support family engagement and desired outcomes.

Procedure:

Home Visitors provide family support services by:

1. Completing home visits each month, including intake, assessment and case management for 12-15 families using an evidence-based home visiting model designed to ensure young children are healthy, safe and ready to learn.
2. Regularly administering Ages and Stages Questionnaires for child development to screen for potential developmental delays and increase the parent's knowledge of child development milestones. Making referrals to early intervention services as needed
3. Promoting Head Start/preschool and other early intervention programs.
4. Maintaining toy/book/video lending library.
5. Providing information about Head Start, library, and other community partners and encouraging families to connect with their community resources.
6. Offering monthly Group Connections
7. Making/receiving referrals to and from community services that address needs and problems that may impede effective parenting, including as appropriate:
 - a. Counseling
 - b. Food And Nutrition Services
 - c. Health Services
 - d. Transportation Services
 - e. Financial Assistance
 - f. Mental Health Services
 - g. Services for Substance Use

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h. Domestic Violence Services

The Home Visitors will review referrals and resources provided during follow up foundational/home visits to determine the effectiveness of the referral and/or resource and to provide additional information, support, and referrals as needed.

HIPPY provides incentives by:

1. Providing free books to families at each home visit.
2. Providing supportive services as needed and available to assist families in reaching set goals.
3. Providing food and activities at Group Connections to promote interest.
4. Providing supplies for home activities that promote parent-child development.

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Parent Education Services

Policy:

The agency provides education and skill building activities to empower parents and improve adult functioning.

Procedure:

HIPPY curricula is used to build parenting skills and empower parental functioning:

- HIPPY
- Mother & Baby
- Talk with Me Baby
- Ages and Stages Assessment Tools
- Development Topics Tracking Tool (includes pre-natal development)
- Child Development and Parent education is addressed at every visit with the family
- Group Connections are provided monthly

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Positive Child Development Services

Policy:

The agency ensures children receive or have access to services that meet their needs, promote growth and development, and increase their well-being.

Procedure:

One of the three areas of emphasis with the HIPPY program is Development-Centered Parenting. The HIPPY approach is designed to inform parents about their child's development and help parents make the connection between their parenting behaviors, their child's development and his/her behavior. Home Visitors work with parents to identify and understand causes of behaviors and move toward solutions as needed.

The seven developmental topics that HIPPY has identified as universal across all cultures are:

- Attachment
- Discipline
- Health
- Nutrition
- Safety
- Sleep
- Transition and Routines

Home Visitors use the HIPPY Curriculum in culturally sensitive ways to deliver services that emphasize parent-child interaction, development centered parenting and family wellbeing. Home Visit Plans and Personal Visiting Guides from the HIPPY Curriculum are used to design and deliver personal visits to families. The HIPPY Curricula provide a framework for services. The curricula include:

- Research-based resources and handouts
- Evidence-informed practices
- Personal visit plans
- Guided planning tools

These materials help Home Visitors individualize services for each family while maintaining consistency across families. The curricula also include toolkit cards to help Home Visitors organize discussions with families, implement strategies to strengthen the Parent Educator-family relationship, and facilitate the HIPPY approach to working with families.

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Within the first three months of service, children (infants to 5-year-olds) are screened using the Ages & Stages Child Development Questionnaire. If the child does not evidence appropriate development in the area of personal and social development, the Home Visitor completes an additional questionnaire, the Ages and Stages Social and Emotional Questionnaire (ASQSE).

The ASQ is re-administered on each child's birthday, though parents are welcome to request an additional screening if they have concerns.

When screening indicates a need for additional assessment, families are given community resource information regarding that need and referrals as needed.

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Early Intervention Services

Policy:

Early intervention services are provided to promote the health and wellbeing of children who have or are at risk for developmental delays.

Procedure:

If an assessment reveals the need for specialized services, the Home Visitor will refer the family to specialized services or assist the family in locating appropriate services for the child.

Within the first three months of service, children (infants to 5-year-olds) are screened using the Ages & Stages Child Development Questionnaire. If the child does not evidence appropriate development in the area of personal and social development, the Parent Educator completes an additional questionnaire, the Ages and Stages Social and Emotional Questionnaire (ASQSE).

The ASQ is re-administered on each child's birthday, though parents are welcome to request an additional screening if they have concerns.

When screening indicates a need for additional assessment, families are given community resource information regarding that need and referrals as needed.

HIPPY Family Activities are conducted at every visit and include the family members' ideas, the families' informal resources (toys, household materials, etc.), take advantage of natural learning, and can be incorporated into everyday routines and activities.

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Case Closing and Aftercare (Exit and Dismissal from Program)

Policy:

The agency works with families to plan for case closing and to develop aftercare plans as appropriate.

Procedure:

Discharge planning begins at program enrollment.

The length of the program, requirements for continued enrollment and discharge process is identified in the EEI Participation Agreement and Consent for Services. This form is provided to parents at the initial visit. When a family has an anticipated discharge, the process is discussed with the family. An ending date is identified, progress achieved is reviewed and ending sessions focus on additional needs of families and resources to meet those needs.

A transition plan is developed six months prior to planned discharge. The transition plan includes all family members and the Home Visitor. The plan identifies additional services and supports for the family based the family's needs and requests.

Families are discharged from HIPPY when the youngest child in the family goes to kindergarten. Six months prior to discharge, emphasis is placed on kindergarten readiness. During the transitional period, the focus is on helping to prepare the child to discharge from HIPPY and enter into kindergarten.

Families can also be voluntarily discharged at any point, when they have made good progress or have demonstrated mastery of the concepts. Families are also discharged due to moves, employment changes or an inability to schedule and attend the regular meetings with the program staff. Discharge planning includes transitioning to additional community resources if needed.

If a family discontinues services abruptly, the Home Visitor will make any needed referrals or provide appropriate information to the family regarding additional services or providers available to meet any additional needs.

If a family withdraws from engaging with the Home Visitor for any reason, the Home Visitor will make weekly efforts to contact the family to re-engage in services. If the family does not respond after four weeks of attempts, the Home Visitor will mail a final contact to the home with reminders of the incentives and benefits of program participation as well as how to access other community resources and how to re-engage with services in the future.

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An exit summary is completed within 10 days of service delivery completion.

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**Data Collection, Entry, and Security including
Confidentiality, ADA, HIPPA, FERPA**

Policy:

The agency ensures the safety, dignity, and confidentiality of families in the service delivery and data collection process, enters data promptly into required information systems and client record, and works diligently to securely protect all information. The agency adheres to state and federal mandates related to Americans with Disabilities Act, Health Information Protected Privacy Act and the Family Educational Rights and Privacy Act.

Procedure:

- A. All staff members will receive HIPPA training during New Employee Orientation.
- B. Confidentiality agreements are signed and kept as part of the employee record.
- C. Confidentiality protection during home visits:
 - a. Staff will not display insignias on any vehicles or clothing/accessories identifying a family is engaging in services.
 - b. Staff will ensure any paper records are kept locked in their vehicle and are not in view.
 - c. As needed, staff will collaborate with the family to create a script to use in the event someone drops by the home during home visits unexpectedly.
 - d. Staff will make all necessary effort to protect client confidentiality during all engagement with family.
- D. Confidentiality of all information about donors, clients, their family members, and employees shall be maintained as follows for PAPER records:
 - a. Paper records are locked when unattended. Each location will have adequate, secure storage for paper files.
 - b. When staff are transporting paper files, files will be stored in a locked box or locked in the trunk of the vehicle. Staff who primarily work from home will ensure paper records are secure when they are not in use.
 - c. If a staff person realizes they have lost a paper file or that a breach of confidentiality has occurred, they will immediately notify their direct supervisor to report the breach

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disabled or access to the agency's server on the device is disabled.

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- iii. Immediate action will be taken to retrieve the lost device and/or secure the breach of information.
- iv. Breach of confidentiality can result in disciplinary/corrective action including termination.

E. Data Collection:

Home Visitors will utilize the required data collection systems appropriate for the program and funding source. In addition to web-based software used to maintain records and track client progress, the ETO-Efforts to Outcome (AL Dept Early Childhood Education database) will be utilized specifically by HIPPY Affiliate providers.

HIPPY affiliates will specifically utilize the following guidelines

- a. Family Intake Record and Consent (Consent for Services)- must be completed by the end of the first foundational visit.
- b. Home Visit Plan or Personal Visit Planning Guide- must be completed/reviewed prior to each personal visit.
- c. Home Visitor Record- must be completed within 3 business days of the visit
- d. Milestones Record- must be completed within three days of each visit as applicable
- e. Family Information Record- within 90 days of enrollment, annually thereafter
- f. Child Information Record- within 90 days of enrollment, annually thereafter
- g. Parent/Guardian Information Records- within 90 days of enrollment, annually thereafter
- h. Developmental Screening Results- within 90 days of enrollment, annually thereafter
- i. Child Health Records- within 90 days of enrollment, annually thereafter
- j. Family-Centered Assessment- within 120 days of enrollment, annually thereafter
- k. *Prenatal/Postpartum Records- (only used in the event of pregnancy during service delivery)
 - a. Prenatal section- by the child's due date
 - b. Postpartum section- within 3 months of the child's birth

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Mandatory Reporting

Policy:

All staff are trained on mandatory reporting of abuse and neglect.

Procedure:

Any staff who suspect abuse or neglect are required to report the concern immediately the appropriate county Department of Human Resources.