

Tri-County Community Council, Inc.
Head Start/Early Head Start

Part: 1302 Program Operations
Subpart: D-Health Program Services
Section: 1302.47 Safety Practices
Subject: Permission to Obtain Emergency Medical Care

Policy:

Every child will have a medical emergency consent form filled out yearly.

Procedure:

1. An “Authorization to Consent to Medical Treatment for a Minor Child” Department of Children and Families form will be filled out by the parent/guardian at the beginning of each program year with the following information:
 - a. Parent/guardian's name
 - b. Address of parent/guardian
 - c. Child's name
 - d. Birthday
 - e. Head Start/Early Head Start Center
 - f. Doctor's name
 - g. Child's allergies
 - h. Medication child is taking
 - i. Insurance Company
2. The form will then be checked by the Family Service Advocate, Home Visitor or Center Director and notarized.
3. The form will be placed in the child's folder.
4. A copy will be taken on all field trips.