

EARLY HEAD START

NATIONAL RESOURCE CENTER (EHS NRC)



Dear Audiocast Participant:

We are so glad that you will join us for an audiocast of the November 19 audioconference, *Starting Strong: Supporting Programs in Start-Up*. This is the first in a two-part series for federal staff and training and technical assistance providers on working with Early Head Start grantees as they plan and prepare for the implementation of their programs.

A set of handouts are enclosed, including copies of faculty biographies, handouts and the audiocast evaluation are attached. Feel free to copy these for other participants.

If you have questions, please feel free to contact me. My phone number is (202) 638-1144 x669. Enjoy the program!

Sincerely,

A handwritten signature in black ink that reads "Amanda Perez".

Amanda Perez, MSW
Senior Training Specialist

Starting Strong: Supporting Programs in Start-Up

Goal:

Start-Up is a complex process that helps funded organizations plan an Early Head Start program that is in compliance with the *Head Start Program Performance Standards*, and is appropriate to the unique needs of expectant families and infants, toddlers and their families in their communities. The goal of this audioconference was to offer those who provide oversight and training to programs an overview of the Start-Up process and relevant resources available to program staff.

Objectives

During this audiocast, panelists:

1. Describe four “steps” or components of Start-Up for Early Head Start programs;
2. Share lessons learned from Start-Up; and
3. Describe the use of the Organizational Readiness Chart.

*Starting Strong:
Supporting Programs in Start-Up*

Agenda for the Original Audioconference

Welcome

Panel Introductions

Panel Discussion

What Is Start-Up?

Components of Start-Up

Resources

Questions and Comments **

Management Systems and Procedures

Questions and Comments **

Preparing for Services

Questions and Comments **

Concluding Words

*Starting Strong:
Supporting Programs in Start-Up*

Moderator

Amanda Perez



Senior Training Specialist
Early Head Start National Resource Center

Faculty

Linda Broyles



Deputy Director/ Senior Associate of Early Childhood Services
Southeast Kansas Community Action Program (SEK-CAP)

Linda Broyles began her career in early childhood as a Head Start parent with the Southeast Kansas Community Action Program. Her work in the program spans over 30 years and she has served in almost every role in the Early Childhood Department. Linda was hired as the Director of Early Childhood Services at just the time that SEK-CAP received Early Head Start funding. In her new role, she led this important start-up effort simultaneous to agency-wide transformational change, including management restructuring and systematic improvement of all Head Start services. Currently, as Deputy Director, Linda assists in coordinating all of the organization's activities either directly or through subordinate managers. Linda continues to direct all activities related to operation of the early childhood education projects, providing the leadership necessary to ensure that all children are prepared for their next educational setting.

***Starting Strong:
Supporting Programs in Start-Up***

Faculty (cont'd.)

Judy Ham



President and Chief Executive Officer
Cerebral Palsy of Colorado (CPCO), Inc.
Denver, CO

Judy Ham was a manager and trainer in the for-profit world before bringing those skills to work in non-profit programs serving individuals with disabilities. For the past 16 years, she has served as President and CEO of Cerebral Palsy of Colorado. When CPCO was looking for opportunities to support inclusive child care services for young children, they submitted proposals for Head Start and Early Head Start programs. Judy was at the helm when those programs were funded. She serves on several boards of directors for other non-profits, and provides consultation on strategic planning.

Sarah M. Semlak, Ph.D.



Early Childhood Consultant
Washington, DC

Sarah Semlak is an early childhood trainer, author and consultant. In her work, she draws from her experiences as a teacher, parent educator, researcher, and manager in early childhood programs, and over 15 years of providing support to early childhood programs and program staff. She has particular interest and experience in Head Start and Early Head Start programs, where she has served as a trainer, consultant to the Office of Head Start, and a Start-Up Planner.

Starting Strong: Supporting Programs in Start-Up

What are the Steps Associated with Start-Up Planning?

(Early Head Start National Resource Center. 2009. *Planning for Early Head Start Services*. Washington, DC: Department of Health and Human Services. Available on-line at <http://eclkc.ohs.acf.hhs.gov/hslc/Early%20Head%20Start/Organizational%20Profile%20%26%20Community%20Capacity/OrganizationalRe.htm>)

This document describes the four steps associated with start-up planning:

1. Utilizing resources
2. Reviewing and developing management systems and procedures
3. Preparing for program services and activities
4. Implementation

While the steps are described in distinct activities or phases, they are in fact interrelated and many of the tasks must occur simultaneously. This is what makes the start-up process so challenging.

STEP ONE

Utilizing Resources

All newly funded EHS grantees have a variety of resources available to support their start-up efforts including the following:

- **Nearby EHS programs and existing Head Start programs;**
- **Local Part C early intervention agencies;**
- **Other local community partners and agencies;**
- **A Start-Up Planner identified by the program;**
- **An Assigned Federal Specialist;**
- **Training and Technical Assistance Providers; and**
- **The Early Childhood Learning and Knowledge Center (ECLKC; <http://eclkc.ohs.acf.hhs.gov/hslc>)**

It can help grantees to establish a **Start-Up Planning Team** that manages and monitors the start-up planning process as well as early program implementation. The team can determine the status of the management systems and procedures and create timelines for all start-up activities. It is essential that they include key members who are able to provide infant and toddler expertise, program management experience, decision-making authority, and knowledge of the community's strengths and needs.

***Starting Strong:
Supporting Programs in Start-Up***

What are the Steps Associated with Start-Up Planning (cont'd.)

STEP TWO

Reviewing and Developing Management Systems and Procedures

New EHS programs bring a variety of experiences to start-up planning. Some are existing EHS programs, others are existing Head Start preschool grantees, and others are new to Head Start. Regardless, all EHS programs should have key management systems and procedures in place.

Management systems and procedures are necessary to ensure that each program meets the *Head Start Program Performance Standards*. Key systems, procedures, and data that should drive the program in Start-Up include the following:

- **An organizational structure** [45 CFR 1304.52 (a) (1)];
- **A current community assessment** [45 CFR 1305.3 (1) – (6)];
- **Written service plans** [45 CFR 1304.51 (1) (iii)]; and
- **Communication systems** [45 CFR 1304.51 (b)].

STEP THREE

Preparing for Program Activities

Putting an Early Head Start program into action involves multiple, simultaneous tasks. Some of the important considerations to prepare for implementation include the following:

- **Hiring qualified staff members;**
- **Providing a comprehensive initial staff development plan;**
- **Preparing appropriate facilities;**
- **Identifying an approach to curriculum;**
- **Ensuring coordination with community partners; and**
- **Creating a recruitment and enrollment plan.**

STEP FOUR

Implementation

As the EHS program begins to operate, systems must be in place to assess the effectiveness of the program. The flexibility to adapt and adjust services as needed is just as critical. This process is a normal and healthy aspect of any dynamic learning organization. Specific systems to address at this time include the development of the following:

- **An effective training plan; and**
- **The program's continuous improvement efforts.**

EARLY HEAD START ORGANIZATIONAL READINESS CHART

The Organizational Readiness Chart outlines necessary tasks and steps for successful start-up planning. Allowing sufficient time for a thorough start-up planning process ensures that the program will be ready to provide quality services. Considerations for successful implementation include the program's ability to:

- Fully implement the *Head Start Program Performance Standards*.
- Hire, retain, and train qualified Early Head Start (EHS) staff with infant/toddler and Head Start expertise.
- Ensure an integrated and effective management / organizational systems, policies, and procedures.
- Provide a seamless approach to continuous services that reflect the needs of the community and families served.

Program Name: _____

Date of Review: _____

Grant Award Date: _____

Target Start Date: _____

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
START-UP								
Start-up Planning Team	<ul style="list-style-type: none"> Identify team to carry out and monitor start-up plan / early implementation Ensure program option(s) meet community and family needs Hire qualified EHS management staff Hire start-up consultant if necessary Identify start-up costs and TA needs 							
Negotiated Award / Budget	<ul style="list-style-type: none"> Ensure budget reflects plans and timelines Develop budget monitoring and reporting tools for start-up and operating budget 							
		<ul style="list-style-type: none"> Develop / revise written financial and accounting procedures to include EHS 						
			<ul style="list-style-type: none"> Ensure start-up funds are spent prior to end date of start-up period 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
Organizational Chart	<ul style="list-style-type: none"> Develop / integrate EHS structure Ensure structure incorporates and supports EHS <ul style="list-style-type: none"> service model (birth to 5 continuity) systems (ongoing monitoring, self assessment, training and communications) procedures 							
Understand EHS	<ul style="list-style-type: none"> Visit at least one EHS program in close proximity Attend EHS event (national or regional) for new programs 							
ORGANIZATIONAL ELEMENTS								
Policy Council (PC) – if new	<ul style="list-style-type: none"> Establish interim PC Develop strategies for shared decision-making process and training 							
		<ul style="list-style-type: none"> Develop written bylaws and procedures for roles and responsibilities Train Board / PC / parents 						
			<ul style="list-style-type: none"> Implement 					
Policy Council (PC) – if combining with an existing Head Start PC	<ul style="list-style-type: none"> Define integration of EHS into existing Head Start PC and parent committee structure 							
		<ul style="list-style-type: none"> Revise by-laws to include EHS Monitor EHS start-up progress by PC and Board 						
			<ul style="list-style-type: none"> Approval of by-law revisions by PC and Board Monitor EHS implementation and operating budget Approvals of new / revised program policies and service plans 					

Meeting Community Needs	<ul style="list-style-type: none"> Compare program option(s) and design to community needs 								
		<ul style="list-style-type: none"> Update services based on community needs 							
			<ul style="list-style-type: none"> Update services based on community and enrolled family needs 						
Health Services Advisory Committee	<ul style="list-style-type: none"> Identify composition to ensure EHS and infant / toddler expertise including dental, vision, and mental health 								
		<ul style="list-style-type: none"> Review health-related issues at ongoing meetings 							
Collaborations with Part C	<ul style="list-style-type: none"> EHS and Part C meet 								
		<ul style="list-style-type: none"> Develop preliminary agreement 							
			<ul style="list-style-type: none"> Finalize via written agreement and obtain governing body approval 						
Child Care Subsidies – to support full-year, full-day (if not operating directly)	<ul style="list-style-type: none"> Explore feasible options Identify partners to assure full range of services (full day / full year) 								
		<ul style="list-style-type: none"> Develop systems to access funds, if necessary, and to monitor quality Establish ongoing procedures to monitor quality and child care / EHS requirements 							
			<ul style="list-style-type: none"> Complete collaborative agreements / contracts and obtain governing body approval 						

Training / Technical Assistance (T/TA)		<ul style="list-style-type: none"> Develop initial plan to support the implementation of services; update as new staff are hired Ensure T/TA on infants, toddlers, and pregnant women topics 							
			<ul style="list-style-type: none"> Implement as designed; update as necessary 						
Job Descriptions	<ul style="list-style-type: none"> Write job descriptions, assure compliance of duties to regulations and obtain governing body approval 								
		<ul style="list-style-type: none"> Review job duties with new staff 							
			<ul style="list-style-type: none"> Review job duties with new staff 						
Personnel Policies		<ul style="list-style-type: none"> Revise to support / integrate EHS staff and obtain governing body approval 							
			<ul style="list-style-type: none"> Ensure complete Human Resources record keeping 						
Management Staff	<ul style="list-style-type: none"> Hire qualified EHS Program Director and obtain Policy Council approval and submit to Regional Office 								
		<ul style="list-style-type: none"> Recruit and hire key management staff; verify qualifications and expertise 							
Direct Service Staff	<ul style="list-style-type: none"> Identify qualifications, selection process and recruitment strategy 								
		<ul style="list-style-type: none"> Advertise and recruit staff 							
			<ul style="list-style-type: none"> Hire qualified staff 						
Staff Supervision and Support	<ul style="list-style-type: none"> Verify in organizational chart 								
		<ul style="list-style-type: none"> Train supervisors on supportive supervision and various support tools 							
			<ul style="list-style-type: none"> Implement 						

Facilities	<ul style="list-style-type: none"> Identify needs; assure usable space, health and safety requirements 								
		<ul style="list-style-type: none"> Approve space plans and/or renovations underway; assure Davis/Bacon compliance 							
			<ul style="list-style-type: none"> Complete renovations; license pending 						
Equipment and Supplies	<ul style="list-style-type: none"> Identify EHS needs to be purchased with start-up funds (such as buses) Develop purchase plan and timetable 								
		<ul style="list-style-type: none"> Develop and conduct bid process Prepare ongoing materials and supplies list (include diapers) 							
			<ul style="list-style-type: none"> Purchase equipment and supplies 						
Recruitment and Enrollment of Children and Families	<ul style="list-style-type: none"> Selection and enrollment criteria developed and approved by governing body 								
		<ul style="list-style-type: none"> Begin recruitment and enrollment process 							
			<ul style="list-style-type: none"> Continue recruitment and enrollment, concurrent with offering services 						
SERVICE ELEMENTS									
Curriculum for Child Development and Services for Pregnant Women	<ul style="list-style-type: none"> Select curriculum and obtain governing body approval 								
		<ul style="list-style-type: none"> Develop curriculum planning process and tools 							
			<ul style="list-style-type: none"> Train staff on implementation (prior to enrollment) 						

Transition Plans for Children and Families	<ul style="list-style-type: none"> Identify partners (I.E. Head Start, child care, preschools, special needs programs, and Part C) 								
		<ul style="list-style-type: none"> Develop written plans, policies and tools, obtain governing body approval 							
			<ul style="list-style-type: none"> Train staff Implement plans and procedures 						
Developmental Screening and Assessment Tools	<ul style="list-style-type: none"> Identify health partners; establish links to develop agreements and service plans Develop or integrate system for obtaining developmental screening, assessment information and referral process 								
		<ul style="list-style-type: none"> Train staff on process and implementation of tools and referrals 							
Medical Home and Access to Health, Dental, and Mental Health	<ul style="list-style-type: none"> Obtain providers and establish links to develop agreements and service plans 								
		<ul style="list-style-type: none"> Develop systems to identify and track family medical homes Develop / integrate system for post-natal health visits to newborns 							
			<ul style="list-style-type: none"> Hire / contract mental health professional 						
Parent Involvement across Services	<ul style="list-style-type: none"> Involve parents on start-up team 								
		<ul style="list-style-type: none"> Establish / integrate EHS into parent committees 							
			<ul style="list-style-type: none"> Active parent involvement in planning and implementation 						

Family Partnerships	<ul style="list-style-type: none"> Identify strategies for developing family partnership agreements 							
		<ul style="list-style-type: none"> Solidify relationships and services Establish procedures and tools 						
			<ul style="list-style-type: none"> Train staff Implement 					

MODEL SPECIFIC ELEMENTS

Home-Based Program Option			<ul style="list-style-type: none"> Conduct home visits on a weekly basis and for 90 minutes (year round) Home visits have a child development focus Socializations offered twice monthly and have a parent-child focus 					
Combination Program Option			<ul style="list-style-type: none"> Class sessions and home visits are equal to services provided through home-based option or center-based option (year round) 					
Center-Based Program Option			<ul style="list-style-type: none"> Center-based care (year round) is sufficient in length of hours (part day / full day) as per community assessment (Double sessions not allowable) Center-based care is high quality Meets staff ratios and group size requirements Staff meet qualification requirements 					

<p style="text-align: center;">Family Child Care (FCC) Program Option</p>			<ul style="list-style-type: none"> • FCC service (year round) is sufficient in length of hours (part day / full day) as per community assessment • FCC service is high quality • Provide adequate and effective management for oversight of FCC homes 					
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EARLY HEAD START TIP SHEET

No. 39

Start-up & EHS/Infants and Toddlers

Is it required for a newly funded EHS program to hire a start-up planner?

Hiring a start-up planner is optional, but highly recommended. A start-up planner is a consultant, hired by the program, to help facilitate the program's start-up team through the process of planning and preparing for the implementation of Early Head Start services (often called the "start-up" process). Start-up planners are an allowable use of Head Start funds.

A good planner can be instrumental in the start-up process. This consultant can help ensure that the program meets the *Head Start Program Performance Standards*, has developed appropriate policies and procedures, and is ready to be fully operational by the target start date. It is important to choose a start-up planner who:

- Knows how to operationalize the *Head Start Program Performance Standards*;
- Understands the unique implications of serving pregnant women, infants, toddlers and families in EHS;
- Possesses management and organizational development skills;
- Understands and can work with staff and a program planning group;
- Understands Head Start within the context of the community;
- Can facilitate the implementation and planning process; and
- Knows when to seek additional help from the Federal Program Specialist.

It is equally important for programs to select a start up planner who complements the existing staff or start-up team. A "good match" will contribute to a more successful start-up period¹.

What is a Start-Up Team? Who should be on the team?

The start-up team manages and monitors the start-up process as well as early program implementation. The team can determine the status of the management systems and procedures and create timelines for all start-up activities. The team might be comprised of community members and/or staff currently employed by the Grantee.

It is essential that team members able to:

- Provide infant and toddler expertise in program planning;
- Provide knowledge and understanding of program management and design;
- Incorporate a familiarity of the community's strengths and needs into program planning; and
- Represent a voice of authority and decision-making for the Grantee.

What is the Start-Up Process?

The start-up process refers to the activities grantees engage in as they prepare to implement their funded grant, through the planning period and during the early stages of service delivery. Planning for program implementation begins during the grant application process and continues from the time of the award to full implementation of services. Each newly awarded grantee must develop a start-up plan with identified timelines.

¹ Presentation by Betty. H. Smith during *Institute for Head Start Programs Serving Infants and Toddlers and Their Families*. January 23, 1999.

Activities completed during the planning process require thorough review of the *Head Start Program Performance Standards* and should include input by parents, policy groups², community members, and staff. The goal is to be fully operational by the target start date.

The Complexity of EHS and the Head Start Program Performance Standards

The Early Head Start (EHS) program is a unique opportunity to provide comprehensive services to low-income expectant parents and families with infants and toddlers. Along with that opportunity, however, comes a great responsibility. Because of their particular vulnerabilities, very young children and their families require services of the highest quality.

Programs planning to provide EHS services must be thoughtful in how they design their program and implement the *Head Start Program Performance Standards*. The Early Head Start Research and Evaluation Project found that when EHS programs implemented the *Head Start Program Performance Standards* fully and early, they ensured quality program services and maximized the impacts on children and families.³

Because Head Start offers comprehensive services, starting up an EHS program can be very complicated. Programs with a history of working with infants, toddlers, and families may be challenged by the scope of the *Head Start Program Performance Standards*. Existing Head Start programs expanding to include EHS are often challenged by the unique needs of infants and toddlers.

For a list of topics and questions related to designing services that meet the *Head Start Program Performance Standards*, see the attached addendum *Early Head Start Implementation Questions*.

Questions to Consider in Preparing for Start-Up:

- What qualities does the program seek in a start-up planner? How does the program ensure that the start-up planner matches the program's needs? Consider:
 - Budget, including fiscal management
 - Timeline
 - Will you want the start-up planner to be physically present with your start-up team, or will a distance/electronic relationship work for your program?
 - Where are the greatest gaps in your preparation to implement EHS? An existing Head Start program may need a planner with strengths in infant/toddler expertise, while an existing infant/toddler program may need more assistance with Head Start Program Performance Standards.
- How does the start-up team ensure timely and thorough communication among start-up team members, the start-up planner, and community partners?
- How does the program ensure that the start-up team includes expertise on infant/toddler development, Head Start programming and management, knowledge of the community, and programmatic strengths and needs?

² For programs that do not have a Policy Council, an interim policy group can be selected. For programs that have not enrolled families, prospective families that would be eligible for EHS services can represent the parent viewpoints.

³ Mathematica Policy Research, Inc. **Making a Difference in the Lives of Infants and Toddlers and Their Families: The Impact of Early Head Start.** Washington, DC: US Department of Health and Human Services. 2002, p. 10.

Performance Standards, Title 45, Code of Federal Regulations:

The *Head Start Program Performance Standards* are:

- A foundation on which to build a high-quality, community-responsive, culturally-appropriate program that reflects the needs of families served.
- The framework for the delivery of quality early childhood and health and development services for infants and toddlers.

Resources:

Early Head Start (EHS). The Early Childhood Learning and Knowledge Center (ECLKC).
<http://eclkc.ohs.acf.hhs.gov/hslc/Early%20Head%20Start>

Early Head Start Implementation Questions. Addendum to Early Head Start Tip Sheet No. 39. Early Head Start National Resource Center. DHHS/ACF/OHS. 2009.

Early Head Start Tip Sheets. Early Head Start National Resource Center. DHHS/ACF/OHS.
<http://www.ehsnrc.org/Publications/index.htm> (accessed September 21, 2009).

Early Head Start Research and Evaluation Project. *Early Head Start Benefits Children and Families. Research to Practice Briefs.* 2004.
http://www.acf.hhs.gov/programs/opre/ehs/ehs_resrch/reports/dissemination/research_briefs/research_brief_overall.pdf (accessed September 21, 2009).

Early Head Start 101 Toolkit. Early Head Start National Resource Center. DHHS/ACF/OHS. 2008. <http://eclkc.ohs.acf.hhs.gov/hslc/Early%20Head%20Start>

Mathematica Policy Research, Inc. **Making a Difference in the Lives of infants and Toddlers and Their Families: The Impacts of Early Head Start.** DHHS/ACF/HSB. 2002.
<http://www.mathematica-mpr.com/publications/pdfs/ehsfinalsumm.pdf> (accessed September 21, 2009).

Planning for Early Head Start Program Services. Early Head Start National Resource Center. DHHS/ACF/OHS. 2009.

9/09

This Tip Sheet is not a regulatory document. Its intent is to provide a basis for dialogue, clarification, and problem solving among Office of Head Start, Regional Offices, TA consultants, and grantees. If you need further clarification on Head Start Policies and regulations, please contact your Regional Program Specialist.

Addendum: Early Head Start Implementation Questions

This document provides a partial listing of implementation questions for the EHS program director and start-up team to consider. The topics and questions are directly connected to designing services that meet the *Head Start Program Performance Standards*.

Child Development:

1. What is your approach to curriculum? How will you determine:
 - a. The goals for children's development,
 - b. The experiences through which they will achieve these goals,
 - c. The materials necessary to support the implantation of the curriculum, and
 - d. How staff and parents will help children achieve these goals?
2. Have you located facilities for program activities that meet *Head Start Program Standards*? How will you ensure that these facilities are accessible and developmentally appropriate for infants and toddlers?
3. How will your program activities support individualization and continuity of care? How will you recognize the importance of relationships to babies and their families?
4. How will screening for development, sensory, mental health, and behavioral concerns be conducted? How will you use multiple sources of information to obtain the most reliable results?
5. How will you help parents in securing a reliable source of ongoing health care for their children?
6. How will infants and toddlers with disabilities be recruited and served by the program?
7. How will you support parents in their role as the child's first and most important teacher?

Family Partnerships:

1. How will the development of the family partnership agreements be implemented and maintained? Which staff person (or persons) will have primary responsibility for this activity? What process has been specified to provide an opportunity for reviewing and revisiting such agreements during a family's participation in the program?
2. How do you intend to ensure that duplication of services do not occur for families?
3. How are you planning to work with families to ensure that they are able to access related community supports that are not directly provided by your program? What process and/or strategies have you developed to ensure that families are able to access services offered through referral and that they are satisfied with those services?
4. If you are serving pregnant women, what service plans and strategies have you developed?

Community Partnerships:

1. Which community agencies have you considered collaborating with – and why? [Note – the guidance within the *Head Start Program Performance Standards* lists potential community partners.]
2. How will you reach out to designated community partners with whom you expect to have collaborative relationships?
3. In which ways does your program recognize the development and maintenance of community partnerships as a task that requires allocation of resources (e.g. time and effort)?
4. How do you document the effort you expend on developing and maintaining community partnerships?
5. What confidentiality guidelines are in place to guide the sharing of information about children and families with your community partners?
6. How might you use volunteers effectively in EHS? What plans do you have to recruit and train volunteers?
7. What process will be used to regularly evaluate the effectiveness of the collaborative agreements you have in place?

Addendum: Early Head Start Implementation Questions – page 2

Community Partnerships, continued:

8. What are the identified barriers that may impact families' access to high quality services? What is the plan to address those barriers?
9. What is the process for establishing a Health Services Advisory Committee? How will your Health Services Advisory Committee membership reflect diversity of health care and health issues that are important to your community and are inclusive of infant and toddler concerns?
10. Given the identified needs of the families, as determined by the Community Needs Assessment, what other advisory committees might be necessary to ensure that families in your community have access to desired services?
11. What initiatives are currently underway in your community that might benefit from having Early Head Start as an active participant in the planning process (e.g. citizens coming together to address safety, availability of outdoor play areas, etc.)?
12. How will you coordinate with other agencies to ensure that relevant records are transferred so that continuity of programming is maintained?
13. How will your EHS staff reach out to their counterparts in the agencies where you are transitioning children and families in or out of? What supports are available for staff to perform this function effectively?
14. What plans are in place for transition-related training?
15. How will you ensure that transition planning occurs at least six months prior to the child's third birthday?
16. How will you involve parents in the transition planning process?

Staffing:

1. What plans do you have in place to make certain that all staff members understand the vision, goals, objectives, and expected outcomes associated with the EHS program as proposed?
2. How do the developed job descriptions clearly identify qualifications and specific job responsibilities associated with each EHS position?
3. How will ongoing consultation and/or support on meeting the needs of children with disabilities be provided?
4. What is the plan to ensure that staff reflect the culture and speak the same language of families being served by the program?
5. What is the process for infant/toddler center-based staff and home visiting staff to come together on a regular basis to discuss the status of their work with enrolled infants, toddlers, and their families? How will mental health consultation be available on a regular basis for these meetings?
6. What is the process for staff to do curricular planning? Have you considered building in regularly scheduled time (outside of their time with children and families) for effective planning?
7. What is the plan to support the continued professional development of staff working in your EHS program? Have you considered establishing a group and/or individual "reflective" or "supportive" supervisory process?
8. What will the program's approach to individual staff development? How will the program support staff in gaining required credentials? Will each staff member have an individual professional development plan that includes, whenever possible, academic credit for training experiences and career advancement (e.g. compensation and increased level of responsibility)?
9. How will your program's approach to individual staff development activities tie into the program's overall approach to staff development? How will you develop a professional development plan for the program that allows for cross-training opportunities for EHS, other agency staff, and/or community partners?
10. What approach will you use to conduct performance appraisals? How are performance evaluations linked with career advancement?
11. What are your agency's policies and procedures that govern appropriate staff conduct (including conduct expected by consultants and volunteers)? How have already existing policies been reviewed and revised in light of implementing an EHS program?

***Starting Strong:
Supporting Programs in Start-Up***

How Does Early Head Start Fit In?

Identifying the way that an Early Head Start program fits into an organization and addresses community needs is an important step to adding Early Head Start or expanding a current program. Even existing programs that have already done this work will benefit from revisiting their mission, objectives, and approach as a way to guide them through start-up.

1. What is your organization's mission statement? How does Early Head Start carry out your program's mission?

2. Consider your community assessment and your proposal. What do you see as the major needs of the expectant families and infants and toddlers and their families in your community ("Objectives and Need for Assistance")? What do you see as the issues facing young children and families in your community? Have there been changes since you submitted your proposal?

3. Consider your community partners. Who provides services to help address this problem? Where are there service gaps that could be addressed by your Early Head Start program?

4. In your proposal, you identified an "Approach" for addressing your communities' needs. How will your program address the issues and gaps identified in questions #2 and 3? Have there been changes since you submitted your proposal? How does your organization's mission statement relate to your approach?

For more information, see Berlin, Lisa (Ed.). 1998. Opening the black box: What makes early child and family development programs work? *Zero to Three*, 18(4).

Early Head Start

Tip Sheet

No. 10 - Revised

How can an EHS program have a written curriculum with lesson plans and still follow the baby's lead as he/she creates his/her own curriculum?

Response:

A written curriculum does not preclude the recommended practices of reciprocal and responsive interactions between teachers and babies. The written curriculum plan defined in the Performance Standards provides a framework within which a local EHS program can articulate their beliefs about what infants and toddlers need to learn and how they learn those things. The local program's curriculum plan provides guidance for how the environment is created, what materials are needed and how they can be used, and how the adults help facilitate learning. A thoughtful curriculum plan that is understood by the entire staff as well as the families will provide consistency in *how* staff follow the baby's lead and in *how well* they understand and support the learning of the baby's own curriculum.

Providing intentional and purposeful learning moments within the curriculum plan means using the knowledge of the child and his/her development to provide experiences and materials the child needs to ensure on-going development. The Performance Standards specifically uses the word "experiences" rather than "activities" within the definition of curriculum. Experiences are the specific and intentional focus of potential learning within activities. An activity may provide a variety of learning experiences for different children depending on where they are developmentally. For example, the activity of reading may provide a two-month-old child the private, cuddling time needed to establish and maintain a trusting relationship with the adult whereas with an eighteen-month-old, reading may provide the opportunity to repeat familiar words and/or to imitate approximate sounds for new ones.

Considerations:

- How does the curriculum plan describe the approach each staff member is expected to take with the infants and toddlers? This approach may be a description of what "following the baby's lead" actually looks like and what the adults are doing to promote learning while following the baby's lead.
- How does the written curriculum plan help to remind caregivers and home visitors to include all of the areas required by the Performance Standards in their planning such as: the development of trust and secure relationships, opportunities to explore sensory and motor experiences, and social and emotional development, and communication?
- How does the curriculum plan describe the process for incorporating information from the child's assessment and the Family Partnership Agreement into individualized planning and documentation?
- How does the development of the curriculum plan ensure opportunities for parents to contribute ideas concerning their goals for their children's learning and how they intend to promote that learning?
- How does the curriculum plan ensure full participation of families in the child's learning? How is respect of individual family values and beliefs embedded in the learning experience of the child?
- How does the curriculum plan ensure that the activities and environment are responsive to the varying temperaments, learning styles, languages, and cultural background of the children and families; and support the inclusion of children with disabilities, consistent with their IFSP?
- How does the curriculum plan address the intentionality of the learning experiences? Does the curriculum plan include a description of how learning experiences happen rather than a list of pre-set activities to use? Does it include the goals along with the experiences, roles of the adults, and the use of materials? Are they based on sound child development practice?

Performance Standards:

- 1304.3(a)(5) The curriculum is consistent with the Head Start Program Performance Standards and is based on sound child development principles about how children grow and learn. Curriculum means a written plan that includes:
 - (i) the goals for children's development and learning;
 - (ii) the experiences through which they will achieve these goals;
 - (iii) what staff and parents do to help children achieve these goals; and
 - (iv) the materials needed to support the implementation of the curriculum

- 1304.21(a)(1)(i & ii) In order to help children gain the social competence, skills and confidence necessary to be prepared to succeed in their present environment and later responsibilities in school and life, grantee and delegate agencies' approach to child development and education must:
 - (i) be linguistically appropriate, recognizing that children have individual rates of development as well as individual interests, temperaments, languages, cultural backgrounds, and learning styles;
 - (ii) be inclusive of children with disabilities, consistent with their Individualized Family Service Plan (IFSP) or Individualized Education Plan (IEP) (see 45 CFR 1308.19).

- 1304.21(a)(2)(i)(ii)&(iii) Parents must be:
 - (i) invited to become integrally involved in the development of the program's curriculum and approach to child development and education;
 - (ii) provided opportunities to increase their child observation skills and to share assessments with staff that will help the learning experiences; and
 - (iii) encouraged to participate in staff-parent conferences and home visits to discuss their child's development and education.

- 1304.21(b)(1)(i)(ii)&(iii) Child development and educational approach for infants and toddlers. Grantee and delegate agencies' program of services for infants and toddlers must encourage (see 45 CFR 1304.3(a)(5) for a definition of curriculum):
 - (i) the development of secure relationships in out-of-home care settings for infants and toddlers by having a limited number of consistent teachers over an extended period of time. Teachers must demonstrate an understanding of the child's culture and, whenever possible, speak the child's language;
 - (ii) Trust and emotional security so that each child can explore the environment according to his or her developmental level; and
 - (iii) Opportunities for each child to explore a variety of sensory and motor experiences with support and stimulation from teachers and family members.

- 1304.21(b)(2)(i)&(ii) Grantee and delegate agencies must support the social and emotional development of infants and toddlers by promoting an environment that:
 - (i) Encourages the development of self-awareness, autonomy, and self-experience; and
 - (ii) Supports the emerging communication skills of infants and toddlers by providing daily opportunities for each child to interact with others and to express himself or herself freely.

- 1304.21(b)(3)(i)&(ii) Grantee and delegate agencies must promote the physical development of infants and toddlers by:
 - (i) Supporting the development of the physical skills of infants and toddlers including gross motor skills, such as grasping, pulling, pushing, crawling, walking, and climbing; and
 - (ii) Creating opportunities for fine motor development that encourage the control and coordination of small specialized motions, using the eyes, mouth, hands, and feet.

Resources:

Semlak, Sarah (2000) *Curriculum in Early Head Start*. Head Start Bulletin: Early Head Start, Issue # 69, October.

U.S. Department of Health and Human Services, Administration for Children and Families, & Administration on Children, Youth, and Families (2000) **Head Start Bulletin: Curriculum in Head Start**, Issue # 67, March.

Lally, Ronald (2000) *Infants Have Their Own Curriculum: A Responsive Approach to Curriculum Planning for Infants and Toddlers*. Head Start Bulletin: Curriculum in Head Start, Issue # 67, March.

Lloyd-Jones (2002) *Relationship as Curriculum*. Head Start Bulletin: Child Mental Health, Issue # 73.

Early Head Start National Resource Center (1999) *What Curriculum Means to Infants & Toddlers* video. Infant & Toddler Distance Learning Series B-1.

Early Head Start National Resource Center (1999) *Developing Curriculum Plans for Infants & Toddlers* video. Infant & Toddler Distance Learning Series B-2.

Early Head Start National Resource Center (1999) *Curriculum in Action* video. Infant & Toddler Distance Learning Series B-3.

Revised 04/03; 03/03

The Tip Sheet is not a regulatory document and is for internal use only. Its intent is to provide a basis for dialogue, clarification, and problem solving among Regional Offices and grantees.

***Starting Strong:
Supporting Programs in Start-Up***

**Looking for Easy-to-Share
Resources and Information on
Start-Up On-Line?**

There are entire pages dedicated to elements of Start-Up Planning on the Early Childhood Learning and Knowledge Center. These resources may be particularly helpful to new programs. Early Head Start staff should be cautious about generalizing materials designed specifically for staff serving preschool programs.

Early Head Start:

<http://eclkc.ohs.acf.hhs.gov/hslc/Early%20Head%20Start>

Facilities:

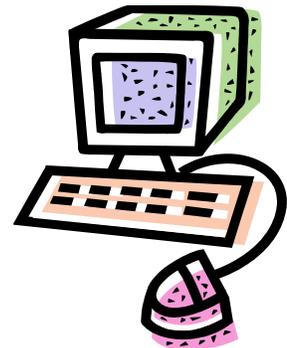
<http://eclkc.ohs.acf.hhs.gov/hslc/Program%20Design%20and%20Management/Facilities>

Fiscal:

<http://eclkc.ohs.acf.hhs.gov/hslc/Program%20Design%20and%20Management/Fiscal>

Management and Administration:

<http://eclkc.ohs.acf.hhs.gov/hslc/Program%20Design%20and%20Management/Management%20and%20Administration>



3. Explain what information was least useful to you and any recommendations you would suggest:

4. Additional comments:

Please fax or mail your completed evaluation forms after the audiocast to:

Attn: Amanda Perez
Fax: (202) 638-0851
EHS NRC @ ZERO TO THREE
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Washington, DC 20036
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Thank you!