Education Division Newsletter

Red Cliff Early Childhood Center

Manidoo-Giizisoons (Little Spirit Moon)

December 2013

ECC Parent Committee

What is the parent committee?

The parent committee is comprised of any parent with a child enrolled at the ECC. It is not an elected group of parents, but all and any parents!

When does the committee meet?

This committee meets once a month, typically in the evening at 5pm at the ECC. All dates are scheduled and posted in the annual calendar.

What does the committee do?

The committee provides vital feedback into the program in areas such as menu planning, parent involvement, family activities and family nights, etc.

Please contact Nicole Boyd (ext 253) or Jenny Bresette (ext 257) at 779-5030 if you have any questions, comments or feedback. If you can't attend a meeting and have feedback, call us anytime!

Our next Parent Committee Meeting is Wednesday, December 11th at 5pm, featuring a demonstration and activity with UW Ext: Healthy Cooking with Kids! Bring the kids and enjoy a hands-on activity and some fun social time with other families.

The ECC always encourages feedback from families and the community, this is just one opportunity, please feel to provide feedback about the program at any time to any ECC staff.

How do I claim Medical Mileage????

ForwardHealth
Wisconsin serving you

Are you a recipient of BadgerCare Plus Standard Plan, BadgerCare Plus Benchmark Plan or Medicaid? Do you struggle with getting to and from medical appointments? You may be eligible to receive either a ride directly from the new transportation manager MTM or receive mileage reimbursement for your trip. To schedule a ride with MTM call 1-866-907-1493 or 1-800-855-2880. When scheduling a ride, you will need your forward health ID number, addresses, and times of apts. If you would like to apply for Mileage Reimbursement, you must call MTM prior to your trip at 1-866-907-1493. The form is found in this newsletter and can be photo copied (both sides). The form must be completely filled out for reimbursement. Forms may be faxed or mailed in. If you need a mileage form faxed, the ECC is a place to have it faxed. If you ever need a replacement form, the ECC has them too. :)

Special points of interest:

- Parent Committee Meeting on December 11th 5pm @ ECC w/ cooking!!
- ECC Holiday Party December 20th 10am @ Youth Center
- Language Table Dec 5th, 12th, 19th
- ECC CLOSING EARLY Dec 12th @ 11:30am
- Policy Council Mtg Dec 11th
- JOM Mtg Dec 4th 3:30 @ Tribal Office Lower Level

Inside this issue:

Event Calendar

Classroom Updates

Cooking w/ Kids Dec 11th

WITC GED Classes at ECC

Bayfield School Honor Roll

Ojibwemowen

MA Medical Mileage Forms

Manidoo-Giizisoons (Little Spirit Moon)
December 2013
ECC & Community Events

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 WIC Pick Up	3 WIC Pick Up **Health Insurance Event 3pm & 5pm @ LW	4 10-1 GED/ HSED Class @ ECC	5 Nooni Group10 @ Clinic 4:30 Language Table @ ECC	6 Craft Sale @ LW 10-4	7
	Intensive Occupational Therapy Week @ ECC					
8	9 WIC Pick Up	10 WIC Pick Up	11 *9-12 Program Governance Training @ LW *12:00 Policy Council Mtg @ LW *10-1 GED/ HSED Class @ ECC *5pm Nutrition Edu @ ECC	12 **ECC Early Release at 11:30am** *9-12 Fiscal Training @ ECC *1:30 K-6 Program @ Bayfield school *4:30 Lang Table @ ECC	13	14 Santa & Mrs. Clause at Bayfield Pavilion 11:30-1:00pm Mt. Ashwabay Opening Day Santa @ Wal-Mart 10-2
	Intensive Occupational Therapy Week @ ECC					
15 Santa @ WalMart 10-2	16	17	18	19 Nimaamaa Group 10am @ Clinic 4:30 Language Table @ ECC	20 ECC Holiday Party 10am @ Youth Center *Home Base Social	21
22	23	24	25	26	27	28
	Winter Break: ECC Closed Dec 23rd - Jan 3rd					
29	30	31	1	2	3	4
	Classes resume Jan 6th					

Toys for Tots
292-6400 ext 2

Waabooz newsletter for Manidoo-Giizisoons

We growing like crazy. We love playing on the floor and exploring new things in the room. The Waabooz babies are working on eat and drinking on their own, crawling, sitting up, walking, and being good friends.

Things we like to do are....

Walter like to climb up and down the stairs and the ramp.

Niigani loves to sing and drum.

Emylia like to play with babies and rock them.

Samara loves to smile and snuggle.

Zaylia really loves to keep busy at the table painting and eating.

Avery loves to sing and play games.

Maycee just a happy baby and really loves that she is just about sittng on her own.

All the babies are growing so fast we are asking parents to go through their childs chothes because many are to small now and we would like ones that fit.

The Waabooz teachers are very happy to see the children be with us as much as possible with all the sicknesses we do understand absentances but please remember to call everyday you are not going to be here so you will not be marked a no call no show.

We would also like you to know what a great job you are doing and how happy we are to be working with you and your family.

THANK YOU FOR ALL YOU DO.... MERRY CHRISTMAS

Waabooz

WALTER

AVERY

NIIGANI

SAMARA

AMIK NEWSLETTER

Shhhh, we have been working hard on items to surprise our parents for Xmas

Wiiwakwaaan yo''ow (This is a hat)

Minjikaawan wa'aw (This is a mitten)

Minjikaawanag ogow (These are mittens)

Wa' aw gizis (Freezing moon)

I want to wish Henry Mino-dibishkaa-mino-niizh.

We are working on helping to get dressed, like getting them to put arms in jackets, putting hats and mittens on. This gives them the great self-esteem and accomplishment.

We will be going outside weather permitting, so they need snowpants, jackets, hats, mittens, and extra clothes.

I want to say a big chi-miigwech to Sheena for her help, and all the staff who has helped me be a single teacher (you know who you are): They say it takes a village to raise a child….how true!

Have a great vacation with families and friends, I know I will. Miigwech ᐧᐣ all our parents for you help with transitions and parent conference.

Teresa

Makwa Room

Wow, time is flying by! We can't believe that it is already December! We have been working really hard at doing things for ourselves! Parents, please keep up the great work!!!! The weather is turning colder so, please make sure that your child has extra clothes and is dressed appropriate for the weather. We go outside on a daily basis. During the month of December we will be working on cutting, shapes, matching, emotions and colors.

Here is a look into your child's favorite activity:

Zaiden- likes play with the light table
Maylean- likes to put Mr. Potato Head together
Shaun- likes ride bikes up and down the ramp
Jose- likes playing with the trucks
Charlotte- likes to make food for people
Robert- likes get rides on the back of a bike
Jacob- likes to play with the costumes
Caleb- likes to listen to Thomas and Friends story

Dates to Remember for December:
ECC Party December 20th
Winter Break December 23- January 6th ECC Closed

Miigwech to all you parents for attending Parent/Teacher Conferences! We really appreciate it! Keep up all the good work you do with your child! Remember you are your child's first teacher.

Ms. Jamie & Ms. Amber

MANIDOO-GIIZISOONS
LITTLE SPIRIT MOON

Esiban Abiwin

KAREN AND NADINE

SPECIAL POINTS OF INTEREST:

- **November News**
- **Lesson Planning**
- **School Closing**
- **Social Skills**

What we are doing...

Manuel: Likes to go outside.

Bella likes to cut paper.

Brandy likes to play in the water.

Leiam likes to build with blocks.

Makoons likes to make crafts.

Jaxin likes to sing the weather song.

Kenyon likes to ride the bike.

Nathan likes to play in the sand.

Every morning when we do our attendance we ask in ojiwemowin if the children are here. **ALL** the children are able to answer "I'm here" — omaa indaayaa. They are really beginning to know more and more of the ojibwe language. We are so proud of them and all our parents for using the language daily!

Chi Miigwech!!!!

Definition

When teachers talk about social skills we are talking about managing emotions, showing kindness and empathy for others. Identifying his/her own feelings, cooperative play, sharing and more. Teachers will let you know exactly what they are looking at or for to help this child gain this skill.

December...

For the month of December we will focus on the holiday season. We will work on giving, sharing , turn taking, helping each other and more. We will also work on many crafts, singing songs, and reading lots of seasonal books. We are so looking forward to this month.

We will be **CLOSED** December 23rd thru Jan 3rd, 2014.

ECC Holiday Party:

Friday, December 20th

Migizi News

We were very sorry to see Ms. Katy leave our room to purse a passion of hers. She taught us many valuable things while she was here and everyone misses her greatly. We are very pleased to have Rosie in our classroom the first couple hours every morning. She is helping us learn Ojibwemowin.

We will soon be getting a different teacher in our class and we will break them in with a smile on our faces and big hugs. A huge Miigwech to anyone and everyone for their help in the classroom. Due to the shortage of a teacher the Migizi Parent-Teacher conferences will be later. Hopefully we can meet in 2 weeks so keep watch of the notices sent home.

We have been learning about the weather changing and all the different type of clothes we need to wear and why. Please remember the children need warm clothes with their names inside.

We also have been working hard on listening, focusing, and keeping our bodies calm. The safety rules we have learned are "Never touch a Gun!" Officer Kyle came to visit the classroom and speak to the children about gun safety.

With Thanksgiving around the corner we have been making a lot of turkey stuff and talking about what we are "Thankful" for.

Miigwech for calling us every morning if your child is not coming to school that day. This really helps us plan for the day and filling all the needed forms. *Ms. Diann*

Mashkodebizhiki

Boozhoo! It is that time of year again when the weather turns bitterly cold and the kids want to be outside all the time. Please remember to send appropriate gear to school so your child can get the most out of their outdoor experience. Snow pants, hats, warm jackets, winter boots and warm gloves are all necessary for your child to be comfortable outside. Also, remember to check on their extra clothes. There are many times that pants and socks get really wet from the snow and the kids are much more comfortable when they can change.

It is also that time of year when all kids can think about is what they are going to get for Christmas. They get so stuck on thinking about what they want they forget to think of what others may want or need. We are sure you may think they are too young to understand but you would be surprised at how giving and thoughtful kids this age naturally are. This year, instead of focusing on what the kids want given to them, we are going to focus on what they can do for others. Our days leading up to Christmas break will be full of doing and making things for people other than ourselves (of course there will be a few snacks for us to eat).

A few of our "giving" activities will be making a snack for another class, making gifts for family and friends, a toy drive (no money involved), and our yearly trip to the Northern Lights Rehabilitation Center. The residents love to have the kids come and sing.

As with everything we do we welcome any thoughts or ideas on how to make this season of giving a great one. We are also inviting all parents to attend the trip to the rehabilitation center. Please give us a call no later than December 13th so we can make transportation arrangements.

DON'T FORGET...the ECC Christmas party is on Friday December 20th. School will be closed starting the 23rd of December and will resume the 6th of January. We hope you enjoy the time with your child and remember that it isn't how much money you spend or how many gifts are under the tree but how many special memories are made!!

Ms. J and Ms. Jenn

Ma'iingan Room

What's Going On In The Ma'iingan Room

Biiboon time is coming! The weather is getting colder which means we need our hats, gloves, winter boots, snow pants and warm jackets at school everyday. We take our kids out daily to play and explore our natural learning environment and playground keeping in mind weather permitting. So having our warm clothing available so we keep our kids warm and safe is very much appreciated. We would like to remind all of our parents, caregivers, and family members that our school day begins at 8am and ends at 2pm. We love to have all of our children to attend school with us everyday so its super important that we keep our good attendance record going. We encourage all family members to come join our classroom to visit and check out what we do all day .

The teachers and the children would love to have any family members visit our classroom for breakfast, lunch or any part our day. We are very busy throughout our day and we are learning a lot about who we are, building trust, developing friendships, turn taking, following directions, learning shapes, counting numbers, letter recognition, number recognition, name recognition, ojibwe words and phrases, and much more. Our classroom is wrapping up giving thanks projects, and starting to work on some Christmas projects time is flying by ! Our children are very eager to learn new things that we have to move right along with them. They love to laugh and learn and Miigwetch to families for your overall cooperation!

What Ma'iingan Kids Are Doing

Tessla loves free choice time.
KJ plays with action figures.
Stormy loves to swing.
Ella enjoys playdough.
Lovey Jo enjoys shopping.
Aron loves to play with cars.
Phoenix enjoys sensory table.
Nakoden enjoys story board.
Owen shares new books.
Dillon likes to play trucks
Adriauna loves to be outside.
Ayden enjoys riding bikes.
Rowan enjoys building towers.
Braden loves to ride bikes.
Miranda enjoys taking care of babies.
Ozzaawa enjoys art projects

OJIBWE DAYS OF THE WEEK

Nitam anokii giizhigad
Niizho giizhigad
Aabitose
Niiyo giizhigad
Naano giizhigad
Gizlibiigisaginige giizhigad
Anama'e giizhigad

Help each other grow with Ojibwemowin!!

Ojibwe Numbers

Bezhig
Niizh
Niswi
Niiwin
Naanan
Ningodwaaswi
Niizhwaaswi
Izhwaaswi
Zhaangaswi
Midaaswi

ECC Holiday Party

Friday, December 20th

10:00am

Red Cliff Youth Center

Join us for a special gathering, visit from santa, and feast!

**Please bring three non-perishable items
(will be donated to Red Cliff food shelf)
for an entry into a raffle!!

Healthy Cooking with Kids

Wednesday, December 11th 5:00pm @ The ECC

Reasons to cook with kids:

- Introduces new foods
- Increases food knowledge
- Improves vocabulary/literacy
- Teaches mathematical concepts
- Teaches life skills
- Increases self esteem
- Continues family traditions

***Cook with your preschooler!**
***Learn from eachother**
***Doorprizes**

UW Extension
University of Wisconsin–Extension

Notice to ECC Families

The ECC will be <u>CLOSED</u>

Thursday (January 23rd)
Friday (January 24th)
Monday (January 27th)

for an Ojibwe Language Training event with Dr. Greymorning.

We apologize for any inconvenience! This training will assist our staff with improving our Ojibwe Language!!

DECEMBER 2013

WITC - Red Cliff GED/HSED & Adult Education Schedule

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4 Class Today 10:00-1:00	5 *GED Testing Today 12:30-5:00 pm*	6	7
8	9	10	11 Last Day of Class Today 10:00-1:00	12 *GED Testing Today 5:00-8:30 pm*	13	14
15	16	17	18	19	20	21
22	23	24	25 Merry Christmas	26	27	28
29	30	31				

NO GED or Adult Education Classes from Dec.18, 2013 to Jan. 8, 2014

Please Contact & Register with Sue Hopkins Before Official GED Testing at WITC Ashland Campus
CALL 715-682-4591 Ext. 3118 - Sue Hopkins or Ext. 3430 - Theresa Ottman

Dates to Remember

Dec. 4th: Class at Red Cliff 10:00-1:00 pm

Dec. 5th: GED Testing 12:30-5:00 pm in Ashland

Dec. 11th: Last Day of Class at Red Cliff for Fall 10:00-1:00 pm

Dec. 12th: Last GED Testing 5:00-8:30 pm in Ashland

NO CLASS FROM Dec. 18, 2013-Jan 8, 2014

Jan. 15, 2014: Spring Semester Starts Wed. 10:00-1:00 pm

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13-14
Bayfield Middle School
HONOR ROLL
1st Quarter

HIGH HONOR ROLL

6th

Dahl, Harleigh M
Garramone, Olivia G
Gordon, Janelle M
Hagen, Olivia G
Hansen, Jamee C
Kahite, Victoria R
Kriner-Woodworth, Emily
Panek, Sophia E
Rama, Michael
Tutor, Morgan C

7th

Basina, Faith
Cadotte, Tatum
Garramone, Giovanni
Gordon, Vennessa R
Hanson-Milligan, Shania D
Nelson, Russell A
Nordin, Leo M
Schuppe, Aurora J

8th

Beaulieu-Newago, Joslyn R
Deragon, Savannah G
Hauser, Alyssa L
LaPointe, James K
Ludwig, Chandria N
McCafferty, Keegan S
Mertig, Torrie A
Nelson, Matthew P
Newago, Joseph M
Olby, Caitlin M
Panek, Bazile V
Thiel, Emma L

13-14
Bayfield Middle School
HONOR ROLL
1st Quarter

REGULAR HONOR ROLL

6th

Barningham, Madosin D
Basina, Melissa R
Bressler, Maleyna J
Chapman, Joseph D
Defoe, Talon F
Edwards, Burkhart G
Hoopman, Elizabeth A
LaFernier, Dusty E
Livingston, Lavander R
Lozano, Joshuwa S
McCafferty, Quinn S
Simmons, Miquetan S
Thomas, Leah M
Weber, Adam R

7th

Armagost, Robin L
Cadotte, Alexis H
LaGrew, Derek J
Montgomery, Maya
Soulier, Gavin J
Thornberry, Benjamin D

8th

Bressette, Lindsay
Cadotte, Bailey P
Cadotte, Dakota S
Defoe, Tyrrell R
Deragon, Destiny A
Duffy, Taryn R
Gordon, Dalton S
Gordon, Frances E
Hansen, Jenna B
LaFernier, Chantal R
Lozano, Brittney N
Schelvan, Mason R
Thomas, Christopher B

13-14
Bayfield High School
Honor Roll
1st Quarter

HIGH HONOR ROLL

9th

Basley, Justine N
Baxter, Cora W
Doering, Oakley H
Keith, Peyton N
Peterson, Yrsala A

10th

Benton, Elle M
Brown, Alex R
Gordon, August S
Jeffords, Eric T

11th

Defoe, Aubrey N
Flores, Christian C
Jeffords, Kevin J
Krisik, Jeffery R
Leask, Kevin J

12th

Cadotte, Tristen L
Hoopman, Ellie L
Hoopman, Emily L
Wilson, Ever M

13-14
Bayfield High School
Honor Roll
1st Quarter

REGULAR HONOR ROLL

9th

Barri, Nell K
Dilworth, Caitlyn J
Flores, Austin A
Hunt, Megan M
Johnson, Abigail R
Krisik, Savannah A
Peltonen, Amber T

10th

LaPointe, Madeline R
Newago, Arianna M
Soulier, Brendan L

11th

Grant, Searra M
Hintz-Knopf, Kaytlin M
McCarthy, Catherine C
Montgomery, Thomas J
Schultz, Lee E
Wachsmuth, Michael S

12th

Andrews, Jesse D
Basina, Brandon L
Basley, Russell A
Cadotte, Jonathon J
Defoe, Brady S
Kent, Becca J
Schultz, Anthony W
Shrider, Isaac J
Wachsmuth, Tashina M

Bayfield Elementary
Honor Roll
13-14

4th Grade Honor Roll

Amelia Bernal
Carl Butterfield
Kylie Curran
Forest Gordon
Madison Gordon
LeAngelo LaPointe
Emily Marshall

5th Grade Honor Roll

Vincent Bresette
Nicholas Dietrich
Tyler Dietrich
Dallas Flynn
Alexia LaGrew
Dayton Milligan
Bailen Pounder
Patrick Pounder
Kenneth Ray

4th Grade High Honors

Lennox Birkholz-LaPointe
Layla Boyd
Leora DePerry
Daunte Gordon
Johnathan Gordon
Kyan Kraus
Gavin Marx
Katy Peterson
Allison Rogers
Lanie Willoughby

5th Grade High Honors

Payton Boyd
Simon Claremboux
Isabelle Cornelius
Autumn Gordon
Wyatt Hoopman
Amelia Johnson
Andrea LaGrew
Cameron LaGrew
Philip LaPointe
Carver Noteboom
Jayda Schlender
Greta Thiel

LaPointe
Honor Roll
13-14

4th Grade Honor Roll

Isaac Boone

4th Grade High Honors

5th Grade Honor Roll

5th Grade High Honors

Calendar Work

Aaniin endaso biboonagak?	What year is it?
Niizho midaaswaak ashi niswi!	2013!
Aaniin izhinikaazod wa'aw giizis?	What is the name of this moon?
Binaakwe giizis!	Leaves are falling moon!
Aaniin enangizod wa'aw giizis?	What is today's date?
Niizhtana ashi ishwaaswi!	28
Aaniin ezhi giizhigak noongom?	What is the name of today?

Nitam anokii giizhigad – Monday

Niizho giizhigad – Tuesday

Aabitose – Wednesday

Niiyo giizhigad – Thursday

Naano giizhigad - Friday

Red Cliff Early Childhood Center Names of the Months

Gichimanidoo Giizis	Great Spirit Moon	January
Namebini Giizis	Sucker Spawning Moon	February
Onaabani Giizis	Crust on the Snow Moon	March
Iskigamizige Giizis	Map Sap Boiling Moon	April
Waabigwani Giizis	Flowering Moon	May
Ode'imini Giizis	Strawberry Moon	June
Aabita Niibino Giizis	Half Summer Moon	July
Miini Giizis	Blueberry Moon	August
Waatebagaa Giizis	Leaves Changing Color Moon	September
Binaakwe Giizis	Leaves Falling Moon	October
Gashkadino Giizis	Freezing Moon	November
Manidoo Giizisoons	Little Spirit Moon	December

SCHOOL DISTRICT *of* BAYFIELD

November 7, 2013

Rose Gurnoe-Soulier
Tribal Chairwoman
Red Cliff Band of the Lake Superior Chippewas
88385 Pike Road, HWY 13
Bayfield, WI 54814

Dear Chairwoman Gurnoe-Soulier:

I hope this letter finds you well. The purpose of this letter is to provide a report identifying where Impact Aid funds were spent the previous year and how Red Cliff Tribal children have benefited from these funds. This report is done in accordance with the Red Cliff Nation – Bayfield School District Memorandum of Understanding dated April 5, 2012, Section I (d).

Impact Aid funds are intended by law to be treated in the same manner as local tax revenue and are used to support the School District's work of providing the best possible educational experience for all of the children in the School District of Bayfield. The School District of Bayfield uses Impact Aid to fund expenditures during the budget year it is received.

The School District of Bayfield received $1,478,693 in Impact Aid in 2012-13. A small portion of the Impact Aid funds received in Bayfield were earmarked specifically to support children with disabilities. The other portion of the Impact Aid money became part of the District's general fund.

The Wisconsin Department of Public Instruction's most recent figures show the cost of instruction in the School District of Bayfield at $16,827 per student. Based on this figure, the 2012-13 cost of instruction for School District of Bayfield students residing on Indian Trust/Treaty land was approximately $4,500,000 with Impact Aid dollars being used to help offset those costs.

Red Cliff Tribal children have benefited from Impact Aid expenditures in numerous ways as these funds were used to support instruction. A wide variety of educational resource materials are used to support learning in all grades in the School District of Bayfield. They are powerful tools for learning and help students meet outcomes and benchmarks. These materials help facilitate good teaching and learning practices in the classroom.

Technology will play an ever expanding role in the lives of students as they grow into adulthood. Technology is a powerful tool for teaching and learning. The District expanded its amount of computers as well as other technology tools which provides students with greater access to technology. Teachers have incorporated technology into learning experiences at the elementary, middle school and high school areas. This engaging educational medium supports high quality learning experiences for students.

300 North Fourth Street
Bayfield, Wisconsin 54814

Dr. David Aslyn, District Administrator
Scott Stralka, K-12 Principal
Sandra J. Raspotnik, Director of Pupil Services
Jeffrey Gordon, Dean of Students

715 779 3201 Ext. 101
715 779 3201 Ext. 141
715 779-3201 Ext. 103
715 779 3201 Ext. 405
FAX 715 779 5268

Special Education services support the learning of children with a wide range of disabilities. These services help to level the playing field for students with disabilities by providing the educational and behavioral modification and accommodations needed to help them to experience success in school.

Summer school provides learning experiences for children after the school year has ended. During summer school students can earn credits toward graduation, reinforce academic skills in key core areas, and explore new learning experiences through enrichment activities.

Professional training for staff is a key component supporting students in having successful school experiences. Major training areas of focus have been Response to Intervention (RTI), Positive Behavior Intervention and Supports (PBIS), and curriculum alignment. The training has been undertaken with the intent of helping to improve student achievement and to create a school climate that is safe, respectful and positive for everyone.

Staff salaries are a significant expenditure in all school districts. The people that work in operational areas listed above provide important services each day. All of these efforts are oriented toward providing students with a positive and successful school experience. Maintaining a quality staff that possesses required credentials, certifications and training is a high priority in the School District. The Native American Language, Culture and History and Home-School Liaison positions are examples of positions that are supported by the District's general fund.

Please don't hesitate to contact me if you have questions about this report.

Sincerely,

David Aslyn, EdD
District Administrator

CF:
School Board Members

300 North Fourth Street
Bayfield, Wisconsin 54814

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Dental Abscess

A dental abscess can begin as a tooth infection or cavity. The cause of these infections is direct growth of the bacteria from an existing cavity into the soft tissues and bones of the face and neck.

An infected tooth that has not received appropriate dental care can cause a dental abscess to form. Poor oral hygiene, (such as not brushing and flossing properly or often enough) can cause cavities to form in your teeth. The infection then may spread to the gums and adjacent areas and become a painful dental abscess.

Symptoms of a dental abscess typically include pain, swelling, redness of gum and or face, and a bump or pimple on the gum above the tooth. With children, notice if the child is not eating or drinking normally or if the child complains of pain or tenderness. With an advanced infection, nausea, vomiting, fever, chills and diarrhea can occur. A tooth abscess can be life threatening if not treated.

Call your dentist or healthcare provider if you notice any of the above symptoms with your child.

ForwardHealth
Wisconsin serving you

Member Update
June 2013

Spanish — Si necesita ayuda para traducir o entender este texto, por favor llame al teléfono 1-800-362-3002 (V/TTY).
Russian — Если вам не всё понятно в этом документе, позвоните по телефону 1-800-362-3002 (V/TTY).
Hmong — Yog xav tau kev pab txhais cov ntaub ntawv no kom koj totaub, hu rau 1-800-362-3002 (V/TTY).
Laotian — ເພື່ອຊ່ວຍໃນການແປ ຫລືເຂົ້າໃຈເນື້ອຫານີ້, ກະລຸນາໂທຣະສັບຫາ 1-800-362-3002 (V/TTY).

Affected Programs: BadgerCare Plus Standard Plan, BadgerCare Plus Benchmark Plan, Medicaid
To: Members

Your New Non-emergency Medical Transportation Manager

Wisconsin Medicaid and BadgerCare Plus has a new non-emergency medical transportation manager, Medical Transportation Management Inc. (MTM Inc.) As of August 1, 2013, MTM Inc. will replace the current transportation manager, LogistiCare, LLC.

If you are eligible to get non-emergency medical transportation (rides) through LogistiCare, you will be eligible to get rides through MTM Inc. The reservation phone number for rides **will remain the same** with the new manager, MTM Inc. You should continue to call the current reservation phone number at 1-866-907-1493 (or TTY 1-800-855-2880) to schedule rides with MTM Inc. to appointments for covered services. See the Attachment of this *ForwardHealth Update* for all of MTM Inc.'s contact information.

You should read this *Update* carefully because some information is new or has changed. **All information in this *Update* is for rides on and after August 1, 2013.**

As the non-emergency medical transportation manager, MTM Inc. schedules and pays for rides to covered Medicaid and BadgerCare Plus appointments if you have no other way to get a ride to your appointment. Non-emergency medical transportation is a public transportation and shared ride service. Rides can include public transportation (such as a city bus), rides in specialized medical vehicles, or rides in other types of vehicles depending on your medical and transportation needs. If public transportation is not available, you will not be required to take it.

Information about Medicaid and BadgerCare Plus non-emergency medical transportation can also be found online at *www.dhs.wisconsin.gov/badgercareplus/NEMT/index.htm.*

This change in transportation managers does NOT change your enrollment or benefits for Wisconsin Medicaid or BadgerCare Plus.

This change in transportation managers does NOT affect emergency ambulance services. You should call 911 if you have an emergency.

Can I Get a Ride Through MTM Inc.?

You may be able to get a ride through MTM Inc. to your Wisconsin Medicaid or BadgerCare Plus covered appointment if you have no other way to get to your

appointment and you are enrolled in one of the following programs:

- Family Planning Only Services.
- The BadgerCare Plus Standard Plan.
- The BadgerCare Plus Benchmark Plan.
- The BadgerCare Plus Express Enrollment for Pregnant Women.
- Tuberculosis-Related Services-Only Benefit.
- Wisconsin Medicaid (including IRIS).

If you can drive yourself to your covered appointment or if a neighbor, friend, relative, or voluntary organization is able to give you a ride for free, you cannot get a ride through MTM Inc. MTM Inc. is required to follow federal and state law and can only schedule and pay for rides if you are not able to get a free ride.

Note: If you live in a nursing home and have not elected Hospice or are enrolled in Family Care, Family Care Partnership, or the Program of All-Inclusive Care for the Elderly (PACE), you cannot get rides through MTM Inc. You need to continue to get rides the way you do now.

Non-emergency rides are not covered if you are enrolled in one of the following programs:

- The BadgerCare Plus Core Plan.
- The BadgerCare Plus Basic Plan.
- SeniorCare.

If you are enrolled in the Core Plan or the Basic Plan *and* Family Planning Only Services, you can only get a ride to services covered under the Family Planning Only Services program.

What Type of Ride Can I Get?

If you are eligible to get a ride through MTM Inc. to your appointment, MTM Inc. is required by federal law to give you the least costly type of ride to get to your appointment based on your medical and transportation needs. MTM Inc. may pay for you to ride a bus to your appointment. (Please see below for when you may be required to ride a bus to your appointment).

If you have a car and are able to drive yourself to your appointment but cannot afford to pay for gas, you may contact MTM Inc. before you go to the appointment to see if you are eligible to be paid for gas.

If you cannot ride a bus and you are not able to use your own car, MTM Inc. will then schedule a ride with the best type of vehicle based on your medical and transportation needs. Rides may include a specialized medical vehicle or another type of vehicle. You may be required to share a ride with another rider during your trip to your appointment.

When Do I Need to Ride a Bus to My Appointment?

MTM Inc. will provide you transportation on a bus to get to your appointment if:

- You live within ½ mile of a bus stop,
- You are going to an appointment within ½ mile of a bus stop, and
- You do not meet any of the exceptions listed below.

You will not be required to ride a bus to your appointment if:

- You do not live within ½ mile of a bus stop,
- There is not a bus stop within ½ mile of your destination,
- You are unable to ride a bus or get to a bus stop because of a physical or mental health condition (for example, if you are going to a dialysis appointment). MTM Inc. will verify with your health care provider that you are medically unable to ride a bus,
- You are a parent or caregiver traveling with a member age 4 or under to his or her appointment,
- You are age 15 or under and are traveling alone, or
- You are age 70 or older and use a walker, crutches and/or a cane.

MTM Inc. will mail a bus ticket or pass to you before your scheduled appointment if you need to ride the bus.

What Information Do I Need When I Schedule a Ride?

You will need the following information when you schedule a ride:

- Your name, home address, and phone number.
- Your ForwardHealth member ID. (This is the list of 10 numbers on your ForwardHealth ID card.)
- The street address and the phone number where you want to be picked up.
- The name, phone number, address, and ZIP code of the health care provider you are seeing.
- The date and start time of your appointment.
- The end time of your appointment, if you know it.
- Any special ride needs, including if you need someone to ride with you.
- General reason for the appointment (check-up, eye appointment, etc.).

If you call to schedule a ride and you do not have all of this information, you may not be able to schedule your ride and may have to call MTM Inc. back. At the end of the call, MTM Inc. will give you information about your ride. If you are taking the bus, MTM Inc. will tell you how they will mail you your bus ticket or pass. If you are getting picked up, MTM Inc. will give you the name of the transportation provider who will be picking you up and let you know when to be ready for your ride.

How Do I Schedule a Ride with MTM Inc.?

MTM Inc. schedules and pays for both routine and urgent rides.

Scheduling Routine Rides

A routine ride is a ride to an appointment that does not require you to be seen right away, such as a yearly check-up or a vision exam. Most rides are considered routine.

You must schedule routine rides at least two business days before your appointment. You can schedule a routine ride by calling 1-866-907-1493 (or TTY 1-800-855-2880) Monday through Friday from 7:00 a.m. until 6:00 p.m. or by going online to *www.mtm-inc.net/wisconsin/*. (See below for how to schedule a ride online).

You can schedule your rides for the current month and the following month. If you do not schedule a routine ride two business days before an appointment, you may not be able to get a ride and you will need to reschedule your appointment. Holidays and weekends are not counted as business days. Business days include the day that you schedule the appointment but not the day of your appointment.

For example, if your appointment is on Wednesday, August 7, you must schedule a ride by 6:00 p.m. on Monday, August 5. If your appointment is on Monday, August 12, you must schedule a ride by 6:00 p.m. on Thursday, August 8, to allow for the weekend days.

If you have regularly scheduled appointments, you or your health care provider can contact MTM Inc. to schedule regularly recurring rides for up to three months at a time. If you have dialysis appointments, you or your health care provider can schedule regularly recurring rides for those appointments for six months at a time.

Online Requests

You can schedule routine and regularly occurring rides online at *www.mtm-inc.net/wisconsin/*. You will need to schedule rides online at least two full business days before your appointment.

To schedule rides online, you will need to have already scheduled at least one ride with MTM Inc. by calling the reservation phone number and have a valid e-mail address. You will also need to create an account with a user name and password to schedule rides online. If you need help scheduling a ride online, you can call the reservation line at 1-866-907-1493.

After scheduling a ride online, you will be sent an e-mail confirmation. All confirmations of rides scheduled online will be sent only by e-mail to the e-mail address that you give during registration. If you scheduled a ride online and do not receive an e-mail confirmation within 24 hours, call the

MTM Inc. reservation line at 1-866-907-1493 as soon as possible. For more information about scheduling rides online, go to *www.mtm-inc.net/wisconsin/*.

Scheduling Urgent Rides

An urgent ride can be one of the following:

- A health care situation in which you do not need to call 911 for immediate help but you cannot wait two business days before seeing a health care provider.
- A hospital discharge.
- A ride to a follow-up appointment if the follow-up appointment is for the same health care issue and is scheduled within two days of your previous appointment.

A ride to an urgent appointment will be provided in three hours or less.

You can schedule an urgent ride by calling the reservation number at 1-866-907-1493 (or TTY 1-800-855-2880) 24 hours a day, seven days a week.

You can only schedule an urgent ride by phone. You cannot schedule an urgent ride online.

MTM Inc. may contact your health care provider to confirm the urgency of your appointment.

How Do I Cancel a Ride?

If you are not able to go to your appointment, you must cancel your ride with MTM Inc., no matter what type of ride was approved, including bus trips.

If you are getting picked up, you should try to cancel the ride at least 24 hours before the ride was scheduled to arrive. You may cancel a ride by calling the MTM Inc. reservation line at 1-866-907-1493 or by going online to *www.mtm-inc.net/wisconsin/*. If you do not cancel your rides, MTM Inc. may require you to call the reservation line to confirm all future rides the day before your appointment.

What Do I Need to Know About My Ride to My Appointment?

If you are required to ride a bus to your appointment, MTM Inc. can help you with information you need to ride the bus. MTM Inc. has resources available to help you find the right bus to get to your appointment and learn the general rules about riding the bus if you are not familiar with taking the bus.

If you are getting picked up by a vehicle, your transportation provider will call you the day before your appointment to confirm your ride, including the time you are scheduled to be picked up for your appointment. If you have not heard from your transportation provider the day before your scheduled pick-up time, you may call MTM Inc.'s reservation line at 1-866-907-1493 (or TTY 1-800-855-2880).

On the day of your appointment, you must be ready and watching for your ride at least 15 minutes before your scheduled pick up time. Generally, the driver will not come to your door. If you are more than 10 minutes late after your scheduled pick-up time, you may miss your ride. If you have been waiting for your ride for more than 15 minutes after your scheduled pick-up time, call MTM Inc.'s "Where's My Ride" number at 1-866-907-1494 to ask about your ride.

You will need to bring your own travel equipment for the ride, such as a car seat or a wheelchair. (See below for when you need to bring a car seat.)

When you get picked up, the driver will ask you to sign a driver log for the ride *to* your appointment. Make sure that you only sign the form once at this time. You will sign the form again when you are leaving your appointment.

What Do I Need to Know About My Ride After My Appointment?

Your ride will pick you up at the location where you were dropped off. If you are getting picked up by a vehicle after your appointment and you scheduled your ride with a return pick-up time, your ride should pick you up within 15 minutes after your scheduled pick-up time. If your appointment is

running late and you know you will not be ready for your pick-up at your scheduled time, call MTM Inc. to tell them your appointment is running late. If you have been waiting for your ride more than 15 minutes after your scheduled pick-up time, call MTM Inc.'s "Where's My Ride" number at 1-866-907-1494 to ask about your ride.

If you are getting picked up by a vehicle after your appointment and did not schedule a return pick-up time because you did not know when your appointment would be over, you can call MTM Inc.'s "Where's My Ride" number at 1-866-907-1494 after your appointment is over, and a ride will come to pick you up within one hour. If you have been waiting for longer than one hour, call MTM Inc.'s "Where's My Ride" number at 1-866-907-1494 to ask about your ride.

The driver will ask you to sign a driver log for the ride home after your appointment.

Do I Have a Copayment for Rides?

If your ride is by specialized medical vehicle, you will have a $1.00 copayment, unless you do not have copayments. You should not pay for anything else for the ride, such as gas or a tip.

Can Someone Ride with Me?

MTM Inc. is only allowed to schedule and pay for the following people to ride with you:

- A medically required escort, such as a family member or friend (your health care provider will determine your medical need).
- A parent/caregiver if the member is a minor.

If you are a parent getting a ride to your appointment, MTM Inc. is not allowed by federal law to schedule and pay for your children to ride along unless they also have an appointment.

If you take your own car, you may take additional passengers with you. If you ride the bus, additional passengers may go along, but they must pay their own bus fare.

What Are the Policies for Minors Traveling Alone to Their Appointments?

Members age 17 and younger are minors. All reservations for minors traveling to a covered appointment must be made by an adult. Minors usually need a parent or caretaker to go with them on their ride. The parent or caretaker is responsible for the minor for the whole trip and at the appointment.

Some exceptions can be made to allow a minor to ride alone if a parent or legal guardian signs a consent form or if the minor is age 16 or older. Consent forms can be requested from MTM Inc. by calling the reservation line at 1-866-907-1493 or by going online to *www.mtm-inc.net/wisconsin/*.

The following minors may travel without a parent or caretaker:

- Minors age 16 – 17 years old when traveling by bus or a vehicle.
- Minors age 12 – 15 years old with a signed consent form on file with MTM Inc. when traveling by a vehicle only.
- Minors age 4 – 11 years old with a signed consent form on file with MTM Inc. when traveling by a vehicle only with at least one other child to the same day treatment program.

Do I Need a Car Seat or Booster Seat for My Child?

Parents or caretakers *must* provide car seats or booster seats for the ride. Car seats are required for children until they are at least age 4 and 40 pounds. Booster seats are required for children up until the child reaches one of the following:

- The child is 8 years old.
- The child weighs 80 pounds.
- The child is 4 feet, 9 inches tall.

If you do not have a car seat or booster seat at the time of your ride for any children who need them, you will not be able to take your ride.

Can I Make Extra Stops?

Extra stops will only be allowed for covered health care services, like an extra stop at the pharmacy to pick up a prescription on the way home from your appointment.

If you are getting a ride in a vehicle, all extra stops must be approved by MTM Inc. ahead of time. You must call MTM Inc. to request an extra stop before the stop is needed. The driver will not make any stops that are not approved.

What if I Need to Fill a Prescription or Pick Up Disposable Medical Supplies?

If you need to fill a prescription or pick up disposable medical supplies (DMS) following a covered appointment you should try to do so on the way back from your appointment if possible. In this case, you must call MTM Inc. to request a ride to the pharmacy or other location before you begin your trip back from your appointment. This may be done at any time before the trip to the pharmacy or other location, including while you are at your appointment. If the trip to the pharmacy or other location is not approved by MTM Inc., the stop will not be provided.

For example: if you need to pick up a prescription on your way home that your doctor prescribed for you at your appointment, you will need to call MTM Inc. to get approval for the stop before your ride comes to get you to take you home.

If you need to fill a prescription or pick up DMS and you do not have an appointment scheduled, your pharmacy may be able to mail you your prescription or DMS for free. You should contact your health care provider or pharmacist about this option.

If you cannot fill your prescription or pick up your DMS after a scheduled appointment and the pharmacy is unable to mail you your prescription or DMS for free, then MTM Inc. can schedule and pay for a ride to fill your prescription or pick up your DMS. MTM Inc. may pay for you to ride a bus. If you cannot ride a bus, MTM Inc. will then schedule the best type of ride based on your medical and transportation needs.

Note: Rides to pick-up, repair, or fit durable medical equipment (DME) and hearing aids are also covered and can be scheduled by calling the reservation line or using the online scheduling tool.

What if I Need a Ride to a Veterans Medical Facility?

MTM Inc. can schedule and pay for rides to a veterans facility for a Medicaid or BadgerCare Plus member who is a veteran if the medical service could be covered by Wisconsin Medicaid or BadgerCare Plus.

What Rules Must I Follow for a Ride?

You must follow the Wisconsin Medicaid, BadgerCare Plus, and MTM Inc. rules listed below for rides:

- You must schedule a routine ride at least two business days before your appointment.
- You must be ready and watching for your ride 15 minutes before your pick-up time.
- You must provide information about your pick-up place, drop-off place, and why you need the ride when scheduling a ride.
- You must contact MTM Inc. as soon as you know that you no longer need a scheduled ride, including if you were scheduled to ride the bus. You should contact MTM Inc. at least 24 hours before a scheduled ride, if possible, when you need to cancel your ride.
- You must be thoughtful of any other passengers you are required to share your ride with on the trip to your appointment.
- You cannot have alcohol, drugs, or any weapons in the vehicle.
- You must use your seatbelt.
- You must bring any travel equipment, such as a wheelchair or a car seat for a child.
- You cannot physically or verbally abuse other passengers or the driver.
- You cannot smoke, eat, or drink any beverage while in the vehicle.

What Rules Must Drivers and Provided Attendants Follow When Providing Rides?

Drivers and attendants who are provided by MTM Inc. when necessary for help in transport must follow the Wisconsin Medicaid, BadgerCare Plus, and MTM Inc. rules listed below when providing rides:

- All drivers and provided attendants must wear or have an easy-to-read official company ID badge
- The driver's vehicle must be marked with the company name.
- Drivers and provided attendants cannot use or be under the influence of alcohol, narcotics, illegal drugs, or other drugs.
- Drivers and provided attendants must not smoke around you.
- Drivers cannot use a cell phone (unless it is in hands-free mode) or text while driving.
- Drivers and provided attendants cannot touch passengers, except as appropriate and necessary to help the passenger get into or out of the vehicle, into a seat and to secure their seatbelt, or to provide first aid or assistance.
- Drivers must open the vehicle door for you if you ask for their help.
- Drivers must help you get from the door of where you are picked up to the vehicle and to the main door of where you are going, if you ask for their help.
- Drivers and provided attendants must help you move and store wheelchairs and other medical equipment; however, drivers and provided attendants are not responsible for your personal items.

Can I Be Paid for My Meals or Get Overnight Stays?

If you get a ride through MTM Inc. and meet one of the following rules set up by Wisconsin Medicaid and BadgerCare Plus, you may be paid for your meals or get an overnight stay during your trip:

- You may be paid for one meal if you are traveling at least 100 miles one way to your appointment, and you are away for at least four hours.
- You may be paid for two meals if you are traveling at least 100 miles one way to your appointment and, you are away for at least eight hours.
- You may be paid for two meals and get one overnight stay if you are traveling at least 200 miles one way to your appointment, and you are away for at least eight hours.

If you are going to an appointment and need to be away from home for more than one night, you should talk with MTM Inc. about what meals you can get paid for and overnight stays you can get.

If you meet the rules, you will then speak with a Care Management Coordinator at MTM Inc. The Care Management Coordinator will explain how to be paid for meals or get an overnight stay.

An approved, medically required escort may get paid for the same meals and get the same overnight stays that you are allowed.

You should schedule your ride for trips that will need meals and overnight stays as soon as possible, but at least two business days in advance. You can ask MTM Inc. to schedule rides for any trips in the current month and the following month.

If you can get paid for meals, you will need to pay for your meals up front and then MTM Inc. will pay you once it is verified that you attended your appointment. MTM Inc. will pay you for the amount you spent on your meal or up to $10.00 per meal, whichever is less. You need to keep receipts for all your meals and send them to MTM Inc. with a trip log as instructed by the Care Management Coordinator. MTM Inc. will send you payment on a ComData Card that can be used like a debit card. If you are unable to pay for your meals at the time of your appointment, let MTM Inc. know when you schedule the ride.

MTM Inc. will not pay for any alcohol or recreational activities.

If you can get an overnight stay, MTM Inc. will arrange and pay for the overnight stay for you.

What if I Have a Complaint?

You or your chosen representative can make complaints about the service you received to MTM Inc. Complaints may be about things like having a hard time getting a ride, long waiting times, or drivers who are late to pick you up. MTM Inc. cannot help you with a problem until you file a complaint.

Note: If you want your chosen representative to be able to get information about your complaint and the response to it, you must give MTM Inc. permission to talk to them by completing a form that MTM Inc. will give you.

To file a complaint with MTM Inc., you or your chosen representative can do any of the following:

- Call MTM Inc.'s "We Care" number at 1-866-436-0457.
- Write to MTM Inc. at the following address:

  MTM Inc.
  Quality Management
  5117 W Terrace Dr
  Ste 400
  Madison WI 53718

- Log a complaint online at *www.mtm-inc.net/wisconsin/*.

When filing a complaint, you must have your ForwardHealth ID number, name, and date of service or the trip number.

After receiving your complaint, MTM Inc. will mail you a response within 10 business days. If your complaint is not resolved within 10 business days, MTM Inc. will mail you a final response within 30 business days of receiving your complaint. If MTM Inc. needs more time to resolve your complaint, MTM Inc. will mail you a letter telling you that they will resolve your complaint within 14 business days.

If you are unhappy with how your complaint was resolved, you can follow the continued complaint process described in the response letter.

What if I Was Denied a Transportation Service?

If you were denied a transportation service by MTM Inc. and you do not think it should have been denied, you have the right to appeal. For example, denials may include a denied ride or denied payment for meals or overnight stays.

To appeal a denied transportation service, you can either appeal to the MTM Inc. ombudsman or request a fair hearing directly from the Division of Hearings and Appeals. Appealing to the MTM Inc. ombudsman is optional, but may be the fastest way to resolve your denial because you may be able to come to an agreement without having to wait for a fair hearing with the Division of Hearing and Appeals to take place.

Appeals with the MTM Inc. Ombudsman

To appeal to the MTM Inc. ombudsman, you can do either of the following:

- Call the "We Care" number at 1-866-436-0457 and ask to file an appeal.
- Write to the following address:

  MTM Inc.
  Appeals Dept
  5117 W Terrace Dr
  Ste 400
  Madison WI 53718

If you request an appeal, MTM Inc. will send you a letter within 10 business days, even if the appeal is not resolved.

If the appeal was not resolved within 10 business days, MTM will send you a final letter after a decision has been made. The appeal process will not take more than 45 days.

If you are not satisfied with the decision of the MTM Inc. ombudsman, you can follow the continued appeal process described in the letter.

If you are still not satisfied, you may still request a fair hearing with the Division of Hearing and Appeals.

Fair Hearings

To request a fair hearing with the Division of Hearing and Appeals, complete the Request for Fair Hearing form and submit it to the following address:

Department of Administration
Division of Hearings and Appeals
PO Box 7875
Madison WI 53707-7875

You can get the Request for Fair Hearing form online at *dhs.wi.gov/em/customerhelp/* or by calling 1-608-266-3096.

If you choose to write a letter in place of the form, you must include the following:

- Your name.
- Your mailing address.
- A brief description of the problem.
- The name of the agency that took the action or denied the service.
- Your Social Security number.
- Your signature.

If you need help with asking for a fair hearing, please call 1-800-362-3002.

For more information about fair hearings, refer to your ForwardHealth Enrollment and Benefits handbook online at *dhs.wi.gov/em/customerhelp/* or call 1-800-362-3002.

What Are My Responsibilities Regarding Reporting Fraud and Following Program Rules?

Fraud means getting coverage or payments you know you should not get. It also means helping someone else get coverage or payments you know that person should not get. Anyone who commits fraud can be prosecuted.

You may be fined up to $10,000 and jailed for up to one year in a county jail, if you:

- Intentionally give false or incomplete information on your application for health care.
- Do not report a change that causes you to get more benefits than you should.
- Use another person's card to get services for yourself.
- Let someone else use your ForwardHealth card to get health care services or prescription drugs.

If you suspect that a Medicaid or BadgerCare Plus member or a provider, including a transportation provider, has committed or is committing fraud, call the Department of Health Services Inspector General toll-free at 1-877-865-3432 or by going online to *www.reportfraud.wisconsin.gov/*.

ATTACHMENT
Member Contact Information for Medical Transportation Management Inc.

Name	Contact Information	Purpose
Reservation phone number for scheduling rides	1-866-907-1493 1-800-855-2880 (TTY)	• Call this number to schedule a ride. • Routine rides can be scheduled Monday through Friday from 7:00 a.m. to 6:00 p.m. Routine rides must be scheduled at least two business days in advance. • Urgent rides can be scheduled 24 hours a day, seven days a week.
"Where's My Ride" phone number	1-866-907-1494	Call this number if you had a scheduled time for your ride and your ride is more than 15 minutes late picking you up or you need to schedule a return pick-up time.
"We Care" phone number	1-866-436-0457	Call this number if you have a complaint.
MTM Inc. Web site	*www.mtm-inc.net/wisconsin/*	Use this Web site to schedule and cancel routine and recurring rides, file complaints, and obtain forms. To schedule rides online, you will need to have already scheduled at least one ride by calling the reservation phone number and have a valid e-mail address.
Report Fraud	*www.reportfraud.wisconsin.gov/* 1-877-865-3432	Use this Web site or call this phone number if you suspect that someone is committing or has committed any form of fraud or abuse of a Wisconsin Department of Health Services program and would like to file a complaint.

Wisconsin Medicaid and BadgerCare Plus Mileage Reimbursement Trip Log

Mail or fax completed logs to:	MTM, Inc. Attention: Trip Logs 16 Hawk Ridge Dr. Lake St. Louis, MO 63367 Fax: 1-888-513-1610

Instructions:

- You must call MTM, Inc. prior your health care appointment to schedule a trip for mileage reimbursement.
- Use this form to ask for payment of mileage after your appointment. You cannot be paid, unless this form is completed and returned to MTM, Inc.
- You will receive a trip number when scheduling rides with MTM, Inc. You must write the trip number down on this log. You must submit the trip log within 60 days of the first trip listed on this form.
- Your health care provider must sign this log for each trip listed. Any health care provider at your appointment can sign this log. *This includes nurses, therapists, physician assistants, or nurse practitioners.* It does not have to be the doctor.
- If you need a log for future trips, you can make copies of both sides of this blank log, download a log at www.mtm-inc.net/Wisconsin, or call 1-866-907-1493 and ask MTM, Inc. to mail you a blank log.
- A one-way trip is from your home to your appointment. A round trip is from your home to your appointment and then back home. For trips with an extra stop enter each stop on a separate line, for example:
  - 1st trip- home to doctor
  - 2nd trip- doctor to pharmacy
  - 3rd trip- pharmacy to home
- If you do not have a log when you go to your appointment, ask your health care provider for a note on their facility letterhead. The note should show the date of appointment and have health care provider's signature to verify you were seen. Once you have a trip log, attach the note from your health care provider in place of a signature.
- If your log is not complete MTM, Inc. will not be able to process your payment and the log will be returned to you. Mileage cannot be paid unless you received an approval from MTM, Inc. before your covered service and get a trip number.
- Make a copy of your completed log and keep it for your records.
- **If you have questions about how to complete this form or the mileage reimbursement process, please call MTM, Inc. at 1-866-907-1493.**

Patient Info	First Name:	Last Name:		ForwardHealth ID #:
	Address:			Phone:
	City:		State:	Zip:
Payment Info	ComData Card payable to :	Relationship to member: ☐ Self ☐ Other:		Date of Birth:
	Address:			Phone:
	City:		State:	Zip:

This communication contains information that is confidential and is solely for the use of the intended recipient. It may contain information that is privileged and exempt from disclosure under applicable law. If you are not the intended recipient of this communication, please be advised that any disclosure, copying, distribution or unauthorized use of this communication is strictly prohibited. Please also notify MTM at 1-888-561-8747 and return the communication to the originating address.

Wisconsin Medicaid and BadgerCare Plus Mileage Reimbursement Trip Log

Mileage Reimbursement Trip Log

Trip #1	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health care Provider: ▶		
Trip #2	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health care Provider: ▶		
Trip #3	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health Care Provider: ▶		
Trip #4	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health Care Provider: ▶		
Trip #5	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health Care Provider: ▶		
Trip #6	Trip Number (Call MTM, Inc. for this prior to trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where trip started: ☐ Home ☐ Other:			Health Care Provider Phone:
	Health Care Provider Name:	Health Care Provider Address:		
	I certify that this patient was seen for a Medicaid/BadgerCare Plus covered service.	Signature & Title of Health care Provider: ▶		

I have completed this form and I verify that the information on this trip log is true.	Signature of Member, Parent/Guardian, or Representative: ▶

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Ashland/Bayfield Counties ■ University of Wisconsin-Extension

Basic Budgeting Workshop

Basic Budgeting is a free workshop offering tools to help people meet monthly household expenses, organize finances and build savings. Participants will create a monthly spending plan, explore saving strategies, discuss financial goals and identify community resources that can help.

Basic Budgeting is offered monthly at alternating locations in Ashland and Bayfield Counties. The next workshop will be held:

Monday, December 16
2:30-4:30 p.m.
Chequamegon Clinic
Meeting Room
415 Ellis Avenue, Ashland
Free & Open to the Public

REGISTRATION IS REQUIRED FOR THIS FREE WORKSHOP

To register or learn about upcoming workshops call:

Ashland County UW-Extension ■ 715-682-7017
or
Bayfield County UW-Extension ■ 715-373-6104 ext. 252

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Money $mart in Head Start

Issue 1

Setting Goals for Your Money

What's a goal?
A "goal" is a purpose. It's something to aim for. It's something that you want to be, or do, or have sometime in the future. A goal can point you in the direction you want to take. And when you meet your goal, you might feel so great that you set your next goal for bigger or better things!

How do I set goals?
A good place to start is thinking about what's important to you. Is there a family activity you'd like to do? Is there something you want to buy? A bill you'd like to pay off? A savings account you'd like to start?

You can set goals for your health, your habits, your work, your education, or for your family. Once you know your goal, you can decide how to move forward.

Strong goals have some things in common:
- They say *specifically* **what** you want
- They say **when** you want it
- They say **how** much you need
- And they are **written down** (think about carrying a goal card in your wallet or posting it on the refrigerator)

What if I have a BIG goal?
If your goal is a big one, think about the small steps that you can take to meet that goal. Big goals can be easier if you break them down into some smaller goals, to be tackled one at a time. As you meet each small step, you will be building confidence and a successful track record. Remember to celebrate your success!

What if my goal involves money?
Some goals take money. Maybe it's money to put towards savings or to put towards paying off bills. If you have a money goal, it's helpful to think about how long it might take to reach it because not many of us can come up with a pile of money overnight.

- Goals that you want to meet in the next few months are called ***short-term goals***. Short-term money goals might be saving for the holidays, getting new tires, opening a bank account, checking your credit report, or being ready for back-to-school shopping.

- ***Medium-term goals*** can take a year or two to meet. They take more patience and planning. Some medium-term money goals might be paying off a car, going back to school, saving for a trip, or finding a different place to live.

- If your money goal is going to take more than a couple of years, it is a ***long-term goal***. Long-term money goals could be finishing school, having a down payment on a house, having all credit paid in full, saving for a child's education, or saving for retirement.

What if I have more goals than money?
To get to your medium and long-term money goals, you may need to give up something you want right now so you can get something even better in the future. That's not easy to do!

Although it might feel good to have something new right away, it usually puts us further away from our longer-term and bigger goals.

TIP You are more likely to meet your goals when you work on only *one* or *two* at a time. More goals mean you have less money, less time, and less energy to put toward any of them.

How can I increase my chances for success?

Think back to something you needed or wanted in the past.

- How did you get there?
- What support did you need?
- What worked for you that helped you reach that goal?
- How did it feel when you got there?

To increase your chances for success, think about what worked for you in the past, what road blocks came up and how you handled them, and what you learned from that experience. You can use that "know-how" as you set a new goal.

Besides having too many goals at once, other reasons people might not meet their goals are:

- ▶ The goal is out of reach for the amount of time and money available: Maybe you just need a little extra time to come up with the money?
- ▶ Another goal took priority: You wanted to get a new TV, but then the car needed repairs so the TV has to wait a little longer.
- ▶ The goal is too broad or unclear: "Paying down debt" is a great idea. Now the next step is to come up with a plan to get started.

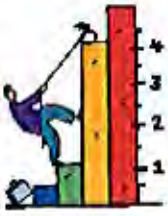
What else do I need to succeed?

Before you set your money goals, it's helpful talk about plans, dreams, and values with your family (including your children) and your friends. Just having a conversation with those who are close to you can help them understand what you want to do and why. Your friends and family are more likely to support you if they know why your goals are important to you. Plus, you are much more likely to reach your goals if you make them public by telling others about them.

As you include your children in this discussion, this may be a good time to talk with them about ***needs*** (things required to live like food, shelter, transportation) and ***wants*** (extras that make life more fun and comfortable, or things they'd like to have but that aren't necessary to survive). Needs and wants are different for every person and for every family. That's why it's so helpful to talk about them.

Knowing what's most important to all of you, and talking about it often, will help you and your children agree on common goals. With the support of your family and friends, it will be easier to work toward your goals and resist other ways to spend your money.

If you begin with the end in mind, you will have a great head start on the goals you want to reach!



"Money $mart in Head Start" is provided by UW-Extension Family Living as part of the Head Start Financial Literacy Project which is funded through the generous support of the Annie E. Casey Foundation. This issue was written by Ruth N. Schriefer, Family Living Agent, UW-Extension Iowa County and edited by Cyndy Jacoby, Peggy Olive and Jane Schaaf. Reviewed by J. Michael Collins, Family Financial Security Specialist, UW-Madison/Extension. Sources for this issue include NEFE HSFPP, 2007; FCS Money 2000, Michigan State University; Charting Your Course to Home Ownership, Louisiana State University, 2007; and Your Personal Journey to Financial Success, UW-Extension, 2008. (Revised 2011)

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Money $mart in Head Start

Issue 2

Spending Your Money

What does the word **"budget"** mean to you? Pinching your pennies, clenching your wallet, sitting at home in the dark and not having any fun? Or maybe you think "I don't have any money so why bother?"

Now think about the words **"spending plan"**. A spending plan is just that – a plan for using your money. A plan makes it easier for you to put your money where you want it to go instead of wondering where it went. Thinking about where you can spend your money is a lot more fun than thinking about all the places you can't spend it!

A spending plan is like a road map for your money. It gets you headed in the right direction for:

- Matching your spending to your income.
- Getting through those unexpected or emergency expenses.
- Reducing the need for credit.
- Saving for future goals.
- Talking about money with your family.

Where you choose to spend your money is very personal. The goal is to spend your money on those things that are the most important to you and your family. Here's how to get started on your own spending plan.

Step 1 – Figure out the **total current monthly income** for your family. This is how much money you have to work with all month.

Your household money might come from:

- "Take home" paycheck—after taxes
- Tips or side jobs
- Unemployment
- Child support
- Public assistance (like Food Share)
- Social Security or veteran's benefits

Step 2 – Write down **your total monthly expenses**. This means figuring out where your money goes.

When it comes to looking at our spending, sometimes people stop after Step 1. Many of us have that little voice in our head saying "do you really need that?" Or we give up because we figure we'll have more bills than money anyway. These are common feelings. It's still worth looking at your spending for a month just to see where you stand.

It can help to think about your monthly expenses by the types of bills you have:

- **Fixed expenses** are the same every month. It's easier to remember payments you make every month, such as rent or house payments, car payments, utility bills if you're on a budget plan, insurance, child care, or student loans.
- **Flexible expenses** change from month to month, but you know you'll spend some money on them. Think about food, gas, car repairs, doctor bills, habits, pets, diapers—well, you get the picture.
- Besides regular monthly expenses, most of us have **occasional expenses.** These are bills that may only come a few times a year: things like birthday and holiday gifts, your car registration or oil changes.

Occasional expenses can throw your monthly spending out of whack. When you can, it really helps to save a few dollars each month to cover those bills when they arrive. Having a few dollars tucked aside will help with an **unexpected** bill too!

TIP

Sometimes kids say "I want this" at the store. When you tell them "we don't have money" for what they want, they get confused when they see you spending money later at the checkout. It can be helpful to tell kids "We need our money for groceries and our home and other things we all enjoy."

If you have a hard time figuring out where your money goes, you may want to **track** your spending.

Tracking your spending can help you find spending leaks that you may have forgotten about during a busy month – DVD rentals, school expenses, eating out, maybe an extra tank of gas. People track their spending in all different ways.

Here are a few ideas for keeping track:

- **Write down the amount whenever you buy something.** You can write the purchase down in a notebook, on a calendar, or in a computer program.
- **Save all of the receipts** you get for a month. If you don't always get a receipt, make a note of the amount you spent.
- **Use your checking account register or monthly bank statement** to track all the checks and debits you have in a month and what the money was used for.
- **Try a free online budgeting program,** like www.thebeehive.org, where you enter your bills as you spend money. Programs like this help you to sort expenses into major spending areas like food, housing, car, kids, and adds up how much you are spending in each area every month.

However you keep track of your spending, you will have a good picture of where your money is going at the end of the month. That will help you make future decisions about your spending.

Step 3 – Add up your monthly income and spending. Writing it down helps you be more aware of your spending and more likely to stick to your plan.

If you have more money coming in than you're paying out, congratulations! You are on your way to building savings, paying off debt, or reaching a money goal.

If your expenses are higher than your income, here are a few ideas to think about:

Increase your income – Can you add a part-time job to bring in more money? Could you make some money from a hobby or skill that you have, like fixing cars or babysitting?

Reduce your spending – Look at the flexible expenses from your list first. Are there some things you buy that you would be willing to cut back on?

Look around your home – do you have anything to sell for a one-time source of cash? Maybe clothes that your kids have outgrown, DVDs you never watch, or other items you no longer use. Selling stuff can help you catch up on a bill, but won't help you balance your monthly spending and income over the long run.

If you find yourself falling behind on bills every month, call your UW-Extension Family Living Educator to talk over some of your options. You can also find a low-cost credit counselor at (800) 388-2227 or at www.debtadvice.org.

If you own your home and are having trouble keeping up with the mortgage, call the HOPE Hotline at 888-995-HOPE (4673).

"Money $mart in Head Start" is provided by UW-Extension Family Living as part of the Head Start Financial Literacy Project which is funded through the generous support of the Annie E. Casey Foundation. This issue was written by Ruth N. Schriefer, Family Living Agent, UW-Extension Iowa County and edited by Peggy Olive, Linda Olson, and Kristi Cutts. Reviewed by J. Michael Collins, Family Financial Security Specialist, UW-Madison/Extension. Sources for this issue include University of Wisconsin-Extension Managing Between Jobs, 2006; University of Idaho Extension Dollar Decision$, 2003; Pennsylvania State University Right on the Money, 2008; University of Illinois Extension, Getting Through Tough Financial Times, 2009. (Revised 2011)

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40TH ANNUAL SPRING POWWOW
March 22, 2014

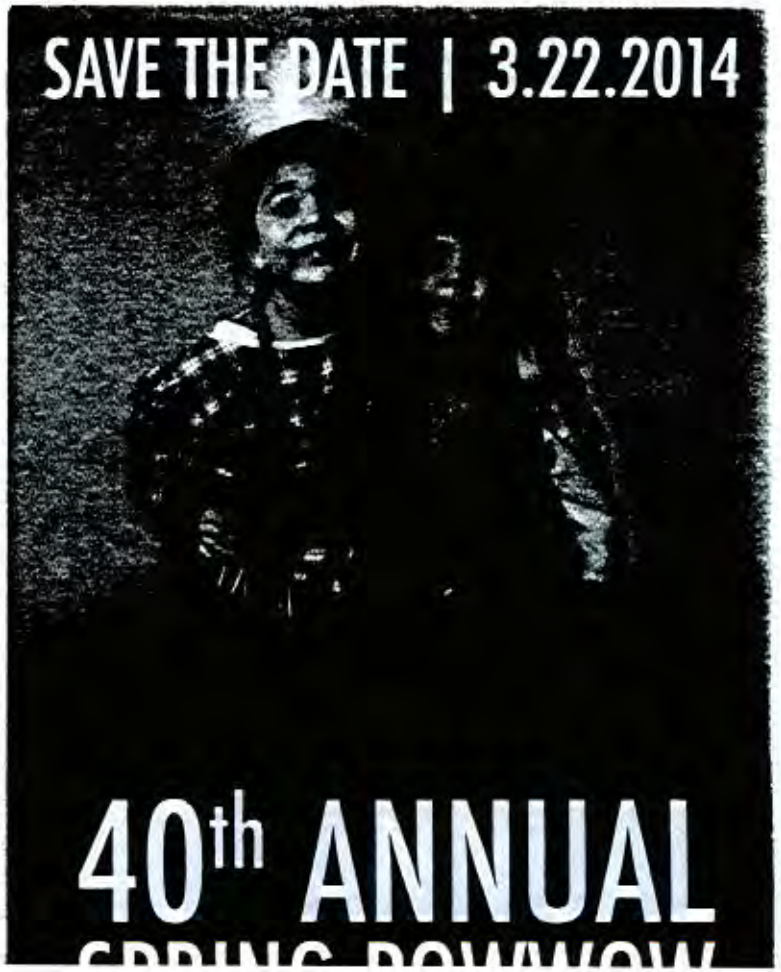
Grand Entries being at 1 & 7 p.m.,
Feast at 5 p.m. Vendors and drums welcome.
This event is free and open to the public.

NATIVE AMERICAN AWARENESS DAYS

Event topics include song and dance exhibitions, panel discussions, and cultural awareness events to be announced at a future date.

3/17: 6 p.m. Alvord
3/18: 6 p.m. Alvord
3/19: 10 a.m. and 1 p.m. Alvord
3/20: 6 p.m. Sigurd Olson Environmental Institue.

* The Native American Student Association and Native American Alumni Dinner and Social is on March 21st, 5:30 in the Alvord.



Gichi Manidoo Giizis
Traditional Pow Wow

Saturday January 11th 2014

Registration: 10am
Grand Entry: 1pm & 7pm
Feast at 5pm

Black Bear Casino Resort
Otter Creek Event Center
1785 Highway 210
Carlton, MN 55718

Hotel Reservations: 1-888-771-0777

Free Admission~Open to the Public~Alcohol & Drug Free Event

Click on link for more info: 13 Moons Ashiniswi giizisoog or go to www.fdlrez.com

Taking Care of the Land and Community

Tribal, State and Federal programs share information for land owners, producers, and vendors.

Vendor tables available $100 per table

For more information contact:

Nikki Crowe 218-878-7148

Linda Whitebird 218-878-7101

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Kinder Kritters

Toddler Program Series

First Tuesday of the month @ 10:30 a.m. - Northern Great Lakes Visitor Center

December 3rd: Fluffy, Furry, & in a Hurry!

Visit with some of the zoo's furriest critters! Learn what it's like to be a mammal and find out why they are always on the move.

January 7th: Nocturnal Animals

Discover why some animals stay away at night and what adaptations they have that help them to survive.

February 4th: Colorful Creatures

Take a close look and see how many colors can be found in the animal kingdom. Find out why these colors help them to survive.

March 4th: Winged Wonders

Ever wonder what it would be like to fly? Meet some of the zoo's best flyers and discover how and why they take to the skies.

April 1st: Awesome Adaptations

Fur, scales, spines and hard to find! Take a close look at unique animal features to discover how animals survive.

May 6th: Terrific Turtles

Meet a variety of turtles and tortoises and learn how these ancient reptiles have inhabited Earth over 200 million years!

LAKE SUPERIOR ZOO

These programs are free due to a donation by Lanny and Judy Neider

Northern Great Lakes VISITOR CENTER
Friends of the Center, Alliance, Ltd.

www.nglvc.org

Make Time to Talk

Language Building Tips for **Home-Based Child Care Providers**

We know that it's important to talk every day with each child, using the kind of talk that builds language and thinking skills. The phrase **MAKE TIME TO TALK** is to help you remember things you can do when talking to children to help them learn new words and how to use language to tell you their ideas and needs, and that helps them have fun with language.

M Mealtimes can be good times to talk with children.

A Ask questions that encourage the child to think—questions involving predicting things that might happen, using imagination, explaining why things happened in a particular way.

K Kneel or squat to be able to have eye contact with the child.

E Extend your conversation with the child. Conversations should go back and forth with each person responding to other speaker at least a few times.

T Tell stories to the children and ask them to tell you stories about their families and lives.

I Involve all of the children in the group in conversation every day. Talk with children about what they are making, ask about their play.

M Make connections between themes, books the class has read, recent classroom activities, and children's own play to help build children's understanding of word meanings.

E Expand on child's language by repeating it with extensions (adding descriptive words, using any words correctly that child used incorrectly), adding to or building on child's ideas.

T Two-way conversations are best. The child should be doing at least half the talking.

O One or more individual conversations with each child in the setting every day should be a goal.

T Texts such as books, posters, newspapers, and magazines provide things to talk about with children. Read them together, asking questions and discussing them as you go along.

A Act out stories with the children, re-using words from a book you read aloud with the children. Encourage them to retell the story with puppets, toys, and in their art.

L Language should include rich, varied words that you want the child to learn to understand and use.

K Keep the conversation going through questions and comments.

National Institute for Literacy

To place an order for free print copies or to download a PDF or HTML version of this sheet, please visit www.nifl.gov.

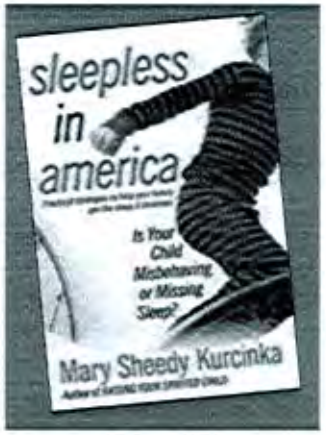
Make Time to Talk is based on the National Institute for Literacy publication Learning to Talk and Listen (2009), and the National Early Literacy Panel Report (2009). This publication was produced under National Institute for Literacy Contract No. ED-04-CO-0041 for RMC Research Corporation. The views expressed herein do not necessarily represent the policies of the National Institute for Literacy. No official endorsement by the National Institute for Literacy of any product, commodity, entity, or enterprise in this publication is intended or should be inferred.

Model Schedule

Children thrive when they are getting the sleep they need every day. The more consistent their schedule, the easier it is for them to slip into sleep. When their schedule varies more than 30 to 60 minutes, it creates jet lag and makes it harder for them to fall asleep and stay asleep. Try to maintain the same schedule 7 days a week.

Sample Schedule

If a child needs to wake up at:	**6:30 am**	**7:00 am**	**7:30 am**	**8:00 am**
Breakfast	7:00 am	7:30 am	8:00 am	8:30 am
Morning snack	9:30 am	10:00 am	10:00 am	10:30 am
Lunch	Noon	Noon	Noon	Noon
Snack	2:30 pm	2:30 pm	2:30 pm	2:30 pm
After, school activities				
Dinner	5:30 pm	5:30–6:00 pm	5:30–6:00 pm	5:30–6:00 pm
After, dinner activities				
Start bedtime routine for **kindergarten and grade 1**	6:15 pm	6:45 pm	7:15 pm	7:45 pm
Asleep kindergarten and grade 1	**7:00 pm**	**7:30 pm**	**8:00 pm**	**8:30 pm**
Start bedtime routine for **grades 2-5**	7:15 pm	7:45 pm	8:15 pm	9:00 pm
Asleep grades 2-5	**8:00 pm**	**8:30 pm**	**9:00 pm**	**9:30 pm**



DEVELOPED BY:

Mary Sheedy Kurcinka
Author of: *Sleepless in America* and *Raising Your Spirited Child*
www.parentchildhelp.com

and

Kim Mueske
School District 196 Teacher

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Parents of a successful student have a secret…

they protect their child's sleep.

www.parentchildhelp.com

Why Sleep Is Important

Research demonstrates that children who get more sleep:

- Have higher grade averages.
- Perform better on reasoning and mathematical skills.
- Have higher reading scores.
- Experience fewer accidents.
- Get along with others better.
- Focus.
- Get sick less frequently.
- Are less likely to be overweight.

How Much Sleep Do Children Need?

- Children 5 to 6 years of age need an average of 11 to 12 hours of sleep in a twenty-four hour period.
- Children 7 to 11 years of age need an average of 10 to 11 hours of sleep in a twenty-four hour period.
- Adults need an average of 8.25 hours of sleep in a twenty-four hour period.

You Know A Child Is NOT Getting Enough Sleep If He/She:

- Does not wake up on his own in the morning.
- Loses it over "little things".
- Experiences stomach or head aches.
- Is crabby, anxious, or uncooperative in the morning.
- Craves carbohydrates.
- Can't get along with others.
- Has trouble staying on task.
- Talks excessively.
- Is hyper – especially at bedtime.

You Know A Child IS Getting Enough Sleep If He/She:

- Is cooperative in the morning.
- Listens well.
- Stays focused on tasks.
- Can easily solve problems with you.
- Gets along well with others.
- Eats well at meals.
- Is able to cope with changes in routine or surprises.
- Is healthy.
- Falls asleep easily at night.

Power Rest

Power rest time is a daily part of most kindergarten classes. It is during sleep that children put into long term memory the things that they've learned. Power rest has also been shown to enhance attention, focus, impulse control and the ability to manage emotions. Power rest is so important that in Japan, even high school students and employees at Toyota headquarters are invited to nap during the lunch period.

On weekends consider a power nap right after lunch for 20-30 minutes. Every member of your family can benefit.

Children who don't wake up on their own in the morning need an earlier bedtime.

Tips For Bedtime:

- Have a regular routine each night (brushing teeth, books, songs and stories, visiting, back rub)
- Bedtime should be about the same time 7 days a week. (No more than an hour different on the weekends)
- If a child's bath excites him, avoid bathing at bedtime.
- No TV or computer in the bedroom
- Limit "screen time" (TV, video games, computer) to 30-60 minutes a day –No screen time in the evening before bed.
- Take time to connect at bedtime. A calm child falls asleep more easily and stays asleep.

Sleepless in America: Is This Child Misbehaving or Missing Sleep?

Published by: HarperCollins

By Mary Sheedy Kurcinka

www.parentchildhelp.com kurcinka@parentchildhelp.com

Sample schedules:

Age	Tiny toddler 12-18 months	Toddler 19-36 months	Preschooler 3-5	School age 6-12	Adolescent 13-19	Adult
Ave. sleep needs	14-15	13-15	11-12	10-11	9.25	8.25
Wake time	7:00	7:00	7:00	7:00	6:30	6:00
Breakfast	8:00	8:00	8:00	7:30	7:00	7:00
Activities	8-10:00	8-11	8:30-11:30	8:30-12:00	8:00-12:00	8:00-12:00
Nap	10:00-11:30					
Lunch	12:00	11:30	12:00	12:00	12:00	12:00
Nap	2:00-3:30	11:45-1:45	12:30-2:00	Power nap?*	Power nap?*	Power nap?*
Activities	3:30-5:00	2:00-5:00	2:00-5:00	12:30-5:00	12:30-5:00	12:30-5:00
Dinner	5:30	5:30	5:30	5:30	6:00	6:00
Activities	6:00-7:15	6:00-7:15	6:00-7:45	6:00-8:00	6:30-8:30	6:30-9:00
Bedtime routine starts	7:15	7:15	7:45	8:00	8:30	9:00
Asleep	8:00	8:00	8:30	9:00	9:15	9:45
Total sleep	14	13	12	10*	9.25	8.25

*Power nap is 20-30 minutes in length

*Younger school age will need closer to 11 hours of sleep – adjust sleep time to 8:00 PM

Feeding "Picky Eaters" Over the Holidays by Elisa Zied

We all know that feeding kids in a healthful way that takes into account their individual tastes and preferences can be a challenge at any time. But with increased entertaining, celebrating and traveling this time of year, the challenges can mount—especially for a child who is considered "picky" or who has (or is at risk for) a feeding disorder. Of course being out of a normal eating routine and being exposed to unfamiliar foods can turn an otherwise joyful holiday party or family gathering into a battleground. To prevent this, it's up to parents to find ways to help kids stay on track when it comes to eating so that they—and the entire family—can get the most joy out of the holiday season.

To help parents move in a better direction when it comes to feeding their kids this time of year—or at any time—I interviewed **Peter A. Girolami, PhD, Clinical Director** of the Pediatric Feeding Disorders Program at Kennedy Krieger Institute. Below are some highlights from our conversation.

EZ: What is the difference between a picky eater and a child with a feeding disorder? Are there any red flags parents need to look for?

PG: Many young children demonstrate eating behavior that can be considered "picky" including distinct food type or texture preferences and episodes of limited intake. Although for many children this is a perfectly normal phase of development, sometimes being picky develops into a more serious feeding problem (or disorder). In general, a child has a feeding disorder when he/she has significant difficulty consuming adequate nutrition by mouth. Feeding disorders are caused by a variety of factors including medical, developmental, psychosocial and environmental factors and they often leading to problematic feeding/eating behaviors. Feeding problems can contribute to poor weight gain, malnutrition and abnormal development when it comes to feeding skills. It can also cause a lot of disruption, especially during mealtimes, for the family.

EZ: Now that the holidays are here, parents of picky eaters may feel extra pressure when feeding their children with relatives and friends around. Should parents surrender to the situation and accept that all bets are off or should they still try to help their kids have better and more nutritious eating habits?

PG: Great question. Parents often report that they feel some pressure during the holidays and/or special events to get their kids to eat a well-balanced meal. I can relate. I come from a family where eating is one of the main activities of the holiday and for the most part we (the adults) probably eat too much. However, as both a parent and practitioner, I do not recommend using holiday dinners or special events as the setting to initiate the trying of new foods/textures or increase consumption. First, if you are having trouble with your child's picky eating and it's become a battle, it may be increasingly difficult to implement any plan with all the relatives sitting around the table adding their two cents and encouragement. If you have been using some strategies successfully and want to generalize them to the group gathering, that's great. But I'd suggest having an "exit" plan so that the holiday meal doesn't become all about children not eating their food.

EZ: You suggest offering kids who are picky/selective small portions. I, too, think this is a good rule of thumb for all kids, whether they're picky or not. Why do you think offering small portions is so important for kids?

PG: I once worked with a child who was reported to be very anxious about trying new foods so we prepared such a small bite of food that I was worried it would blow away. Eventually, we were able to increase the size of the bites of food and gradually introduce new foods using smaller bite sizes.

EZ: You also say decreasing texture and blending food can help. How so?

PG: Sometimes referred to as "sneaking food in," blending and mixing non-preferred foods into preferred foods can be an effective way to expose a child to new tastes and smell and open up the variety. Similar to the idea of smaller portions, start with small amounts that may not be detectable and gradually increase the ratio. This can also be applied to condiments. You

http://www.parents.com/blogs/food-scoop/2013/11/30/nutrition/feeding-picky-eaters-over-the-holidays/

may not get to 100% of the target food, but consumption of the target food(s) in smaller amounts may be enough to lay the foundation for future gains.

EZ: You're not a big fan of grazing, which is something so many kids—and parents—do. Why don't you recommend it for kids?

PG: I think it's important to limit grazing. It's difficult to get someone (including typical eaters) to try something new if they aren't hungry, especially if you're asking them to try something they report they don't like. In some more serious feeding situations, this may be difficult to apply because parents may feel that the only way to get in enough calories is to offer food/drink throughout the day. However, trying to set scheduled meals and limiting food in between is a strategy that could at least be tried (if it doesn't work, you can always go back to the old system) since it may contribute to hunger and encourage the child to eat the food that's offered.

EZ: You also recommend making kids part of the feeding process. What are your tips parents can use to do this?

PG: I'm a firm believer in modeling, sharing, and involving kids in eating and feeding as much as possible. There's something to be said about trying to set a good example for your child. If you're not eating the targeted foods, there's a good chance the child's exposure to the food may be more limited. Sometimes getting kids involved in the preparation of the food and cooking may also be associated with increased interest and squeezing in an extra bite or two.

EZ: Although many nutrition experts (present company included) have always urged parents to not use food as a reward, you encourage them to. Please explain.

PG: Some people are against providing some incentive to children to encourage them to try new foods/textures because they feel that children should intrinsically like food so they don't provide reinforcement for eating. However, many children have increased their variety by systematically being given access to something preferred contingent on trying something novel. If you think the issue is "you'll never know unless you try it" and exposure to new tastes and textures is important, then using a reward-based system to get them to try something new may be worth a shot. Keep in mind that for many children reinforcement can be faded out over time.

EZ: You encourage parents to be calm and patient when feeding kids—and I think that's great advice as it keeps mealtimes more pleasant and enjoyable. You also think it's important to have a plan and stick to it. Why is that so vital?

PG: It's important for kids to have some predictability, especially if trying new foods seem to be distressing to them. I encourage parents to try to avoid excessive coaxing, wheeling-dealing, and verbal battles. Typically, these strategies don't work and may make things worse. Getting kids to try new foods can be a long process. If parents do see some gains, they can then try to think about where they could be down the road if some of that progress continues on its current trajectory.

EZ: Finally, what should parents do if they suspect their child has a feeding disorder? Can you recommend any resources?

PG: Feeding problems are a source of great stress for parents because of the potential negative impact they may have on their child. Also, parents whose children have more severe problems often find it hard to relate or connect with other parents whose children's issues are more of the traditionally "picky" variety. Parents of children with severe feeding problems often report that they are given advice from "everyone under the sun" and provided with suggestions that they've already tried. Parents who have tried all kinds of strategies and have had limited success, or see that things have gotten worse, may need some extra specialized help with your problem, such as the Pediatric Feeding Disorders Program at the Kennedy Krieger Institute. An evaluation may be a good first start to determine if your child's problem meets the criteria of a feeding disorder. Generally, I would recommend finding a feeding clinic/program that encompasses a full team of professionals to rule out the variety of factors that may be associated with the onset and maintenance of the feeding problems. You also want to make sure that the feeding clinic/program has experience with the problems you're reporting and can discuss various outcomes—aka "success stories"—they've had with similar children.

http://www.parents.com/blogs/food-scoop/2013/11/30/nutrition/feeding-picky-eaters-over-the-holidays/

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Food Group Meal Planner

The easiest way to plan healthy meals is to serve at least one food from each of the five food groups. As you make your plan, check-off the food groups that are included to ensure balanced, nutritious meals. Don't forget that snacks and drinks can account for food group foods too!

Meal Plan

Saturday	☐ M ☐ V ☐ F ☐ G ☐ P
Friday	☐ M ☐ V ☐ F ☐ G ☐ P
Thursday	☐ M ☐ V ☐ F ☐ G ☐ P
Wednesday	☐ M ☐ V ☐ F ☐ G ☐ P
Tuesday	☐ M ☐ V ☐ F ☐ G ☐ P
Monday	☐ M ☐ V ☐ F ☐ G ☐ P
Sunday	☐ M ☐ V ☐ F ☐ G ☐ P

Grocery List

*Food Groups: M=Milk & Milk Products V=Vegetables F=Fruit G=Grains P=Meat & Beans

HealthyEating.org

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The SPD Foundation network is unique in that it covers the gamut for parents, therapists, educators, and all others interested in SPD. What a blessing! - **Carol S. Kranowitz, MA , author *The Out-of-Sync Child* and other books about SPD, editor-in-chief *SI Focus***

- What Sensory Processing Disorder looks like
- Causes of Sensory Processing Disorder
- Emotional and other impacts of Sensory Processing Disorder
- How Sensory Processing Disorder is treated

Sensory processing (sometimes called "sensory integration" or SI) is a term that refers to the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioral responses. Whether you are biting into a hamburger, riding a bicycle, or reading a book, your successful completion of the activity requires processing sensation or "sensory integration."

Sensory Processing Disorder (SPD, formerly known as "sensory integration dysfunction") is a condition that exists when sensory signals *don't* get organized into appropriate responses. Pioneering occupational therapist and neuroscientist A. Jean Ayres, PhD, likened SPD to a neurological "traffic jam" that prevents certain parts of the brain from receiving the information needed to interpret sensory information correctly. A person with SPD finds it difficult to process and act upon information received through the senses, which creates challenges in performing countless everyday tasks. Motor clumsiness, behavioral problems, anxiety, depression, school failure, and other impacts may result if the disorder is not treated effectively.

One study (Ahn, Miller, Milberger, McIntosh, 2004) shows that at least 1 in 20 children's daily lives is affected by SPD. Another research study by the Sensory Processing Disorder Scientific Work Group (Ben-Sasson, Carter, Briggs-Gowen, 2009) suggests that 1 in every 6 children experiences sensory symptoms that may be significant enough to affect aspects of everyday life functions. Symptoms of Sensory Processing Disorder, like those of most disorders, occur within a broad spectrum of severity. While most of us have occasional difficulties processing sensory information, for children and adults with SPD, these difficulties are *chronic*, and they *disrupt* everyday life.

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What Sensory Processing Disorder looks like

Sensory Processing Disorder can affect people in only one sense–for example, *just* touch or *just* sight or *just* movement–or in multiple senses. One person with SPD may over-respond to sensation and find clothing, physical contact, light, sound, food, or other sensory input to be unbearable. Another might under-respond and show little or no reaction to stimulation, even pain or extreme hot and cold. In children whose sensory processing of messages from the muscles and joints is impaired, posture and motor skills can be affected. These are the "floppy babies" who worry new parents and the kids who get called "klutz" and "spaz" on the playground. Still other children exhibit an appetite for sensation that is in perpetual overdrive. These kids often are misdiagnosed - and inappropriately medicated - for ADHD.

Sensory Processing Disorder is most commonly diagnosed in children, but people who reach adulthood without treatment also experience symptoms and continue to be affected by their inability to accurately and appropriately interpret sensory messages.

These "sensational adults" may have difficulty performing routines and activities involved in work, close relationships, and recreation. Because adults with SPD have struggled for most of their lives, they may also experience depression, underachievement, social isolation, and/or other secondary effects.

Sadly, misdiagnosis is common because many health care professionals are not trained to recognize sensory issues. The

Sensory Processing Disorder Foundation is dedicated to researching these issues, educating the public and professionals about their symptoms and treatment, and advocating for those who live with Sensory Processing Disorder and sensory challenges associated with other conditions.

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The causes of Sensory Processing Disorder

The exact cause of Sensory Processing Disorder–like the causes of ADHD and so many other neurodevelopmental disorders–has not yet been identified. However, preliminary studies and research suggest some leading contenders.

- from *Sensational Kids: Hope and Help for Children With Sensory Processing Disorder* by Lucy Jane Miller, PhD, OTR

What causes Sensory Processing Disorder is a pressing question for every parent of a child with SPD. Many worry that they are somehow to blame for their child's sensory issues.

"Is it something I did?" parents want to know.

The causes of SPD are among the subjects that researchers at Sensory Processing Disorder Foundation and their collaborators elsewhere have been studying. Preliminary research suggests that SPD is often inherited. If so, the causes of SPD are coded into the child's genetic material. Prenatal and birth complications have also been implicated, and environmental factors may be involved.

Of course, as with any developmental and/or behavioral disorder, the causes of SPD are likely to be the result of factors that are both genetic and environmental. Only with more research will it be possible to identify the role of each.

A summary of research into causation and prevalence is contained in *Sensational Kids: Hope and Help for Children With Sensory Processing Disorder* (New York: Perigee, 2006).

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Emotional and other impacts of Sensory Processing Disorder

Children with Sensory Processing Disorder often have problems with motor skills and other abilities needed for school success and childhood accomplishments. As a result, they often become socially isolated and suffer from low self-esteem and other social/emotional issues.

These difficulties put children with SPD at high risk for many emotional, social, and educational problems, including the inability to make friends or be a part of a group, poor self-concept, academic failure, and being labeled clumsy, uncooperative, belligerent, disruptive, or "out of control." Anxiety, depression, aggression, or other behavior problems can follow. Parents may be blamed for their children's behavior by people who are unaware of the child's "hidden handicap."

Effective treatment for Sensory Processing Disorder is available, but far too many children with sensory symptoms are misdiagnosed and not properly treated. Untreated SPD that persists into adulthood can affect an individual's ability to succeed in marriage, work, and social environments.

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How Sensory Processing Disorder is treated

Most children with Sensory Processing Disorder (SPD) are just as intelligent as their peers. Many are intellectually gifted. Their brains are simply wired differently. They need to be taught in ways that are adapted to how they process information, and they need leisure activities that suit their own sensory processing needs.

Once children with Sensory Processing Disorder have been accurately diagnosed, they benefit from a treatment program of occupational therapy (OT) with a sensory integration (SI) approach. When appropriate and applied by a well-trained clinician, listening therapy (such as Integrated Listening Systems) or other complementary therapies may be combined effectively with OT-SI.

Occupational therapy with a sensory integration approach typically takes place in a sensory-rich environment sometimes called the "OT gym." During OT sessions, the therapist guides the child through fun activities that are subtly structured so the child is constantly challenged but always successful.

The goal of Occupational Therapy is to foster appropriate responses to sensation in an active, meaningful, and fun way so the child is able to behave in a more functional manner. Over time, the appropriate responses generalize to the environment beyond the clinic including home, school, and the larger community. Effective occupational therapy thus enables children with SPD to take part in the normal activities of childhood, such as playing with friends, enjoying school, eating, dressing, and sleeping.

Ideally, occupational therapy for SPD is family-centered. Parents are involved and work with the therapist to learn more about their child's sensory challenges and methods for engaging in therapeutic activities (sometimes called a "sensory diet)" at home and elsewhere. The child's therapist may provide ideas to teachers and others outside the family who interact regularly with the child. Families have the opportunity to communicate their own priorities for treatment.

Treatment for Sensory Processing Disorder helps parents and others who live and work with sensational children to understand that Sensory Processing Disorder is real, even though it is "hidden." With this assurance, they become better advocates for their child at school and within the community.

For detailed information about treatment for Sensory Processing Disorder, click here.

To see more information about SPD, click the links below:

Fundamental Facts - Red Flags - Symptoms Checklist - Subtypes - Diagnosis - In gifted - In Adults - Co-Morbidity

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Ages & Stages: How Children Build Friendships

Your support and sensitive approach to children's relationships can foster budding friendships in the classroom.

By Carla Poole, Susan A. Miller, EdD, and Ellen Booth Church | October , 2003

Source: Early Childhood Today

0 to 2 by Carla Poole

ME TOO!

Four-month-old Emma gurgles and coos as she sends an inviting glance toward her teacher. They make eye contact and her teacher responds with a playful, "You have so much to tell me!" A bright smile spreads from baby to teacher. Emma is learning that her world is a friendly place. The attachments she forms in early infancy are the prototypes for later friendships.

A baby is primed to form relationships. She naturally responds to the human voice and imitates facial expressions early on. She will signal invitations to play by catching your eye or calling out with babble. A playful response encourages these signals and enhances the baby's sense of self. You are her first model for relating to other people in respectful, cooperative friendships.

Learning by Imitation

In the early stages of friendship, young toddlers learn from one another through imitation and parallel play. Imagine a small group of toddlers playing at a water table. One boy makes a funny sound by blowing into a long tube with one end in the water. When he is finished experimenting with the tube, he drops it. Another toddler quickly picks it up and imitates him by making the same funny sound! This "Me too!" tendency of toddlers is their way of developing friendships, not yet reciprocal interactions but a positive social and cognitive experience. Even when toddlers are playing side by side, without much interaction, they are still picking up play behaviors from one another. These shared experiences help toddlers gain the play "vocabulary" they'll need when they begin to play with friends.

You're the Coach!

Your guidance makes a positive difference in toddlers' social skills. We know that toddlers understand much more language than they can express. So take the time to do some "emotional coaching." Use simple but clear language, "Nicholas is sad because you took his shovel." be sure to comment on cooperative play as well. "Julia really likes to play on the slide with you!" This helps the toddler become more aware of his own, as well as his friend's, actions and feelings.

A Developing Awareness

Young toddlers do not yet understand anyone else's point of view but their own! What looks like empathy, like crying when another toddler cries, is more of an expression of their own feelings of sadness. Conversely, a swat at another toddler's face can be a toddler's excited way of inviting play.

At around 18 months, there are notable changes in cognitive skills that help real friendships blossom. The toddler becomes more consciously aware of herself and others. She begins to use the words me and mine. This stronger sense of self also helps the toddler become more aware of how other people feel. If another child is crying, the older toddler is more empathetic and tries to comfort her with hugs. An emerging

understanding of cause and effect helps the toddler to know that grabbing her friend's shovel will make him cry. An equally new understanding of order and sequence gives the senior toddler the tools to begin to take turns.

Promoting Give and Take

These emerging thinking skills are embedded in the emotional life of the toddler who often struggles with urgent and sometimes volatile feelings. For instance, the 2-year-old's strong push toward independence and autonomy might take the form of grabbing her friend's shovel even though she knows her teacher won't approve - and her friend will cry. The child's need for feelings of control or power become focused on possessing that particular shovel, no matter what!

How you intervene can make a difference in how the child learns to navigate the give and take of friendship. Give her the language so that she can label and express her needs. "You really want that shovel, but Nicholas is using it now. You can use it when he is finished. It is so hard to wait for something you really want." Empathize with the toddler while you set clear social rules. You can offer an alternative toy but refrain from quickly distracting her. Give her a moment to think about how she is feeling and adapt to the demands that come with learning how to play with other children. Sometimes 2-year-olds who are having a conflict can work things out themselves, so wait that extra moment before moving in. Developing friendships depends on the toddler's growing ability to regulate or control herself.

A friendship between two toddlers can be very intimate and meaningful, especially when they are together each day. Respect and honor these important relationships by keeping friends in the same group or classroom as long as possible.

What You Can Do

- Place sitting infants near each other and face-to-face while they play so they can become aware of each other.
- Plan small group activities for toddlers.
- Think about having a cozy corner just big enough for a pair of toddlers to sit and look at books.
- Offer toddlers time and space to play by themselves so they can take a break from the hard work of making friends!

3 to 4 by Susan A. Miller, EdD

WE'RE PLAYING! WE'RE FRIENDS!

Four-year-old Owen and 5-year-old Chris have been best friends since they started preschool together last year. Now that Chris has moved on to kindergarten, Owen feels a strong sense of sadness. He asks his Mom if she thinks he will ever again see Chris again.

Forming Attachments

As part of their social development process, 4-year-olds are beginning to form deeper attachments to special buddies, especially those of the same sex. This makes losing friends particularly stressful.

Emotionally, fours are starting to look at things from another's perspective. However, when a preschooler is not able to maintain playing with a special friend because of something she cannot control, her behavior frequently becomes rather egocentric. For example, when Julia's Mom arrives early to take her home, this upsets Laura. She carries on and demands to know, "Why does she have to go home and leave me?" She is apt to feel that a good friendship involves the other person doing what she wants her to do.

Fleeting Friendships

For 3-year-olds, who still have some difficulty in seeing things from another child's point of view, friendships are more fleeting. Threes are still practicing their necessary social strategies and have more limited communication skills. These young preschoolers usually base their friendships on one of the following: How physically close is the other child? Is she playing with something of interest? Does she have appealing physical features?

Three-year-old Lyla's friend, at this moment, is Olivia, who is playing alongside her with a fascinating marble game. However, by the afternoon, Tracy could be Lyla's new friend. This may be only because Tracy is sitting next to Lyla on the floor reading a bright new picture book. If Lyla grabs the book to see the pictures, the friendship could immediately end. Tracy may not understand that Lyla might have a need to share or move the book closer to see. Competition over desirable materials can quickly end a friendship. Threes may restart their friendship or they might just as easily move on to other children or other activities of interest.

Moving Toward Cooperation

With longer-lasting friendships than the threes, the 4-year-olds become more cooperative in their relationships. They have a desire to interact with others and participate in collaborative play activities. Cooperation is certainly one way to help maintain a friendship. How well they relate to other children is due to their emerging social competence. When preschoolers can acknowledge others' ideas through shared planning, and use them in play, these positive interactions help sustain friendships.

Problems arise when one person takes a leadership role and expects another child to follow along. When that doesn't happen, the friendship may fall apart. For instance, Brendan decides, "I am the captain." Not pleased with this decision, Julio tells him, "I'm flying to a better galaxy." After such a conflict, the 4-year-olds need to determine whether they want their independence or are willing to cooperate with one another to maintain the friendship.

What You Can Do

- Because it can be difficult for children to understand how their behavior affects friendships, coach them early on. For example, if Beth hits Savanna to get her attention, explain that she could instead say, "Savanna, I want to play with the doll, too."
- Children need to have a variety of experience interacting with their peers to practice their social skills. Provide collaborative interest centers, offer blocks for building together, and promote dancing with music. Keep play simple by encouraging pairs to work together.
- Read books such as *Frog and Toad are Friends* by Arnold Lobel (HarperCollins, 1979) which recounts the adventures of two best friends. Talk about the problems different story characters have and what they do about them.

5 TO 6 by Ellen Booth Church

WILL I FIND A FRIEND?

Five-year-old Pablo, just settling into the routine of his new kindergarten class, is cruising for friends. he moves from group to group, trying to find a way to join in. Eventually, he sits down with a group at the art table. Imagine his delight when Natalie casually says, "Want to use my blue crayon too, Pablo?"

The ever-changing world of kindergarten takes on a special "friendship" focus in October. Most children are now comfortable with the classroom and the program and are at a stage when they look beyond the world of self to what lies beyond in the world of others. Five-year-olds are genuinely curious about others. They ask questions about

their classmates, experiment with friendships, and experience the joy of sharing an activity with another child. This curiosity of others and the relationships they can create together empowers 5-year-olds to take the risk to spontaneously attempt to make connections with others. While they are often clumsy with their initial attempts at engagement, kindergartners are rarely daunted! Our role as teachers is to provide a supportive and flexible classroom environment that offers children the freedom to safely explore all aspects of friendship.

Notice Me!

Some children will try anything just to be noticed by another child. You have probably seen children walk by children building with blocks and purposefully knock their tower down-just to get attention! It's not a very successful technique for friendship building, but it does get a reaction and a level of communication has to take place. You can help children by suggesting ways they can ask their classmates if they can play, or suggest they build a tower nearby and invite the children to find a way to connect the two structures!

Children on Stand-By

Some children will stand by others who are playing in hopes of being invited "in." This approach sometimes works, but it helps if there is something for the child to do too. If you notice a child has been standing nearby a group of children for awhile, step in and give him a role or job to do that will inspire engagement with the others. For example, 6-year-old Scotty wanted to play house with the others but didn't know how to get involved. he would stand and watch until the other children got uncomfortable and complained. His teacher joined the "tea party" and declared that they were out of milk and sugar for the tea and sent Scotty to the "store" for the ingredients. His radiant smile indicated that this was the invitation he needed. When he came back with the pretend items, he was thanked by the group and easily incorporated into the play.

Making Friends With Ease

There are always those children who come to kindergarten each year with a natural, friendly ease with others. They can be children who have had many previous experiences with groups of other children in or outside the home. But also, there are certain children who are naturally gregarious and truly enjoy not only sharing and playing with others, but also helping children make friends! Take advantage of opportunities to enlist these children's skills and abilities to support friendship making in your classroom.

Practice! Practice!

Friendships take practice-and that is exactly what kindergartners are doing when they experiment with different friendship configurations. They are testing the waters of relationships by trying all sides. Sometimes children will try being the leader and other times the follower. Throughout all this practice, there will be times of harmony and times of conflict. The important thing to remember is that 5- and 6-year-olds need all this practice-the good and the bad. Some of the most growth-filled parts of these "relationship rehearsals" happen in the arguments that arise. While as adults we often want to step in and stop or solve arguments for children, we need to remember that a mild argument is a very normal way for people to learn about each other. It is also an important way to experiment with the power of expressive language.

Observe an argument from the sidelines and only step in if things start getting too loud or intense. This is one way children learn that they can work out their own problems. Not surprisingly, some of these arguments can lead to the deepest friendships!

Emerging Empathy

Kindergartners are also learning empathy - an important part of being a friend. They are beginning to be able to see another's point of view, but it's usually within in the context of

how it effects them personally. Later in the school year, with many opportunities for interactions under their belt, kindergartners can demonstrate a stronger sense of empathy. They have an increased ability to truly feel what another might be feeling. It is at this point that children's friendships take on a deeper sense of commitment.

Five- and 6-year-olds are learning how to choose friends and change them, how to create alliances and deal with challengers. The process of making friends can be happy one day and painful the next. But it is all part of learning how to not only make friends-but how to be a friend.

Best Friends

Children in kindergarten are at a stage of development when they desire to belongnot only to the group-but also to a small circle of personal friends or even a "best" friend. Of course, that "best friend" can change weekly or even daily! Don't be surprised if one day a child says Bernadette is her "best friend in the whole wide world" and several days later she says it is Devin. Later in the year, after many different relationships have been experimented with, children often do settle down to a consistent "best friend" or two.

Finding Their Identities

At this stage of development, children have a stronger sense of identity within a group than ever before. They are learning how to speak up for themselves, to express their own special interests and style. One 5-year-old often arrived at kindergarten dressed as a pirate and greeted the group with a hearty "Ahoy there mates!" This delightfully growing sense of self-awareness allows children to actively experiment with the roller coaster ride of friendship. As children explore relationships with others, they are developing their own friendship identities. Certain children find they like to be the leader or the person with the "ideas." Others really enjoy the role of following and trying out those ideas. It takes all kinds of people in life to make life interesting, and happily, we never have a classroom of all one type of child!

What You Can Do:

Kindergartners sometimes need assistance in making friends. Here are a few suggestions to try:

- Pair children up for activities or transitions. Change the pairing frequently, so children can meet and experience many different children.
- After children have experimented with different combinations, notice which combinations work well. Some children can balance each other in temperament, while others can cause a catalytic reaction!
- Invite the class to discuss appropriate techniques for interacting. Ask children to say how they feel when someone knocks over their toys and then suggest what would feel better!
- Encourage families to set up play dates with classmates. Friendships forged in the safety of the home usually hold true in the classroom. It is much easier to make connections one-on-one.

About the Author

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Ellen Booth Church is a former professor of early childhood, a current educational

Making Life Easier

By Pamelazita Buschbacher, Ed.D.

Illustrated by Sarah I. Payton

Holidays: Strategies for Success

While the holiday season is filled with enjoyable activities, events and traditions, it can also be a hectic and stressful time. Travel, shopping, loud music, bright lights, unfamiliar food, and busy schedules can turn typical routines upside down! The disruption to routine can be particularly difficult for children who depend on routine and predictability to engage in appropriate behavior.

The following tips will help ensure that the holiday season is enjoyable for you and your child.

Tip: Prepare your child for changes.

Talk to your child about changes to the schedule and environment. Look at pictures from previous holidays and talk about what happened during those events. Also talk about this year's special programs and about behavior expectations, e.g., "we will sit and listen quietly during the presentation...when the program is over, we will go to the lobby and have some cookies and punch." Discuss upcoming trips several days before the departure date. Let your child know when you will be leaving, where you will be going, and what you will do while away. Repeat these conversations several times before traveling.

Tip: Involve your child in preparations and minimize surprises.

If you are going to decorate the house or bake special goodies, involve your child and make the tasks fun! It could be upsetting for your child to come home from school to find the home looking very different with unfamiliar items and things out of place. Take decorations out gradually and allow your child to explore them so that she has time to adjust to the changes.

Tip: Pace your holiday activities.

Busy holiday calendars can leave adults and children worn out and stressed. When possible, balance times of high activity with calm, relaxed times. Try to spread activities out over the holiday season.

★ **Keep aspects of your typical routine whenever possible.** Consistency and familiarity can help build coping skills for the unfamiliar. As much as possible, preserve bedtimes and other routines. Allow for a leisurely bath, story, song or cuddle. Eat meals together.

★ **Plan for a regular 'Quiet Time'.** Try to build in time each day to provide your child with activities that she finds soothing or relaxing.

★ **Don't shop 'til you drop.** If your holiday season involves lots of shopping or errands, think carefully about how to involve your child. Stores will look and feel different this time of year as they are often extremely crowded and noisy. Children may become frightened or overwhelmed. Consider making trips brief, shopping at less crowded times, or leaving your child with another caregiver. If you have errands to run, limit the number of places you visit and let your child know that the errands will end at a fun place for her (e.g., a park, playground, ice cream store, etc.).

Tip: Give clear directions.

Give your child a positive direction that assumes she will cooperate. For example, instead of saying "Amy, do you want to get on the plane?" it is better to say, "Oh look, it's time to walk onto the plane. 1-2-3-4-5, Let's go." Remind her of expectations. For example, you might say, "Remember, walking feet on the plane." It is also helpful to show your child the behavior using pictures or by modeling it yourself.

★ **Use Positive Words.** Clearly and simply state what you expect your child to do instead of what not to do. Encourage your child in a way that lets her know that she is exhibiting the desired behavior.

★ **Give warnings that change is coming.** Most young children need help transitioning from one activity to another, especially if they are engaged in an activity that they enjoy. Let your child know in advance that a change is coming. Give a few staggered warnings letting her know how much time is left in the current activity as well as what is coming up next. Help your child through the transition by talking to her or singing a song such as "The Clean-Up Song" or adapting a familiar song to the task.

★ **Use 'Wait Time'.** A wait time of about 4 to 20 seconds is often all that is needed for a child to process and respond to a request.

★ **Provide choices, whenever possible.** Providing limited choices (two or three) for a child in a difficult situation can be a powerful strategy in preventing challenging behavior and redirecting a child to more acceptable behavior and cooperation. Choices help give children a sense of control over their surroundings and activities while still doing what needs to be done! Be sure that ALL the choices you offer are helping reach that goal! For example, if it is time to get dressed ask your child if she wants to get dressed by herself or with your help.

★ **Provide frequent and specific praise.** Let your child know when she is being cooperative and helpful by praising her specifically for what she is doing. For example, you might give your child a high five for sitting quietly in the car or you might say, "Thank you for holding my hand in the parking lot."

★ **Empathize with your child's feelings.** If your child cries, hits, bites, screams or hides, provide an emotional label for how she might be feeling and reassure her. Avoid punishment (e.g. "If you don't sit still, I am going to spank you.") and negative, and usually, untrue comments "Big girls don't cry" or "There is nothing to be afraid of." Let your child cry and comfort her by hugging, patting and/or using a soothing touch.

Tip: Prepare family and friends.

Inform family and friends of helpful strategies. Talk to your family and friends about strategies that might help ensure your child's success before spending time together. Consider specific aspects or situations that might have a negative impact on your child's behavior (e.g., sensory issues, difficulty waiting, food allergies or sensitivities, etc.) and share strategies that have worked for you. Be sure to focus on your child's strengths and strategies for success.

Tip: Pack for success!

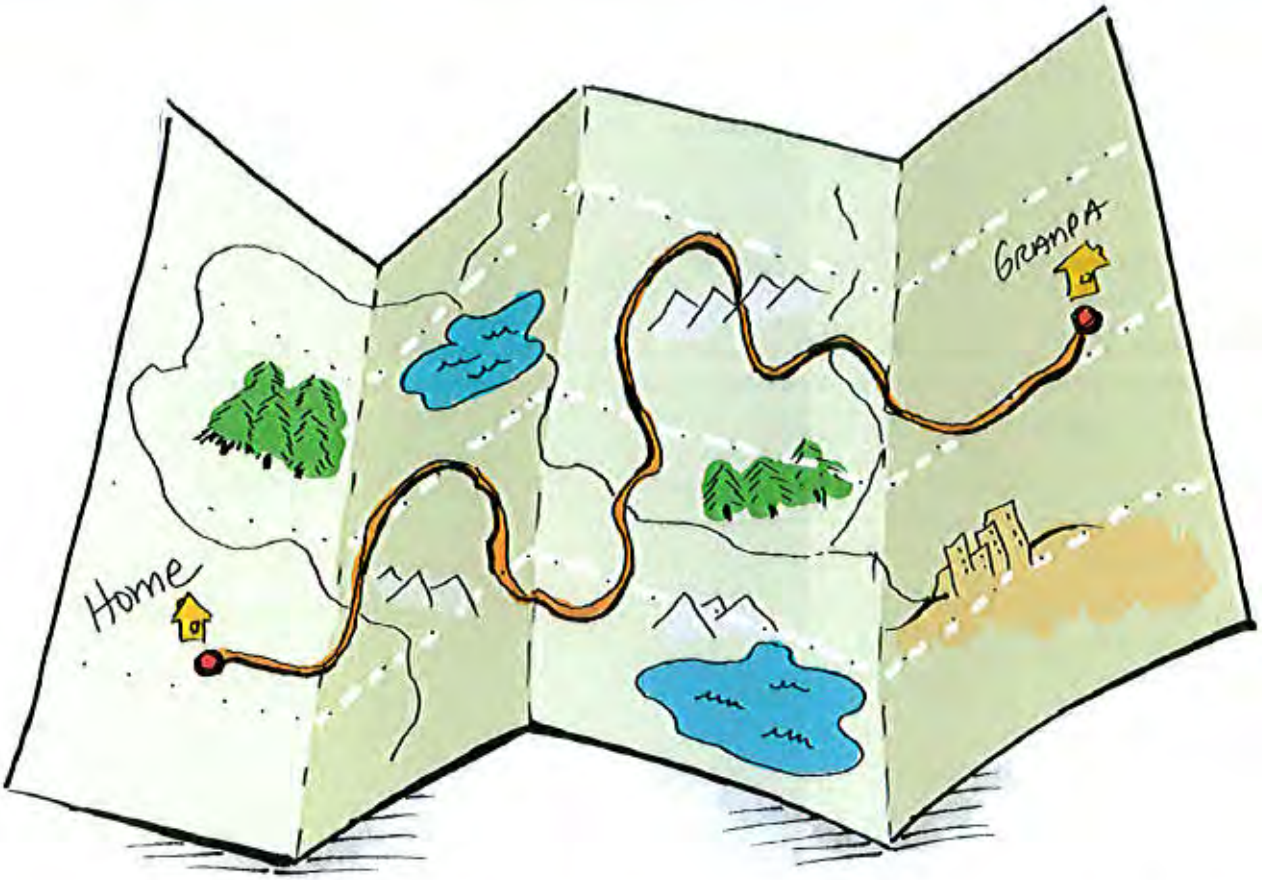
When your holiday plans include time away from home, bring familiar items, activities and foods with you. Pack activity bags that include favorite books, toys, and games. If possible, have your child help pack the bags so she can choose a few of the items herself. You might say, "Brianna, do you want to take Mickey Mouse or blankie in your bag?" This gives her a feeling of control and supports her growing sense of confidence and sense of competency.

For many families the holidays are a time of feasting and enjoying all kinds of yummy treats. Be attentive to diet changes and how they may affect your child. Chocolate, caffeine, sugar, and dairy products may have an impact of your child's digestion, well-being, and behavior. If your child follows a particular diet, be sure to bring items with you that might not be available where you are going. Pack nutritious food and drink options to balance out sweet, holiday treats.

Tip: Pre-travel planning.

★ **Reassure your child.** Let your child know that you will be with her and that she can take along a favorite toy or blanket. For example you might say, "Daddy will be with you" or "You can hold blankie on the plane."

★ **Rest stops aren't just for resting.** Familiarize yourself with your travel route as well as with parks and rest areas along the way. These offer great opportunities for children to run, jump, play with a ball, blow bubbles, and stretch. Many family-friendly restaurants and airports have play spaces also. A good rule is to take a ten minute break every two hours.



★ **Create a personal picture story about the trip.** Create a small book with photos of the airport and plane or of the bus depot, bus, car or train. As you read the book with your child, let her know what will happen and how you expect her to behave. Read this to your child several times before the trip. Also, make sure to bring it along as a reminder. When children understand what is going to happen, they are less anxious which can increase cooperation and reduce challenging behavior.

Tip: Celebrate the successes along the way.

In closing, please remember that the team of professionals that support you and your child will have additional specific ideas about how to help your child. Don't forget to ask them! Your child's speech and language therapist, physical therapist, occupational therapist, teacher, or other professional should be able to help you think about the best way to support your child over the holiday season. They are usually more than willing to help you make any needed specific supports (for example, a Travel Book, a Waiting Bag, a personal picture story, etc.). If your child is having persistent challenging behavior, you should ask the professionals who work with you to help develop a behavior support plan that will provide more specific strategies to prevent challenging behavior and help your child develop new social and communication skills.

Making Life Easier: Surviving and Enjoying the Holidays

- **Prepare your child for changes** in routines and schedule.
- **Involve your child** in some of the holiday preparations.
- Keep aspects of your **typical routine** whenever possible.
- Give **clear directions**.
  - Use **positive words**.
  - Provide **transition warnings**.
  - Use **'Wait Time.'**
  - Provide limited **choices**.
  - Tell your child **how to behave**.
  - Provide **frequent and specific praise** for acceptable behavior.
- **Empathize** with your child's feelings.
- **Inform family** and friends of helpful strategies.
- Be attentive to **your child's diet**.
- Holiday Travel – **Plan ahead**
  - Pack a bag of **favorite items** to take with you.
  - Call airlines, airport or bus depot ahead about **special accommodations**.
  - **Visit the airport** or bus depot in advance.
  - Create a **personal story**.
- **Celebrate** the successes along the way.

Read Anything and Everything with Your Child

In our classroom, we introduce the children to different kinds of writing—storybooks, books about topics we are studying, magazines, how-to guides, recipes, and content on the web. These are the kinds of writing that children and adults read in school and in daily life. You can read anything and everything with your child too. This helps your child learn how and why writing and reading are important and useful. Here are some ideas.

Read magazines and newspapers. Talk about the photos and illustrations. Find an article by using the table of contents page. Discuss the different sections, such as sports, local news, and advertising.

Write a letter together. Use it to say "Thank you," "I hope you feel better soon," or just "Hello." Explain why you write the date and include the name of the person whom you are writing to. Sign it and have your child sign her name too.

Follow a recipe in a book or instructions on a food container. Work as a team to gather the ingredients. Then follow the directions step-by-step. Ask your child to help you figure out what comes next.

Read a variety of books. At the library, help your child pick storybooks, nonfiction books, and books to read together. Your child might choose a book of poems or a book with lots of detailed pictures to look at together.

A message from your child's teacher _____

Home Sorting Ideas

Early experiences in sorting and classifying help young children notice how things are alike and different. They will apply this understanding when learning math skills in the primary grades. Here are some ways you and your child can sort and classify at home.

■ Looking at favorite family photographs together can lead to many interesting sorting/classifying activities. Begin by sorting pictures into girl and boy pictures, and then try more challenging categories, such as Mom's or Dad's family members, brothers and sisters, or where people currently live. If you want to imitate how scientists classify things, try sorting into just two groups, such as cousins versus not cousins.

■ Sort shopping lists according to the type of item, such as fresh vegetables, frozen foods, or cleaning supplies. At the store, predict where each item will be located.

Fruits and Veggies	
Dairy	
Pasta	
Paper products	

■ Do you collect rocks—or seashells, or coins, or teddy bears? Think of ways you and your child might sort them. Use containers you have around the house—muffin tins, egg cartons, or recycled yogurt cups.

■ Help your child figure out a way to sort and store toys and art materials. For example, suggest keeping all the stuffed animals in one basket and trucks in another. Or sort a collection of plastic dinosaurs by carnivores versus herbivores.

A message from your child's teacher _____

Toy Safety Tips

Everything you need to know to keep your kids safe around toys.

Toys and games are tons of fun for kids and adults. Whether your kids are working on a puzzle, playing with building blocks or even inventing their own games, here are a few things to think about to help them stay safer and have a blast.

Find the Perfect Toy for the Right Age

- Consider your child's age when purchasing a toy or game. It's worth a second to read the instructions and warning labels to make sure it's just right for your child.
- Before you've settled on the perfect toy, check to make sure there aren't any small parts or other potential choking hazards.

Don't Forget a Helmet for Riding Toys

- If your children have their hearts set on a new bike, skateboard, scooter or other riding equipment, be sure to include a helmet to keep them safe while they're having fun.

- Learn more bike safety tips and watch our helmet safety video.

Store Toys After Play

- After play time is over, use a bin or container to store toys for next time. Make sure there are no holes or hinges that could catch little fingers.

Sign Up to Receive Product Recalls

- Safe Kids compiles product recalls specific to children and sends twice-monthly e-mail alerts for recent recalls. Sign-up for the latest recall information.
- Go to www.recalls.gov for additional information about product recalls related to kids.

In 2010, an estimated 181,500 children were treated in an emergency room for a toy-related injury. That's 500 kids every day. Nearly half of those injured were children 4 and under.

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SAFE KIDS WORLDWIDE

Snow Globe Craft

Making a snow globe with your child is a great winter craft! This is a simple snow craft that our preschooler absolutely loved making and playing with afterwards. All you need is some corn syrup, a bottle and glitter – and we promise it's not as messy as you think it is! Try this great preschool winter craft with your kids today.

What you'll need:

- Materials
- Small clear bottle or jar (baby food jars or spice jars work well – they must have a lid)
- Corn syrup
- Glitter
- Popsicle stick or child-safe butter knife
- Water
- *Optional: hot glue gun/hot glue – adults only

How to make your Snow Globe Craft

1. Place the jar on a paper plate or some newspaper.
2. Fill the jar 1/3 of the way full with corn syrup. The corn syrup helps the glitter stay in suspension longer.
3. You will use water to fill the rest of the jar. At this point, only add about half of the water you need and then mix the corn syrup and water together until the corn syrup dissolves most of the way. If you fill the jar the whole way full and then have a preschooler stir it, we guarantee a mess! Once the corn syrup is dissolved, top the jar off with water.
4. Sprinkle in some glitter. Use as many colors as you'd like, and as much as you'd like.
5. Put the lid on the jar and shake to watch the snow swirl.
6. ** Here is the optional part. If you'd like, you can hot glue the lid onto the jar. Our daughter is good about not opening things and we don't expect this craft to last forever, so we did not do this step. If you do glue the lid on, make sure to use hot glue and not something that will wash away in water (like Elmer's glue) or the water in your globe may turn cloudy as it eats the glue.

Printed from busybeekidsprintables.com

Red Cliff Community Health Center Employee Directory		Extensions
Alana Babineau	HWPP Grant Coordinator	2231
Amy Koenamann	Lab Technician	2245
Andrea Hudson	Pharmacy Technician	2256
Angela Berg	Public Pediatric CHR/Community Base Doula	2233
Anna Carlson	Pediatric Nurse Practioner	2260
Anthony Bondioli	Nurse Administrator of Community Health	2261
Arlene Brandis	Dr. Lewis' Nurse (RED TEAM)	2242
Butch Kuepfer	Maintenance	2237
Carolyn Gouge	Contract Health Service Administrator	2239
Carolyn Maunu	Diabetic Outreach/CHR	2235
Cassy Karker-Morrison	Dental Assistant	2265
Clarissa Bressette	Tribal Americorp Member	2264
Crystal Newago	Medical Benefits Specialist	2238
Debra Defoe	Dental Receptionist	2240
Dennis DeBungie	Zaagichigaazowin Home Visiting Program Cultural Consultant	2266
Diane Erickson	Assistant Health Director	2229
Elizabeth Wachsmuth	Prevention CHR	2232
Erica Peterson	Dental Office Manager	2262
Erin Tenney	Certified Nurse Midwife/Women's Health NP	2225
Heather Kinnunen	Hygienist	2265
Jacob Maas	Environmental Health Specialist	2236
Jaime Cadotte	Pharmacy Technician/Biller	2255
Janice Wilber	Chief Pharmacist	2278
Janine Deragon	Pharmacy Technician	2256
Jennifer Kupczyk	Pharmacist	2257
Jenelle Elza	Nurse Quality Manager	2263
Jennifer Boulley	Zaagichigaazowin Home Visiting Program Coordinator	2268
Joe Corbine	Psychotherapist	2223
John Schmid	Radiology Technician	2230
Johanna Wilson	Medical Records Clerk	2222
Karen Grunow	Public Health Nurse	2274
Katherine Martin	Dr. Grace Heitsch's Nurse (BLUE TEAM)	2246
Kelly Stricklen	Medical Assistant for Dr. Grace Heitsch(Blue Team)	2272
Lisa Cadotte	Dr. Lewis' Medical Assistant (RED TEAM)	2270
Lisa Gordon	Clinic Nurse (GREEN TEAM)	2243
Liz Marcoux	Clinic Manager	2227
Mardella Gustafson	Medical Appts Scheduler/Registration	2221
Missy Soulier	Accounts Receivable Clerk	2259
Pat Brown	Dentist	2244
Patty Deragon-Navarro	Health Director	2224
Pauline Grooms	Health Information Supervisor/HIPAA/Coder	2254
Renee Albert	Business Office Clerk	2280
Sandy Lukasiewicz	Billing Clerk	2258
	Receptionist	2277
Steve Lagrew/Butch K	Maintenance	2237

Theresa Popovich	Hygienist	2265	
PHARMACY DIRECT LINE		**715-779-3157**	
DENTAL DIRECT LINE		**715-779-3096**	
CONTRACT HEALTH SERVICES		**715-779-3097**	
FOR BEST RESULTS FOR PHARMACY REFILLS CALL EXTENSION 256. PROCESS TIME		**WILL BE FASTER**	

The Red Cliff Tribe has these following job openings available please visit:

http://redcliff-nsn.gov/Employment/openings.htm for more information

Residential Treatment Coordinator - Evenings
DEADLINE: December 5, 2013 until 4:00 p.m.

Payroll/Special Revenue Accountant
DEADLINE: December 10, 2013 until 4:00 p.m.

Project Assistant/Case Manager, The Mino-Ayaa win Miikana (The Art of Living A Good Life) Program
DEADLINE: December 10, 2013 until 4:00 p.m.

Inventory Clerk, LTE
DEADLINE: December 10, 2013 until 4:00 p.m.

Relief Youth Worker
DEADLINE: December 10, 2013 until 4:00 p.m.

Dental Assistant Fill-In
DEADLINE: Open Until Filled

Early Head Start Infant/Toddler Center Based Teacher
DEADLINE: Posted until filled.

Chief Financial Officer
DEADLINE: Open Until Filled

Relief Manager (1-3 Positions)
DEADLINE: Open Until Filled

On-Call Snowplow/Equipment Operator(s) and General Laborer
DEADLINE: Open Until Filled

Custodian/Maintenance On-Call Assistant
DEADLINE: Open Until Filled

Special Education Teacher - SCHOOL DISTRICT OF BAYFIELD
DEADLINE: December 11, 2013

Native American Club Advisor/Teacher - SCHOOL DISTRICT OF BAYFIELD
DEADLINE: December 16, 2013

Quantitative Ecologist - GLIFWC
DEADLINE: January 3, 2014

Wildlife Biologist - GLIFWC
DEADLINE: January 3, 2014

JOB DESCRIPTION

POSITION: Early Head Start Infant/Toddler Center Based Teacher

NON EXEMPT: 38 hours per week/11 months (year-round)

LOCATION: Red Cliff Early Childhood Center

PROGRAM: 100% Early Head Start

WAGE: $10.00-$14.00 per hour depending on qualifications

SUPERVISOR: Early Head Start Director

GENERAL STATEMENT OF DUTIES:

Serve as one of two primary teachers for an assigned group of eight infants or toddlers in a center based environment. Early Head Start child/teacher ratio is 4:1. Responsible for co-planning and implementation of educational programs with co-teacher for six weeks old to 3 year old infants and toddlers which reflect best practices and integration of Ojibwe language and culture when possible into curriculum. EHS teachers will loop with the same group of infants/toddlers for three years, and move physically with them each year to the next developmentally appropriate classroom.

EHS teachers are expected to share all responsibilities within their classroom, and to create an environment of nurturance and sharing with all children. Must be able to have daily open communication with co-teacher regarding daily operation of classroom and child/parent needs and communications.

RESPONSIBILITIES:

- Must maintain confidentiality of all child's and family information and records.
- Plan and implement age appropriate child development lesson plans which provides a variety of activities designed to enhance infant and toddlers social, emotional, physical, cognitive, and intellectual development.
- Promotion of a safe, attractive and stimulating physical environment for infants and toddlers and also establishing and maintaining consistency of rules.
- Reinforce positive self-image, pride, and cultural identity with infants and toddlers during all activities.
- Meal times with children will be in a family setting with at least one teacher, preferably both sitting at the table engaging in conversation with the infants and toddlers. Infants and toddlers are encouraged, but not forced to eat or taste. Encourage older toddlers in self-help and independence skills by involving them in set up and clean up activities.
- Maintain accurate daily records on attendance, daily intake, medical log, infant and toddler eating/sleeping/toileting information for distribution in child file and to parents as well as other required forms.
- Maintain weekly online documentation of your four assigned childrens' developmental progress in ChildPlus as well as in Teaching Strategies Gold
- Assist the family and child, and other relevant staff in developing an Individual Family Services Plan (IFSP)

or Individual Education Plan (IEP) for special needs children.

- Conduct two home visits annually per family as stated in the Federal Performance Standards.
- Maintain and document all contacts with parents. Develop and maintain a professional relationship with parents of children enrolled in program.
- Collaborate with other staff, parents, and community resources to incorporate Ojibwe language and culture into daily activities and curriculum.
- Work with county, tribal and community service providers in order to provide necessary services to the Early Head Start child and their parents.
- Notify supervisor in advance of any known absences you will have. Center based teachers are responsible for arranging for your own qualified substitute in your absence.
- Adhere to all EHS policies, and procedures and insure that Federal Performance Standards are being met.
- The above identified responsibilities are not intended to reflect all tasks necessary for the position. Perform other duties as directed.

QUALIFICATIONS/KNOWLEDGE/SKILLS:

- Minimum of associate degree in early childhood education *preferred* in early childhood associate degree program. *Preference* for BA or BS degree in early childhood education.
- May consider applicants **currently enrolled** in early childhood education associates degree with minimum of thirty (30) credits completed - unofficial transcript required with application.
- Mandatory infant/toddler course needed prior to or immediate enrollment in correspondence class during probationary period
- Knowledge of Ojibwe culture preferred, cultural sensitivity required.
- Ability to work effectively and cooperatively with staff, parents, community members, and other support systems in the best interest of the child is required.

WORK ENVIRONMENT:

Primary work environment is in an Early Head Start (EHS) center-based classroom.

PERSONAL CONTACTS:

Collaboration with local, state, and national collaborating partners, with particular emphasis on networking with parents, extended families, and the Red Cliff community.

SPECIAL REQUIREMENTS:

Must be physically able to work with young children, including ability to lift a minimum of 40 pounds, initial health exam mandatory with update every five years, initial TB test and TB questionnaire each year, immunizations including Hepatitis B (or sign waiver), and required trainings such as confidentiality, CPR, etc. Must attend appropriate staff meetings, Policy Council, parent meetings, or ECC activities as required.

TRAVEL REQUIREMENTS:

Must have valid driver's license, automobile, and insurance. Must be able to attend local, regional, and national trainings as required.

DEADLINE: *Posted until filled.*

FOR FURTHER INFORMATION CONTACT: Personnel Department

VACANCY

The School District of Bayfield has the following vacancy.

POSITION: Special Education Teacher
(Limited Term Position – 2013-2014 School Year)

LOCATION: Bayfield, Wisconsin

QUALIFICATIONS: Must hold at least one of the following Wisconsin DPI Certifications: #801 (Cross-Categorical) or #830 (Emotional Behavioral Disabilities). Must have excellent written and verbal communication skills. Applicants must be familiar with special education paperwork and procedures, especially functional behavioral assessments. Additionally, must be able to work collaboratively with staff and administration. Must be flexible and have outstanding organizational skills. Applicants must have excellent rapport with challenging students. The School District of Bayfield is a multicultural environment making experience with and sensitivity to Native American culture imperative. Knowledge of Wisconsin Act 31 important. Native Americans are encouraged to apply.

APPLICATION DEADLINE: December 11, 2013

TO APPLY: Submit application available online at www.bayfield.k12.wi.us or by calling 715-779-3201, ext. 100, letter of intent, copy of Wisconsin DPI licensure or proof of Wisconsin DPI license application, resume, transcripts and three recent letters of recommendation to:

Dr. David Aslyn, District Administrator
School District of Bayfield
300 North 4th Street
Bayfield, WI 54814

THE SCHOOL DISTRICT OF BAYFIELD IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, GENDER, AGE, HANDICAP, OR SEXUAL ORIENTATION.

SCHOOL DISTRICT OF BAYFIELD
NOTICE OF VACANCY
November 26, 2013

POSITION: **Native American Club Advisor/Teacher**
Hourly, Non-Union, Grant Funded position to fill immediately - May 8, 2014
96 hours at $20/hour

SCHOOL: **Troller Afterschool Program** - Bayfield High School

The Troller After School Program (TAP) is seeking a Native American Club Teacher for high school students for the remainder of the 2013-2014 school year. This position is grant funded through the Wisconsin Department of Public Instruction 21st CCLC program. The major focus of this position is to provide high school students with engaging Ojibwe language and culture activities after school with the main project being planning and management of the Annual Spring School Community Pow Wow and feast held in the school gymnasium.

QUALIFICATIONS:

- Licensure is not a requirement of this position but preference will be given to DPI License 927 Indian History and Culture Teacher and 926 Indian Language Teacher.
- Extensive knowledge/experience of Native American Language and Culture
- Experience working with students and school and community leaders in a diverse environment
- Experience in planning large community events, particularly Native American Pow Wows
- Creative abilities, self starter, as well as an effective team member, a willingness to work with special needs students, and be able to multi task in a public school setting.

RESPONSIBILITIES: Successful candidate will provide cultural activities in and out of the classroom Encourage student and staff participation in local language tables.

APPLICATIONS ACCEPTED THROUGH: Please submit letter of application by 3:30 p.m., December 16, 2013.

Apply to: **Linda Weber, Grants & Activities Coordinator**
School District of Bayfield
300 North 4th Street
Bayfield, Wisconsin 54814

THE SCHOOL DISTRICT OF BAYFIELD IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, GENDER, AGE, HANDICAP, OR SEXUAL ORIENTATION.

Red Cliff Early Childhood Center

Regular Policy Council Meeting
MINUTES
Wednesday, October 9th, 2013
5:00pm @ Memengwaa Trailer

Policy Council Members Present: Liz King, Ashly Gurnoe, Amanda Cadotte, Jamie Sokolowski, Amanda Thomas, Jessie Defoe

Policy Council Members Absent: Karalee Defoe and Marvin Defoe (Tribal council Liaison)

Others Present: Rick Wygonik, Tribal Human Resources; Dee Gokee-Rindal, Education Division Administrator; LaVonne Goslin, EHS Director; Nicole Gurnoe, HS Director; Nicole Boyd, Family Services Manager

Sign In Completed

Meeting called to order at 5:10pm

Policy Council Orientation:
Welcomes and introductions completed; binders containing info related to ECC, program governance, 2012-2013 PIR, and other info was provided to each new member, returning members received updates.

Confidentiality Training-Rick completed training with the Council, including coverage of the Tribal Ethics policy. It was clarified that anyone who received this training met the confidentiality requirement for subbing but would still have to complete all other requirements.

Officer Elections
Chairperson: Jessie nominated Amanda Cadotte, Amanda accepted, seconded by Liz, all in favor, motion carried.
Vice Chairperson: Amanda C. nominated Liz King, Liz accepted, seconded by Jessie, all in favor, motion carried.
Secretary/Treasurer: Amanda C. nominated Amanda Thomas, Amanda T. accepted, seconded by Liz, all in favor, motion carried.

Minutes: May 14th, 2013
Liz motioned to approve the May 14th, 2013 minutes, Jessie seconded, all in favor, motion carried.

July- Current EHS & HS Financial Reports
Dee, LaVonne and Nicky explained the EHS and HS budget reports. Nicole explained about the Parent Activity Fund line item, budgeted for picture day and annual holiday party.

Ratify Poll Votes:

- Transition Plan: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- PDM Plan: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- Esiban Enrollment Criteria: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- Head Start State Grant: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- ANA LTE Employees: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- EHS Center Based Teacher: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- ANA Lateral Transfer: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- Head Start Teacher: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- One Time Head Start Funds Application: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.
- Mentor Coach/Data Specialist: Ashly motioned to ratify the poll vote, Liz seconded, all in favor, motion carried.

2013-2014 Family and Community Partnerships Plan
Nicole presented the plan to Policy Council. Liz motioned to approve, Jessie seconded, all in favor, motion carried.

Distribute ECC Program Summary Report
Report is not completed at this time due to evaluation results still coming in, Nicole will forward to PC when it is completed.

Distribute Quarterly Reports/Annual Report
Dee provided the quarterly reports, including the annual report, to PC.

Annual Self-Assessment (Who is willing to participate from PC?)
Schedule for self-assessment was given to PC along with a signup sheet. Ashly, Jamie and Liz are willing to participate at this point but ECC staff are welcome to call other PC members also.

Schedule Meetings for Year
October 15th 12-1 Lunch interview for Self-Assessment @ ECC
November 13th 9-1 Program Governance Training at the LW
November 14th 12:30-2 @ ECC
December 12th 12:30-2 @ ECC
January 9th 12:30-2 @ ECC
February 13th 12:30-2 @ ECC
March 13th 12:30-2 @ ECC
April 10th 12:30-2 @ ECC
May 8th 12:30-2 @ ECC
June 12th 12:30-2 @ ECC
July 10th 12:30-2 @ ECC
No August Meeting
September 11th 12:30-2 @ ECC

Other
None

Executive Session-Personnel Issues
Ashley motioned to go into executive session at 6:28pm, Amanda T. seconded, all in favor, motion carried.

Regular Session
Liz motioned to return to regular session at 6:40pm, Jamie seconded, all in favor, motion carried.

Adjourn
Ashly motioned to adjourn at 6:41pm, Jamie seconded, all in favor, meeting adjourned.

DECEMBER 2013

MANIDOO-GIIZISOONS

NITAM ANOKII-GIIZHIGAD	NIIZHOO-GIIZHIGAD	AABITOOSE	NIIYO-GIIZHIGAD	NAANO-GIIZHIGAD
2B EGG OMELET, TOAST, HONEYDEW, JELLY L CHILI, CORNBREAD, PEAS/CARROTS, YOGRT, APPLES S NUTRIA GR. BAR/MILK	3B RICE CHEX, MUFFIN, ORANGES, CC L MAND CHIX, RICE, STIR FRY, TROP FRUIT, SALAD S CHZ/CRACKER	4B KIX, ENG MUFFIN, BERRIES, YOGRT, L KEILBASA, KRAUT, BUN, GR BEAN, MANGO S SALSA/CORN CHIP	5B HB OATS, PEARS, CC, TOAST, JELLY L BEEF VEG SOUP, CRACKERS, PEACHES, CORN, S HAM/PITAS	MENU SUBJECT TO CHANGE
9B OATMEAL, TOAST, PB, BERRIES L CHIX VEG SOUP, CHEEZ SAND, FRUIT COCKTAIL, CC S PICKLE ROLL UP	10B CORN CHEX, BAGEL, PBJ, APPLES L CHEEZ BRG, FRY, SALAD, VEG/DIP, APPLESAUCE S CRACKER/JUICE	11B RICE CRISPIES, TOAST, YOGURT, BANANA L SCALLOP/HAM, PEAS, BUN, TROP FRUIT S MAND. ORANGES/ GRAHAM CRACKER	12B BRAN FLAKES, MUFFIN, PEACHES, CC L BEEF STIR FRY, RICE, MANGO, SALAD, STIR FRY S CINN. ENGLISH MUF.	MILK SERVED WITH ALL MEALS
16B PANCAKES, APPLES, YOGURT L BBQ'S, VEG/DIP, BUN, FRY, PEARS, CC S PRETZEL/JUICE	17B CORNFLAKES, BLUEBERRIES, CC, TOAST, JELLY L CHIX PARM, SALAD, CORN, MANGO S FISHCRK/CHZSTICK	18B RICE CHEX, CC, ORANGES, MUFFIN L BOIL DINNER, BISCUIT, APPLES, YOGURT S PINEAPPLE/CC	19B KIX, BAGEL, BANANA, PB L TACO'S, W/FIXING, PEARS, GR BEANS S COOKIE/MILK	ECC HOLIDAY PARTY
WINTER BREAK	WINTER BREAK	ECC/TRIBE CLOSED	WINTER BREAK	
WINTER BREAK	WINTER BREAK	ECC/TRIBE CLOSED	WINTER BREAK	CLASSES RESUME JAN 6