# HEAD START HOME BASED HOME VISIT TRAINING GUIDE

## INDEX 2013-14

**Child Development and Education Approach for All Children:**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum</td>
<td>2</td>
</tr>
<tr>
<td>Education Approach</td>
<td>2</td>
</tr>
<tr>
<td>Multicultural Principles</td>
<td>3</td>
</tr>
<tr>
<td>Children’s use of the Home Language</td>
<td>3</td>
</tr>
</tbody>
</table>

**I. The Goals for Children's Development and Learning**

| General and Individual Education Goals | 4 |
| Linking Curriculum and Assessment | 5 |

**II. The Experience through which children will achieve these goals**

| HB Resources for teachers | 6 |
| PAT Curriculum | 6-7 |
| Curriculum Implementation and Assessment Timeline | 8-9 |
| Linking Curriculum and Assessment | 10 |
| Home Visit | 10 |
| Make-up visits | 10 |
| Dual Enrolled Families | 11 |

**III. Materials Needed to Support the Implementation of the Curriculum**

| Inventory | 11 |
| Newsletters | 11 |
| Fun and Learning Handbook | 11 |
| School readiness Totes | 12 |
| Family Literacy Kit | 12 |
| Social Emotional Development | 12 |

**Record Keeping**

| Children’s Files | 13-14 |
| Parent-Home Based Teacher Agreement | 14 |
| Permission and Consent from Parent form | 15 |
| Child/Family Cultural Survey | 15 |
| Teacher Observation of Parenting Skills | 16 |
| Intake Home Visit and Intake Home Visit Form | 16 |
| Home Visit Report Form | 16-17 |
| Child Plus Attendance Worksheets | 18 |
| Inkind Report | 18 |
| Weekly Goal Chart | 19 |
| Task Analysis | 19-20 |
| Terms for Appropriate Skills/Activities | 21 |
| School Readiness Summary Reports | 22 |
| Transitions | 22 |
| Timeline for SRSR | 23 |
| Portfolios | 24 |
| Drops | 24 |
| File Maintenance Checklist | 24 |
| Change of Family Status Form | 24 |
| Transfers and Re-Enrollments | 25 |
| Home Visiting Schedule | 25 |
| Home Based Time Table | 25 |

**IV. What Supervisors and Teaching Staff do to Assure Services to Families**

| Health Visits/Prep Week | 26 |
| Child Case Reviews | 26 |
| Monthly Health and Inkind Meetings and child case notes | 26 |
Curriculum
The home based education curriculum includes the goals for children’s development and learning. The written education plan outlines the experiences through which children achieve their goals, what staff and parents can do to help children to achieve their goals, and the environment and materials needed to support the implementation of the education plan. The home based teachers will implement the Parents as Teachers Curriculum. The goals of this curriculum include:

- giving the child a solid foundation for school success
- increasing the parents’ competence and confidence in giving the child the best possible start in life
- increasing parents’ knowledge of child development and appropriate ways to stimulate learning
- promoting a strong parent-child relationship
- developing true relationships between parents and schools
- providing a means for early detection of potential learning problems
- preventing and reducing child abuse and neglect

Education Approach
The home based education plan will provide an education program which is individualized to meet the needs of children from various populations by having a curriculum which is reflective of the needs of the population.

The Parents as Teachers Approach contains the following elements:

<table>
<thead>
<tr>
<th>Philosophy and Theoretical Framework</th>
<th>Human Ecology and Family Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Developmental Parenting</td>
</tr>
<tr>
<td></td>
<td>Attribution Theory</td>
</tr>
<tr>
<td></td>
<td>Empowerment and Self-Efficacy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal Visit Approach and Content</th>
<th>Parent educators facilitate, reflect, and partner with families.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Focus on healthy pregnancies, parent-child interaction,</td>
</tr>
<tr>
<td></td>
<td>Development-centered parenting and family well-being.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Structure of the Personal Visit</th>
<th>Opening</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Parent-Child Interaction</td>
</tr>
<tr>
<td></td>
<td>Development-Centered Parenting</td>
</tr>
<tr>
<td></td>
<td>Family Well-being</td>
</tr>
<tr>
<td></td>
<td>Closing</td>
</tr>
</tbody>
</table>

| Screening                           | Family Centered assessment and child screening |

| Relationship between parenting and child development | 7 developmental topics addressed throughout the child’s development using key messages: sleep, attachment, nutrition, discipline, routines/transitions, safety, and health. |
Parenting behaviors: nurturing, designing/guiding, responding, communication, supporting learning.

Foundational Visits and Guided Planning Tools
First visit, child development, parenting behaviors, developmental topics, brain development, family dynamics & culture, family supports, and planning as partners.

Multicultural Principles for HS Programs
The 2010 IM, from OHS, indicated in the REVISITING AND UPDATING THE Multicultural Principles for HS Programs that knowledge of culture and home languages was essential for a teacher to provide instructional services to support children towards acquisition of English…
The 2010 revised Multicultural Principles for HS Programs serving children from ages birth to five are listed below:

Principle 1: Every individual is rooted in culture
Principle 2: The cultural groups represented in the communities and families of each HS program are the primary sources for culturally relevant programming.
Principle 3: Culturally relevant and diverse programming requires learning accurate information about the cultures of different groups and discarding stereotypes.
Principle 4: Addressing cultural relevance in making curriculum choices and adaptations is a necessary, developmentally appropriate practice.
Principle 5: Every individual has the right to maintain his or her identity while acquiring the skills required to function in our diverse society.
Principle 6: Effective programs for children who speak languages other than English require continued development to the first language while the acquisition of English is facilitated.
Principle 7: Culturally relevant programming requires staff who both reflect and are responsive to the community and families served.
Principle 8: Multicultural programming for children enables children to develop an awareness of, respect for, and appreciation of individual cultural differences.
Principle 9: Culturally relevant and diverse programming examines and challenges institutional and personal biases.
Principle 10: Culturally relevant and diverse programming and practices are incorporated in all systems and services and are beneficial to all children and adults.

Children’s Use of the Home Language (resource from HS Bulletin 78_ELL)
The teachers and parents can collaborate in helping young children become bilingual. Our teachers will encourage parents to maintain their home language. Parents must understand the importance of their child continuing to speak in their home language if they are to become bilingual. When teachers and children do not share the same language, then it is necessary to make the curriculum multi-linguistic. Suggestions for teachers include:

- encourage children to speak their home languages with adults who share that language.
- Ask parents to sing songs, tell a story, or read a book using their home language.
- Find story books in the children’s home language and/or have parents make story books in their home language to add to the curriculum.
- If a parent requests an interpreter, the teacher will seek assistance from the Assistant Director of PACT.
I. The Goals for Children’s Development and Learning

General and Individual Education Goals

The home visit and socialization activities are designed to allow for success by the child. Each child and his family members are respected as unique individuals. Learning skills are planned and developed with parents for each child from the Work Sampling System and School Readiness Summary Report goals. At a minimum, the following are provided:

- **Physical**, including gross and fine motor development and health knowledge and practice.
- **Social and Emotional** including self-regulation, self-concept, emotional and behavioral health, and social relationships.
- **Approaches to Learning** including music, creative movement & dance, art, and drama.
- **Language and Literacy** including receptive and expressive language, book appreciation, phonological awareness, alphabet knowledge, print concepts and early writing.
- **Cognitive and General Knowledge** including math and science concepts and logic and reasoning skills.

Tasks for children are broken down into small steps which are attainable by the child. Encouraging children for the process, and not the product, enhances the child’s self esteem. The teachers strive to increase the family’s understanding of the child’s need for a positive self-image. They share specific methods with the family for enhancing the child’s social & emotional development.

The parents are included in curriculum development and are a resource for integrating cultural activities and specific family customs into the program. Parents are included in planning all aspects of the program. The parent curriculum planning is documented on the Home Visit Report (HVR) and the Socialization Plan. The parents are used as a resource for information about their child and their community. Their ideas and interests are integrated into individual activities, small group activities, and field trips. The teacher requests ideas from parents for cultural activities and activities specific to family customs.

In the event that a child is enrolled that speaks another language, every attempt will be made to provide on a regular basis, an Aide or Volunteer who speaks the child’s language. Materials and supplies will be provided for a bilingual program. When an interpreter is used during home visits or socializations, his/her signature is required on the Intake and/or Home Visit Report form. The approach to child development and education will focus on individual children’s progress, interest, temperaments, language, cultural backgrounds, and learning styles. The teacher will use the assessment system that documents the performance and progress in children’s social, emotional, physical, and intellectual growth. The assessment helps teachers gain perspective on how children learn by evaluating and documenting all areas of growth and development.

The teachers will develop learning plans in advance. Yearly, monthly, and weekly planning will reflect the long term goals of the program as well as individual interests, strengths, and developmental needs of the children. Weekly plans will provide a balance of child-initiated and adult-directed activities, including individual and small group activities, routines and transitions to support social-emotional, and physical development, as well as cognitive and language skills.
Procedure:
1. All teachers will develop a long range plan for the year that reflects broad program goals aimed at fostering optimal growth of all children in each of the areas of social/emotional, cognitive, and physical development.
2. Teachers will use a weekly planning form (HVR) & a Socialization Lesson Plan.
3. Document specific dates, area, name, age, week, and visit number
4. Document parent participation in planning
5. Using the child’s individualized assessment and the goals from the School Readiness Summary Report (SRSR), plan and list activities and objectives for home visits and socializations.
6. Integrate mental health, health, hygiene, dental, safety, and nutrition activities into the curriculum on a regular basis and document on HVR’s and socialization plans. See Home Visit Timetable
7. Staff will use The Child Management Training Guide which contains the guidance and discipline policy and is provided to parents.

Linking Curriculum and assessment
The systematic approach relies on multiple methods and sources of information, such as detailed observation notes, work samples, videos, pictures, parent report, milestone checklists, etc. These records are used to determine which children are meeting key benchmarks, which are in the process of developing these skills and which children are not making adequate progress.

No matter which strategies are used, every teacher must find a way to ensure that each child gets individualized instruction based on the needs found in his/her assessment. Teachers need to use their observational skills to look for developmental and learning that are in a formative stage and give prompts, suggestions, models and hints to see what a child does with such help.

Recording information in a systematic way helps teachers to focus attention on each child’s development, on goals and objective, and on the way authentic assessment and good planning are linked. Teachers cannot rely on memory to recall children’s learning and accomplishments.

The purpose on on-going assessment:
- To monitor children’s development
- To guide individualized planning and decision making
- To identify children who might benefit from special help
- To report to parents

Teacher’s documentation and assessment are used:
- To provide evidence of learning to parents
- To guard against assumption that children have learned the skill
- To make needed changes in response to what children have or have not learned.

Assessment helps decide:
- Individualized planning
- How long to work on a set goal or objective
- When to make changes to help children learn
II. The Experiences Through Which Children Will Achieve These Goals

During socializations and home visits, the teacher will provide opportunities for children to experience success. Teachers will help children work through difficulties and should support the child’s developing sense of self-confidence and self-worth. Teachers will help children set reasonable goals for themselves and do as much for themselves as possible to achieve these goals.

The home visits and socialization plans will integrate health, nutrition, and safety education into the education program. Nutrition education will be included at each socialization and at six monthly home visits. Non-perishable food or food items in the home will be used on these six home visits. (See Section 1 Early Childhood Development& Health Services, Home Visit Nutritious Activities) The plans will also include health education relating to visits to the doctor and dentist, role-playing, healthy habits, as well as materials in the learning centers to promote an understanding of health care.

The home visit and socialization plans should support and encourage various ways and means for children to express their creative energies through music and movement, creative exploratory art, finger plays, puppetry, dramatic play, self-expression and other avenues for communication and expression. Ample opportunities should be planned for both indoor and outdoor activities.

Home Based Teachers use Parents as Teachers curriculum as their main source of guidance, but additional resources are used to expand and compliment and give further depth as needed. Each teacher has access to the following resources at their office site.

<table>
<thead>
<tr>
<th>Home Base Resources</th>
<th>Development area</th>
</tr>
</thead>
<tbody>
<tr>
<td>High 5 Mathematize</td>
<td>math</td>
</tr>
<tr>
<td>MESS Marvelous exploration through science and stories</td>
<td>science</td>
</tr>
<tr>
<td>Anti-bias curriculum</td>
<td>Social studies</td>
</tr>
<tr>
<td>Supporting Early Literacy in the Natural Environment</td>
<td>Language and literacy</td>
</tr>
<tr>
<td>Learning to Read and Write</td>
<td>Language and literacy</td>
</tr>
<tr>
<td>Chef Combo</td>
<td>Nutrition and health</td>
</tr>
<tr>
<td>Early Sprouts</td>
<td>Nutrition and science</td>
</tr>
<tr>
<td>Hands On Heritage</td>
<td>Social Studies</td>
</tr>
<tr>
<td>A Sigh of Relief</td>
<td>Health and safety</td>
</tr>
<tr>
<td>Link Language</td>
<td>literacy</td>
</tr>
<tr>
<td>Partner with Parents</td>
<td>Family engagement</td>
</tr>
<tr>
<td>Making It Better</td>
<td>Mental health/self-regulation</td>
</tr>
<tr>
<td>Developmental Parenting</td>
<td>Family engagement</td>
</tr>
</tbody>
</table>

Additional resources are available in the Staff Resource Library. They are used to guide the provision of appropriate experiences, opportunities, materials, and interactions for all children. Basic developmental guidelines should be followed to ensure that appropriate age and stage considerations, as well as safety, are provided for the children enrolled in the program.
PAT Curriculum (see PAT Curriculum PV-3 for further details)

The personal visit plan using the PAT model has five components. These components provide a framework for the visit. They are not delivered individually, but integrated in such a way that the visit flows naturally.

- **Rapport-Building/opening**
  The first portion of the visit is used to check on concerns and to review the parent’s and child’s activities of the past week. There should be time for rapport –building, greetings, observation of changes, etc.

- **Observations of child development**
  Parent Educators and Parents share observations of any new changes in the child’s life or experiences. These include emerging skills, relationships and behavior. These observations should be shared as they occur just as “teachable moments”. Significant observations should also be recorded on the HVR and possibly captured for use in the child’s portfolio.

- **Activities between the parent and child**
  These activities are planned using the PAT Curriculum as a guide. There should be a balance of quiet and active activities, such as books, puzzle, games, snacks, gross motor activities, songs, finger-plays, or art. These usually follow a particular theme. Activities should be individualized and developmentally appropriate. The learning environment may be the kitchen table, outdoor space, or on the floor. Homemade games, daily activities, and materials in the home should be a part of every home visit.
  Emphasis is placed on the home as a teaching environment by use of household objects as educational materials and daily activities as teaching experiences. Home equipment and home –made materials should be used and documented on every home visit.
  After explaining the objectives and rational behind each activity, the teacher gives the activity to the parent. The individual objectives should correspond to and meet the needs of the child as documented on the child’s IEP or SRSR and school readiness outcomes. The parent learns by trial and error, and should be allowed to try in their own way, with little interference from the teacher. This time includes all of the children present in the home with the teacher providing materials for the siblings also. The visit provides opportunities for creativity and self-expression. It is a time to demonstrate how to use everyday experiences and materials already in the home for teaching and learning. Opportunity should be provided for parent and child initiated activities during this time.

- **Discussion of parenting topics and family well-being**
  This is the time to review hand-outs and other parent concerns. Use open-ended questions. Talk about upcoming events in PACT and the child’s life.

- **Summary/closing**
  Use the time at the end of the visit to go over key observations, affirm parent strengths, and discuss the parent follow-up and weekly goal. This is also the time to address and document support on the Health Progress Sheet, Needs and Interest Survey or Family Action Plan and Special Needs Progress sheet.
  Provide a transition from informal activities to parent education time, the Home Visitor and/or parent will excuse the child with an activity.
At a minimum, the last 20-30 minutes of the home visit are for planning future home visits and sharing socialization lesson plans; updating the child’s assessment with parent and completing or reviewing the *inkind record report*. This is also a time for reminders of upcoming PACT activities. This time could be used to refer families to other agencies, get articles for the newsletter, discuss the school readiness totes, and get suggestions from parents concerning future needs or materials. Parent planning is documented on the HVR.

**Curriculum Implementation and Assessment**

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Task</th>
<th>Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st two weeks</td>
<td>Teacher talks with the family to discuss their goals for the child and their understanding of their child’s current development.</td>
<td><em>Child/Family Cultural Survey, Language Acquisition Survey Transition Plan Checklist</em></td>
</tr>
<tr>
<td>1st 45 days</td>
<td>The child is screened.</td>
<td><em>DIAL (HS)</em></td>
</tr>
<tr>
<td>1st two weeks-Oct 31</td>
<td>Activities (that are aligned with the curriculum and assessment) are given weekly for families to work on School Readiness goals with their child. The weekly goals are broken down into small steps so that the long term goals can be achieved.</td>
<td><em>Weekly Goal Charts PAT activity pages Creative curriculum game pages</em></td>
</tr>
<tr>
<td>1st day-Oct 31</td>
<td>The teacher provides intentional learning opportunities in the classroom, home or socialization that will allow children to work on the School Readiness Goals. The teacher’s assessments of the child’s skills, interests and needs will be used to guide their planning.</td>
<td><em>Head Start Home Visit Report, Linking HV to Socialization plans and Socialization Plans</em></td>
</tr>
<tr>
<td>1st day-Oct 31</td>
<td>Child’s knowledge is assessed to establish a baseline. Every indicator on the assessment tool is rated and documentation is available to support the rating (work samples, photos, matrices, tallies, time samples rating scales, notes, diagrams, sketches, videotapes or audiotapes). The assessment is embedded into the curriculum so that progress can be monitored without “testing” the child.</td>
<td><em>Portfolio, PAT Milestones</em></td>
</tr>
<tr>
<td>October or by Visit # 8</td>
<td>The individual child’s outcomes are evaluated by the teacher and family on or before visit #8. The teacher and family complete the School Readiness Summary and goals are chosen to prepare the child for Kindergarten or transition to other EC program.</td>
<td><em>School Readiness Summary (SRSR)</em></td>
</tr>
<tr>
<td>ongoing</td>
<td>Parents are given opportunity to assess their child’s development and assist the teacher in their data collection.</td>
<td><em>portfolio</em></td>
</tr>
<tr>
<td>Nov 1st</td>
<td>Child’s screening results, parent input and teacher assessments are used to establish a baseline. Screenings are used for baseline only and not used for continuous assessment. This information is documented on the assessment checklist and sent to Central Office for data compilation.</td>
<td><em>Outcomes</em></td>
</tr>
<tr>
<td>Date</td>
<td>Activity Description</td>
<td>Notes</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>************************************************</td>
</tr>
<tr>
<td>Nov 1-Jan 31</td>
<td>The teacher continues home activities for the parents to work on school readiness goals with their child; providing learning opportunities; assessing the children (with documentation to support learning).</td>
<td>Goal Charts, Home Visit Report, and Linking HV to Socialization Plans</td>
</tr>
<tr>
<td>Feb 1</td>
<td>The teacher uses parent observations and assessments to evaluate the child’s learning. This information is documented on the assessment checklists and sent to Central Office for data compilation.</td>
<td>Outcomes</td>
</tr>
<tr>
<td>February</td>
<td>The teacher will discuss with the family the child’s progress on the established School Readiness goals on Home Visit #20. The need for any modifications to the goals is discussed at this time.</td>
<td>School Readiness Summary</td>
</tr>
<tr>
<td>Feb 1-April 30</td>
<td>The teacher continues home activities for the parents to work on school readiness goals with their child; providing learning opportunities; assessing the children (with documentation to support learning).</td>
<td>Goal Charts, Home Based Home Visit Report and Linking Home Visit to Socialization Plans</td>
</tr>
<tr>
<td>May 1</td>
<td>The teacher uses assessments to evaluate the child’s learning. This information is documented on the assessment checklists and sent to Central Office for data compilation.</td>
<td>Outcomes</td>
</tr>
<tr>
<td>Visit # 30</td>
<td>The teacher will meet with the family to review progress on the School Readiness goals and discuss transition plans. Give parent the completed portfolio. Keep original school readiness summary in child’s education file.</td>
<td>School Readiness Summary Transition Plan checklist</td>
</tr>
</tbody>
</table>

**Linking Curriculum and assessment**

The systematic approach relies on multiple methods and sources of information, such as detailed observation notes, work samples, videos, pictures, parent report, milestone checklists, etc. These records are used to determine which children are meeting key benchmarks, which are in the process of developing these skills and which children are not making adequate progress.

No matter which strategies are used, every teacher must find a way to ensure that each child gets individualized instruction based on the needs found in his/her assessment. Teachers need to use their observational skills to look for developmental and learning that are in a formative stage and give prompts, suggestions, models and hints to see what a child does with such help.

Recording information in a systematic way helps teachers to focus attention on each child’s development, on goals and objective, and on the way authentic assessment and good planning are linked. Teachers cannot rely on memory to recall children’s learning and accomplishments. The on-going assessment is used to track developmental strengths or concerns.

The purpose on on-going assessment:

- To monitor children’s development
- To guide individualized planning and decision making
- To identify children who might benefit from special help
• To report to parents

Teacher’s documentation and assessment are used:
• To provide evidence of learning to parents
• To guard against assumption that children have learned the skill
• To make needed changes in response to what children have or have not learned.
Assessment helps decide:
• Individualized planning
• How long to work on a set goal or objective
• When to make changes to help children learn

(See EHS/CC Infant Toddler Screening and Assessment Training Guide for full details.)

**Home Visit**
A total of 32 home visits (31 plus the Intake) are provided to each family during the program year. The home visit is 1 ½ hours in length (or 1 ¾ hours for a double family enrollment). The home visits must be made with the parent, step-parent, foster parent, or relative that is the primary caregiver, or other adult residing in the home who acts as the primary caregiver. Any questionable situation should be referred to the Education Coordinator in consultation with the Parent Involvement Coordinator. Home Visits must, over the course of a month, contain all Head Start components. The teacher enters the home with a written plan, the Home Visit Report (HVR) form, including a specific listing of informal activities, materials, and individual objectives. The HVR must also reflect any Health, Social Services, or Disability Services the Teacher is working on or needs to address with the family. The plan should be flexible depending on the needs of the family. The whole visit may be done to meet the immediate needs of the family. Evening or weekend visits may be necessary to accommodate the needs of the family.

**Make-up visits and missed visits**
Make-up visits are 1 ½ hours in length. Home Visits are in the child’s home unless approved by the HB Education Coordinator and Assistant Director due to extenuating circumstances. The teacher and parent may decide to complete two home visits back to back which means the teacher would be in the home for three hours. A maximum of three (3) visits per family can be made in one week. Any variation needs to be approved by the Education Coordinator. Every attempt should be made to complete 32 home visits with each family. Home visits that are missed due to program or teacher reasons, must be made up. Efforts to complete make-up visits should be documented on support offered forms or make-up attempt log. If the teacher experiences trouble with a child’s attendance, she/he should contact the Social Services Coordinator and follow the procedures outlined in the Eligibility, Recruitment, Selection and Enrollment section of the Work Plans pages 32-33. Dental and medical appointments and educational staffings cannot be counted as home visits. **The top part of the first page of the HVR form needs to be completed if there is a missed visit. Document the reason for the missed visit and send the white original to the Central Office. Keep the yellow NCR in child’s file.**
DUAL ENROLLED FAMILIES
Families who have children enrolled in both the Head Start and Early Head Start Home Based programs may choose to have their home visits at the same time. This would mean the EHS and HS teachers would have overlapping time with the family. One teacher should arrive a minimum of 15 minutes before the other to have individual parent time. The other teacher would have a minimum of 15 minutes at the end of the visit with the parent. Each Home Based Teacher would be there for one and a half hours for a combined time because of the overlap of one and three fourths hours. Teachers must plan together before the home visit so they know which parts of the home visit can be combined. Most activities should be completed together with the whole family working together in the same room. There may be activities which are inappropriate or not safe for the EHS child. The EHS teacher will have a similar activity for the EHS child to do during that time.

III. The Materials Needed to Support the Implementation of the Curriculum
Inventory
Materials are an important part of the curriculum. Head Start and Parents as Teachers believes the home environment and home-made materials are the best items to be used for the home based program. In addition, Head Start Teachers have a basic inventory listing office and home visit supplies. Teachers also have a separate inventory for the socialization classroom. Teachers also have a consumable inventory listing supplies such as paper, paint, crayons… that are replaced yearly or as needed. Items that are identified as classroom furniture, office furniture, appliances, and machines will be issued a pre-numbered identification plate, which will be attached to that item and then tracked using that identification number. All other items that do not have a pre-numbered identification plate affixed to it will have “PACT” written on it with a permanent marker and tracked on the basic inventory. The inventories are completed a minimum of once a year by the Home Based Teacher. The teacher signs the inventory and sends it to the Home Based Education Coordinator who also signs the inventory. The Coordinator updates the inventory list on the computer and files the hard copy with program records. If the update affects items with control numbers, the Office Manager is notified. If basic supplies are lost or broken or transferred, staff completes the form Report of Lost, Broken, Stolen, or Transfer Items and follows the directions on the bottom of the form.

Newsletters
Teachers are required to turn in newsletter articles to the Parent Involvement Coordinator on a monthly basis. Newsletter articles need to be at the Central Office by 4:30 of due date. (see program calendar)

Fun and Learning Handbook
The activities handbook called Fun and Learning is given to the child’s parent or guardian on the Intake visit. The activities handbook consists of activities that are developmentally appropriate children ages 30 months to 5 years old. These activities are documented on the Inkind Record Report by the parent.
**SCHOOL READINESS TOTES**
All HBT will have totes with age appropriate literacy materials. The items in these totes will be available for parents to check out weekly from September until two weeks before the end of the program year. Teachers are responsible for cleaning the items and requesting replacements. Teachers will bring inventoried and cleaned totes to the Central Office at the end of the program year. Parents are to be encouraged to use the items to promote literacy and reading time with their children and document their time on the Inkind Record Report.

**LITERACY**
Literacy Activities may include but are not limited to: activities that will promote phonological awareness, letters and words, language development, knowledge of print, building knowledge and comprehension, and types of text. The parent will also be encouraged to promote these literacy activities throughout the week, as well as enhancing their home to be a literate environment.

**FAMILY LITERACY KITS**
This project is used to enhance literacy in the home. The kit strengthens parent involvement by providing parent-child interactive time, volunteer time to create literacy materials and promotes the continuous efforts of parents to work with the child. The Family Literacy Kit includes books/projects for families to make and use with their children to assist in pre-literacy skills. All Home Based teachers will have access to a kit. They will present this kit to all families with children over 30 months during the Family Partnership Survey. Families will have the option of making it a Family Action Plan, making the items on a Home Visit or taking materials, patterns, and making the project on their own. Or, a family may choose to not participate. Staff will document Family Literacy on the HVR, the date the kit is presented and whenever parents work on or ask for more materials for projects. Teachers will have one original of the literacy binder to show parents and to use on Home Visits as applicable. Resources to make the literacy binders will be included in the Family Literacy kit.

**SOCIAL-EMOTIONAL**
On the home visits the teacher and parent will work together to plan activities that promote positive relationships by encouraging the use of feeling words, anger/emotion management, and problem solving skills.

Parents will be encouraged to work with their child so that the child will develop a rich and varied feeling vocabulary. Books will be used that contain feeling words. Parents will be given a list of feeling words so that they can continue to work on the social-emotional development for their child. Feeling activities will also be planned for the home visits. Problem solving techniques will be reviewed and discussed on home visits. Each family will be given a “Solution Kit” to help their child choose problem solving solutions at home. The “Solution Kit” will also be used and discussed at socialization.

If parent or staff feel that intensive interventions are needed to redirect inappropriate behaviors, the teacher and parent will work together to develop an assessment of the behavior and a behavior support plan as needed.
RECORD KEEPING

Education files are the responsibility of the Education Coordinator. Education files are kept in locked file cabinets. Access is limited to component Coordinators, the teacher assigned to serve the family, the Supervisor, and Office Clerical Staff responsible for record keeping.

Children's Working Files

The teacher will set up and maintain a file on each child that is taken to each home visit. These files will be set up after the Intake visit and before Visit #1. The Home Based Education Coordinator will supply the Teacher with Binders, folders, dividers, tabs and labels for designating what form goes in the binder and where.

Each Binder will contain:

- HVR Checklist
- Timetable
- Parent Education Handout Grid and any handouts for the visit
- Emergency care information-copy
- Release of Children- original
- Permission and Consent from Parents – copy
- Permission for Publicity and Public Relations for Foster Children, if applicable

The above items are located in tabbed sections in the child’s binder.

The following items are in specific folders/sections according to the Component:

Social Service/ Parent Involvement folder:

- Family Action Plan (if applicable)
- Support Offered forms, if applicable
- Volunteer Services Survey (original)
- Parent/Guardian ID form, if applicable
- Family Needs and Interest Survey - original
- Family Partnership Survey-until completed
- Social Service Referrals - until completed

Health Folder:

- Begin Sheet-Health screening information - until completed
- Follow Up Progress sheets - until completed
- Health Screening Progress sheet
- All medical alerts, medication and dietary forms- if applicable

Special Services/Screening:

- Special Services Progress Sheets
- IEP/IFSP copy, if applicable (not on prenatal)
- Copy of developmental screenings (DIAL and Parent Questionnaire)

Education Services:

- School Readiness Summary Report (SRSR) (not on prenatal)
- Transition Plan- if applicable
- Home Visit Report forms (for current week and past week)
- Weekly Goal Charts
- Inkind Record Report (3-4 extras for parents)
- Linking HV to SA Form

The above forms are used for information or documentation during most home visits. It is important for these forms to be available and updated each week.

The forms below are useful for planning or while in the office, but once they are completed, do not have to be taken to each home visit.

The teacher will maintain files in her office that contain:

1) Yellow copies of the Home Visit Reports (HVR’s)
2) Children’s past files from previous enrollment
3) Copies of information/forms sent to Central Office if desired
4) Copy of Certified Birth Certificate of enrolled child
5) Verification of receipt (if applicable)
6) Action Plans from other agencies (copy)
7) Social Service Release of Information, copy if applicable
8) Make-up visit attempt log, if applicable
9) Copies of child’s health screenings including: physical, immunizations, lead and TB, vision and hearing (if site is DCFS licensed)
10) Authorization for Release of Protected Health Information, copy
11) Payment Request-if applicable
12) Illness/accident reports (copies)
13) Releases for Health Screenings (copies
14) Parent Authorization for health and developmental procedure (copy)
15) Child/Family Cultural Survey
16) a copy of the child’s Application or Prenatal Application
17) copies of any Change of Family Status forms, stapled to front of application
18) Parent-Teacher agreement
19) Intake Visit Checklist
20) File maintenance checklist

All files will be used for self-assessment and record monitoring of the program and teacher. Teachers must be able to produce desired files upon request of Supervisor or Coordinators.

Home Based children who attend socializations in a licensed facility will have all the required DCFS paperwork included in the teacher’s child files. The teacher’s child files should be on site at the licensed site anytime the children are attending socialization there.

All files are confidential and need to be kept locked when in vehicle or office if teacher is not present.

**Parent-Home Based Teacher Agreement**

On visit 1, the Parent-Home Based Teacher Agreement (an agreement between the teacher and parent) is discussed and signed by both parties. The teacher should read each item on the agreement and check it if the parent agrees. The Parent Handbook includes this
agreement – the parent may check each item on the Parent Handbook copy and sign as their copy of the agreement. There may be some that the parent cannot agree to do, and that is acceptable. This list is only to let the parent know what we expect of them. The teacher may need to emphasize the importance of being home for each visit and being willing to do make-up visits, as well as the procedure to follow if home visits must be canceled.

The parent keeps the copy in the Parent Handbook, and the original copy is kept in the child’s file. The agreement is reviewed about the 17th visit and any problems are discussed at that time. This agreement can be reviewed at other times, if needed.

**Permission and Consent from Parent form**
On the Intake visit, the Permission and consent from Parents form is explained to the parent, completed, and signed. **The form is mailed to the Central Office as part of the Intake paperwork and a copy is kept in the child’s file.**

If a parent states that they do not wish their child or family to be photographed, the Education Coordinator is responsible for making Coordinators, Supervisors, and service personnel working with that child aware of this. **A copy of any NO responses should be posted in the Health & Safety Notebook at socializations.**

If a foster child is enrolled, the teacher should note that on the form. **Foster parents or DCFS Caseworkers cannot sign THE PERMISSION FOR PUBLICITY. THE PERMISSION FOR PUBLICITY FOR FOSTER CHILD LETTER/FORM MUST BE MAILED TO THE Authorized agent of the DCFS guardian FOR PERMISSION FOR THE CHILD TO BE PHOTOGRAPHED FOR THE NEWSPAPER, ETC.** This form must be filled out according to the instructions on the form. In the event the press is present to cover a field trip or class event, or if someone other than a PACT staff member is taking pictures/videotaping activities and the Foster Child OR ANY CHILD does not have permission to be included—that child should be kept out of the picture, etc.

**Child/Family Cultural Survey**
This form is completed with the family on visit #6 in conjunction with PAT Foundational Visit #6. The parents are the resource for integrating cultural activities into the Home Visits and Socializations. Teachers will use the information from this form to individualize for the children with activities specific to family customs or culture.

**Language Acquisition Survey** Form in English and Spanish
The Language acquisition survey is completed by the teacher when the family’s home language is other than English. The survey is designed to gather cultural and linguistic information about the child and family. The teacher uses the information to develop a plan for children’s continued use of the home language and a plan for children’s acquisition of English.
**Teacher Observation of Parenting Skills form** - This form will be completed by the HS Teacher within 30 days of the child’s enrollment and a copy forwarded to the Parent Inv. Coordinator. The teacher will keep the original. Follow-up will occur as indicated throughout the program year. A second observation will be completed on the original form on each parent in April.

The teacher will observe the following areas: Parent/child bond, appropriate expectations, consistent and positive discipline, child development knowledge, health & safety needs are met, and spending quality time with the child. The teacher will be able to observe these qualities of the parent through home visit time, at socializations or during class time, by checking weekly goal and inkind record reports, and through interaction time at parent meetings.

**Intake Home Visit and Intake Home Visit Form**
The Intake home visit is the first visit made to the selected family. The Intake Visit for home based must be a minimum of 1 ½ hours.

The teacher and parent set up a weekly home visit time, discuss the Parent Orientation meeting, and plans for the child’s medical and developmental screenings.

For this visit, the teacher uses an Intake Home Visit form making a (✓) by each item as it is discussed. Parents sign and date the form if they feel they will enroll in the program. The signed form is documentation the family has completed the enrollment process. The enrollment date (at the beginning of the year) is the first day of Week #1 for Head Start Home Based families. For families that are enrolled throughout the year, the Intake visit is completed and the enrollment date will be the first home visit (HV#1). Inkind for space in the home is assumed and counted unless the teacher marks “home visit not in the home” on the HVR.

**Home Visit Report Form (HVR)**
A home visit is planned weekly by the teacher and parent for each enrolled child, prior to the home visit, using the Home Visit Report form (HVR). The Home Visit Report will include time for active and quiet activities, outdoors when possible, child-initiated, and parent/teacher directed activities. The planned informal activities will include objectives for each activity to individualize for the child and to meet the SRSR goals. The teacher will also document specific, objective, and concise anecdotal notes for each objective. These notes will be used to rate the child’s skill level for school readiness outcomes. The planned activities will be developmentally appropriate and provide for physical development of large and small muscles, social-emotional development, approaches to learning, language and literacy as well as cognitive development. The Home Visit Report documentation will show that all components are integrated in the home visit.

The Home Based HVR will have space to document lesson plans including: materials used, observations, and milestones to be observed/assessed, PAT parent-child activity, book used, parent handouts discussed, video segment, parent input for next home visit and/or socialization, program information shared, and family needs.
The HVR will show that all components are integrated in the home visit. Documentation will specifically show: Parent and Child Interaction/Education, Developmental-centered Parenting, Family well-being, and Parent Engagement have been discussed. When applicable, Special Needs and social services will be documented as being addressed. Whenever possible, the teacher should use materials and equipment in the home to help guide the parent in developing the child’s skills, using items that are readily available. If homemade materials/activities are used by the teacher, the teacher should offer a copy to the parent, so that learning can continue throughout the week. If purchased materials are used, the teacher should give the parent samples or ideas on how these could be replicated. The HVR should clearly show homemade and home equipment that was utilized on the Home Visit. Each week the HVR form must reflect at a minimum of one activity and individualized objective planned in the 5 core learning domains including one gross motor activity. Indoor and outdoor space can be utilized to develop the physical development of the child. Be sure these activities are MVPA which means they are vigorous enough to raise the child’s heart rate. It is ideal for all children and adults present to participate in the gross motor activities if physically able. The Education Coordinator observes and provides feedback to each teacher to ensure these procedures are being implemented. When possible, home visits are scheduled when disruptions will be minimal. The teacher encourages parents to turn off all electronic devices during the home visit and to discourage visitors and other distractions during the home visit time. The teacher works with the parent to locate space for the home visits which is reasonably clear of clutter and confusion and is physically comfortable for both child and adults.

Most activities should be planned and documented on the HVR prior to the home visit. Observations/discussions should be documented as they occur during the visit. If the parent or children have other activities they would like to do, the teacher may incorporate their ideas into the home visit if they are consistent with PACT’s curriculum or supportive of good child development. Document child’s lead or parent ideas on HVR.

On page two on the HVR, the items should be marked with a (√) if they are reviewed or (√) N/A if not applicable. Any additional items that are reviewed/discussed with the parent should be documented. Teachers must document handouts given to the parents on the HVR or the Handout Grid. Each visit should include 1-3 handouts from the PAT curriculum.

Parents are encouraged to make comments and then sign the Home Visit Report. The comment does not need to be elaborate, but we would like for the parent to make a comment each time. If the parent wants a copy of the HVR, the teacher will provide a copy. The teacher sends the original to the Central Office and keeps the duplicate in the child’s separate file. The Home Visit Report forms, with Inkind attached, are due five days after the teacher’s office day, unless a socialization activity is scheduled on the office day. If due to unusual circumstances these deadlines cannot be met, the teacher is to call and inform the Supervisor. In that case, the supervisor and teacher will jointly prioritize duties.

When Home Visits are not made on the scheduled day or time, but they are made at another time during the same week, then Teacher will use the original HVR to
document the missed visit and the make-up visit. At the top of the HVR the code for missed visit is circled and reason why visit was rescheduled. The regular scheduled date will be put in the space marked scheduled visit time and the make-up visit date will be when the visit is actually completed. See ERSE section page 32/33 for more information.

If the home visit is missed and not rescheduled that same week, the first page of the HVR is sent to the Central Office with reasons documented for the missed visit and the top section completed. All duplicate copies of the HVR are returned to the Central Office at the end of the program year.

**Child Plus attendance worksheets** See ERSE section 5 of the Work Plans page 32

Home Based Teachers will keep this report with them and document attendance on it daily. This form is used to report attendance every week on Friday. Home Based teachers will use the day/time slot indicated for each family on their monthly schedule to determine how to mark attendance. If a regularly scheduled Home Visit is canceled and made up in the same week, staff will mark HR/M or FR/M according to who canceled the visit. If a make-up visit is not made and the regularly scheduled visit was missed due to the fault of the staff member, it will remain an HR even if a make-up visit was attempted. Attempted make-up visits may be documented on the Make-up Attempt Log. A separate form should be used for each family and attempts documented throughout the year. A copy should be mailed to the Social Service Coordinator and the Teacher’s Supervisor.

At the end of each month the Home Based Teacher will copy the attendance report to keep in her records and mail the original to the Central Office.

**Inkind Record Report**

THE PARENT SHOULD ALWAYS HAVE AN EXTRA SUPPLY OF INKIND FORMS – Only one week should be recorded on each form. Therefore if there is a missed visit or visits are missed due to Winter Break, etc. they will have forms to record the time spent working with their child each week.

**Checklist for Quality Improvement in Inkind Report:**

- Make checking validity of inkind with parent at each visit a priority. Your signature makes you accountable for the inkind. The activity charts will periodically be reviewed at Central Office. If the chart shows unreasonable times recorded, this will be reflected on your evaluation. Before you sign these Reports, KEEP IN MIND: Even if a parent does not work outside the home it is very unlikely that every activity is worked on every day, every week.
- Discuss concerns with parents regarding validity of inkind. Make sure parents know that they don’t produce inkind simply to meet a program requirement, but that it is a way for them to learn how to observe and assess their child’s learning and development.
- Give examples of acceptable/unacceptable inkind
- Stress the need for continued and reasonable inkind with documentation.
- Stress that inkind should reflect time spent working on the weekly goal. The attached activity from PAT or Creative Curriculum is working toward the child’s goals.
√ Get signatures from anyone that has worked with the child on the activities listed (must be 18 years of age).

√ Time should only be recorded when the parent is in control of the activity

√ Every completed HVR must have an Inkind Record Report stapled to it and sent to the Central Office.

WEEKLY GOAL CHARTS
Weekly Goal Charts are written and left with the parent beginning on the Intake Visit. The Teacher will choose the first goal based on the child’s age and developmental level. The Teacher will write the goal and choose an appropriate PAT activity page or Creative Curriculum Game page to staple to the weekly goal chart. The teacher might want to copy the weekly goal chart in order to have an extra if the parent should lose the original. After the first visit, the teacher and parent will select goals for the charts from the Activities Handbook called Fun and Learning, PAT checklist, school readiness goals or other screening assessments. After the SRSR is complete (HV #8) those goals should be used in choosing the activity for the weekly goal chart. Teachers will use the PAT activity pages and/or Creative Curriculum Game Pages for ideas/activities for teaching the child’s weekly goal. Write the goal on the weekly goal chart in a measureable format. See instructions below. Then staple the appropriate activity page to the weekly goal chart. Fill out the top part of the page. Make sure all blanks are filled in.

The weekly goal states what goal will be worked on with the child throughout the week. If necessary the skill should be broken down into small steps that the child can achieve during the one week period. The goal should be written in a full sentence which states specifically what will be accomplished. THE GOAL SHOULD BE MEASURABLE AND SPECIFIC.

Example:
Johnny will **name** the color red in imitation. Instead of Johnny will **identify** the color red in imitation.

Amy will **draw** a square on request. Instead of, Amy will **make** a square on request.

The teacher will indicate with a √ what learning domain the activity will enhance. The teacher and parent will discuss how the skill will be worked on with the teacher giving and explaining suggestions using the parent activity pages from PAT or Creative Curriculum.

Weekly Goal charts are collected each week. The parent completes the middle section which asks if the child enjoyed the activity and if the parent feels the child accomplished the goal. The parent can keep the parent activity page handout, but the teacher places the completed goal chart in the child’s portfolio and checks on the HVR that the goal chart was completed and returned.

TASK ANALYSIS
Task analysis refers to choosing a terminal or long-term teaching objective and breaking that goal into several sequential smaller steps or target behaviors. These target behaviors are tailored to meet the individual learning characteristics of a particular child. A terminal objective for the child is determined based upon his/her present skill level. For example, a
terminal objective for a child who can match colors but is unable to name any, might be to work with the child to name two colors upon request. Depending upon the child’s rate of learning and his/her present skill level, this goal may take a considerable amount of time to accomplish. To assure that the child is successful, you would break the task down into a series of smaller, sequential steps which the child could achieve in a shorter time. This procedure aids in specifying the behavior you wish to teach and provides a step-by-step progression for the child in attaining the desired terminal behavior.

An example of task analysis of names “nose” follows:

**Planned objective:** Will name “nose”

**Present behavior:** Points to his/her nose when asked, “Where is your nose?”

1. Will point to nose of another person
2. Will point to nose on a picture of a face
3. Will repeat “nose” in imitation when you point to his/her nose and say “What is this?”
4. Will say “nose” when you point to his nose and say “What is this?”

This is only an example of the progression one might use to teach this behavior. There are other ways also. The target behaviors you choose will be dependent upon the particular child’s present skill level and his style of learning. It may be necessary to break the task into smaller steps for the child to achieve success; or it is possible that the child will reach the terminal objective without individual teaching of each sub-skill.

This process of task analysis often involves changing the condition under which the behavior occurs. Three types of conditions or aid are: physical, visual, and verbal. The following example shows how, by changing the conditions, the task becomes progressively less difficult and closer to the terminal goal.

**Planned objective:** Jane will draw a square upon request

**Present Behavior:** Jane can grasp a crayon and draw a circle

Physical: Jane will trace over a square with mother guiding her hand
Visual: Jane will connect dashes to complete square
Visual: Jane will copy a square
Verbal: Jane will draw a square with verbal cues, “across-down-over-up.”
On Request: Jane will draw a square upon request.

**TYPES OF AIDS:**
Aids – for doing something:

**Physical Aid –** Must specify what kind of physical aid

Examples: Holding Mom’s hand
          Holding a chair or table
          Mom guiding hand
          Template

**Visual Aid -** Must specify what kind of visual aid

Examples: In imitation (or with a model)
          With an initial model
          Copying
          With dots or dashes
          Choice of 2
Verbal Aid - With verbal directions (be specific)
Examples: For a circle – “around and stop”

On Request No Aid
Aids for naming something (when you want the child to talk):
Must use Verbal Aids
Model: (Say it for the child each time)
This is a dog. What is this?
This is a dog. What is this? etc.
Initial Model: (Say it for the child once)
This is a dog. What is this?
What is it again? etc.
Choice of 2: Is this a dog or a cat?
Initial Consonant: This is a d__.
On request: What is this?

Terms for Appropriate Skills/Activities

Recognition of:
letters, numbers, colors, shapes, sizes, textures, differences/similarities, name,
grouping
(classifications), characteristics

Fine Motor Skills:
coloring (not necessarily in the lines), cutting, pasting, writing, drawing, tracing,
lacing,
sorting, manipulating (puzzles/games with small pieces)

Language Skills:
listen to a story, retell a story in own words, sequence events of a story, describe
characters, tell likes/dislikes, follow 2-step directions, respond to direction words
(over, under, next to, in etc.), describe feelings or actual events, make up own story

Math Skills:
counting, sorting, grouping by characteristics, comparing, predicting (more/less,
bigger/smaller, etc.), measuring

Science Skills:
observing/discussing nature, investigating, talking about things already seen in nature,
predicting outcomes (cocoon, ice, etc), cause and effect relationships

Physical Development:
throwing, catching, bouncing, lifting, running, hopping, skipping, jumping, following
physical task directions

Self-Care:
zipping, snapping, buttoning, tying, dressing, grooming, hygiene (bathing, washing
hands, brushing teeth), organizing belongings, and maintaining routine chores.
**School Readiness Summary Report (SRSR)**

PACT provides an organized series of experiences to meet the individual differences and needs of participating children and their families. Service plans for each child and family are developed each year. For special needs children, see the Disabilities Plan.

A *School Readiness Summary Report* is written on each enrolled child who has been in the program at least six (6) weeks with no less than eight (8) more weeks to be enrolled before the end of the program year.

**Step 1**
The first step for writing the SRSR begins on visit #1 with the DIAL screening. The results of the screening will be transferred to the top of the SRSR. Screening results will be recorded as *OK, Potential Delay and or Referral in Process*.

**Step 2**
Assessment continues using the Teaching Strategies GOLD checklist and outcomes collection sheets. On visit #3 the teacher completes page #1 or the front of the SRSR. This information includes child’s age, screening results, temperament, strengths, interests and any concerns.

**Step 3**
Using all information, the parent and teacher plan the SRSR goals during visit #6. As soon as the goals are selected, the teacher writes the SRSR. Enter the date the teacher actually writes the SRSR in the “date” space, and the date the teacher and parent discuss the completed SRSR should be included with the parent’s signature. Teacher should also assess if they feel the child is developing as expected at this time.
The bottom of page one asks for information about Pre-K services the child may be receiving. Teachers should get a release to discuss child’s progress with the Pre-K teacher.

**Step 4**
Teacher writes goals and presents the goal page to the parent by visit 8. If parent agrees with the goals, they sign and date the form. Teacher gives parents a copy and sends a copy to HB Education Coordinator.

**Transitions** – The teacher will mark yes or no that the child will be kindergarten eligible for the next program year. Teacher will start the *Transition Packet* in the fall and continue reviewing 1-2 pages a week until spring. When the packet is completely reviewed it is given to the parent. Plans for a kindergarten visit/field trip and or kindergarten related activities should be completed at this time. A kindergarten themed home visit should also be completed. Teacher uses the *Kindergarten Transition Plan checklist* to document transition activities. (See section 2 Family and Community Partnership page 57 for more details.)

The “Performance Review” sections will be completed using the child’s formal assessment as a guideline. Use the terms N-not yet, E-emerging, D-developed to document the child’s progress. Two goals should be written for each area: Social & Emotional, Approaches towards Learning, Language & Literacy, Physical Development and Health (MVPA) and Cognition and general Knowledge (math & Science).
The goals should include:
Who – the person who will perform the behavior, usually the child or parent
Will do what – the specific, measurable, and observable behavior to be performed
Aide – what specific assistance or help you will give the child, such as when given a model, when parent holds his hand, in imitation, given a sound cue, or on request
By when – usually April 30th

At the bottom of page one– MAKE SURE THAT YOU HAVE INDICATED ANY/ALL SPECIAL SERVICES THAT THE CHILD IS RECEIVING. Do not leave this area blank, mark NO if child does not receive any special services.
On or before visit #8, the teacher will review and discuss the SRSR with the parent. At this time the parent signs and dates at the bottom of the form. Any adjustments can be made at this time. Copies are distributed as follows:
– parent- receives a copy after they agree to the goals and sign the form
– Education Coordinator receives copies after parent initially signs the form.

Original is kept by teacher in child’s working file to document review performance and dates achieved.

Throughout the remainder of the year, the teacher will break down the goals and work on objectives on home visit activities and Weekly Goal Charts. The teacher should document in January and April the level of child’s development for each goal and the date reviewed with parent. Keep updated copy of SRSR in child’s file for review by supervisor upon request.

Next Steps
Next steps should address any concerns about child not progressing towards desired goals and outcomes. These steps could include adding new goals or adjusting goals. It could address changing teaching methods, adjusting for language differences or adding specific materials. Be sure to address transition activities and outcomes as part of the next steps.

The Teacher will review the SRSR goals and document the “performance review” at year end. A final copy is given to the parent. The original is kept in child’s file.

Timeline for SRSR

<table>
<thead>
<tr>
<th>WHO NEEDS AN SRSR:</th>
<th>All enrolled children who have been in the program at least 6 weeks with no less than 8 more weeks to be enrolled. Any HS child enrolled after February 1st does not need an SRSR.</th>
</tr>
</thead>
<tbody>
<tr>
<td>On visit # 3</td>
<td>Complete page 1 of SRSR with parent</td>
</tr>
<tr>
<td>ON VISIT #6</td>
<td>Plan SRSR goals with parent using the following: assessment checklist, school readiness outcomes, PAT milestones, child’s IEP..</td>
</tr>
<tr>
<td>After visit #6</td>
<td>SRSR is written by the teacher on office day</td>
</tr>
<tr>
<td>ON or before VISIT #8</td>
<td>Review SRSR with parent on home visit. Adjust as needed. Sign. Distribute copies:</td>
</tr>
<tr>
<td></td>
<td>– Parent</td>
</tr>
<tr>
<td></td>
<td>- Education Coordinator</td>
</tr>
<tr>
<td></td>
<td>-Teacher retains original in child’s file</td>
</tr>
<tr>
<td>VISIT #9-30</td>
<td>Teacher breaks down goals and works on them through home visit activities and Weekly Goal Charts. Document progress in Review section. Document date achieved when completed. Send copies to Education Coordinator in January and April after Winter and Spring performance reviews are completed.</td>
</tr>
<tr>
<td>2 WEEKS PRIOR TO END OF PROGRAM YEAR</td>
<td>Go over SRSR with parent, pointing out level of functioning. Fill in final review date. Give a copy to parent. Keep original in child’s file.</td>
</tr>
</tbody>
</table>

PORTFOLIO

A separate file (PORTFOLIO) will be used for formal assessment and individual outcomes.
(See Screening and Assessment Training Guide for more instructions on Portfolios)

Drops
When a child drops during the program year for any reason, regulations require replacement of the family within 30 days. As several attempts may need to be made before replacement is completed, it is important that the previous timelines set for intake procedures be strictly followed by all staff. The Home Based Teacher is required to notify the Assistant Director by phone when a family drops from the program. The Assistant Director will complete a Change of Status form for all drops and distribute as necessary.

File Maintenance Checklist

Staff use the File Maintenance Checklist (attached to the front of the child’s files at intake) when a child leaves the program in mid-year and for all children at the end of each program year. Staff will follow instructions on the form to shred form, retain form in file, or submit form to appropriate coordinator. All children’s files that drop mid-year will be hand carried by staff to the Central Office at the next staff meeting. All children’s files at the end of the program year will be hand carried to the Central Office as designated in End of Year Checkout Procedures. At the end of each program year, records for all children not returning are accumulated and placed in the locked record storage room. Children and family files are destroyed by the Office Manager five years after the end of the child’s enrollment in the program, unless instructed otherwise by the Executive Director.

Change of Family Status form
If at any time throughout the year family data changes, it is the teacher’s responsibility to notify the Assistant Director by filling out a Change of Family Status form. Information to be noted includes:

1. New phone number
2. New address
3. New finding directions
4. Change in family name
5. New marriage
6. New changes, additions or removal of family members
7. Change in medical card, ALL KIDS, or insurance status
The completed form should be mailed to the Central Office on the Teacher’s next office day. The teacher should staple a copy of the completed Change of Family Status form to the front of the copy of the first 2 pages of the child’s Application that is in the child’s file. The Assistant Director will review the form when it is received and then forward it to the designee. The designee will make the change in the Child Plus computer data files and forward copies of the form to the Clerk/Typist, the Disabilities/Mental Health Coordinator and the Health Coordinator. The original Change of Family Status form is then stapled on the top of the child’s original Application located in the Assistant Director’s lateral files.

**Transfers and re-enrollments**

No child will be transferred or re-enrolled without the approval of the Assistant Director. Home Based Teachers will communicate with the Assistant Director when they become aware that a child needs transferred or re-enrolled.

If a child is being transferred or re-enrolled in the same program option, the Assistant Director will contact the Home Based Teachers who will be receiving the child. Arrangements concerning the child’s files will be made at this time.

When a child wishes to re-enroll or transfer from a Center Based Option into a Home Based Option the Assistant Director will contact the Home Based Teacher and tell her what week number and visit number the Home Based Teacher will start with on the HVR. The Home Based Teacher begins her visits according to what week number the child completed in the Center Based program.

**Home Visiting Schedule**

These schedules are sent to the Central Office monthly (prior to the beginning of the month) or as changes occur. It will include the following information **(BE SURE TO CONTINUE TO COMPLETE THE SCHEDULE COMPLETELY ALL YEAR)**

- Hour beginning and ending work
- Complete names of children & parents enrolled
- Total hours worked each day
- Telephone numbers
- The time frame of each visit
- Scheduled lunch time
- Office days and socialization dates

When a home visit is canceled, the teacher is to call the Central Office to report a schedule change. The teacher will also report their whereabouts for that time period so the Central Office can contact the staff member if needed.

**ALL SCHEDULE CHANGES SHOULD BE CALLED INTO CENTRAL OFFICE**

(This includes missed visits, make-up visits, etc.)

**Home Based Time Table**

The Home Based Time Table is used throughout the program year by the teachers. It includes all four component areas of the Head Start Performance Standards. Teachers will have a Time Table in each child’s file. Everything listed on the Time Table must be documented on the HVR OR CHECKED AND DATED ON the Timetable for the correct visit.

The Home Based Time Table is dated by visit number 1 through 31 and each activity listed on the Home Based Time Table must be documented on the Home Visit Report (HVR) form. It also includes guidelines for required socialization activities (on the back of the last
page). The Home Based Time Table reminds the teachers what activities should be discussed with the parent. As new families enroll, the teacher begins with visit #1. The teacher has the flexibility to individualize the order of handouts.

The activities/information listed on the time table will be done in addition to the plan of the PAT Curriculum that you are using for that particular home visit. The Home Based Time Table is revised every program by the Program Coordinators and Executive Director, based on the revised Program Work Plans. Input is obtained for the staff, parents, and Policy Council members.

IV. WHAT SUPERVISORS AND TEACHING STAFF DO TO ASSURE SERVICES TO FAMILIES

Health Visits/Prep Week
Home Based Teachers will have one week after Intakes and prior to starting home visits to conduct Health Visits. This week’s priority is to complete as many of the children’s required health screenings as possible. These visits will not count as Home Visits and there is no minimum amount of time required for each visit. Parent time can be inkinded when completing a required health screen on the child. Teachers are to offer assistance to families in the form of transportation, making phone calls to set up appointments or remind parents about appointments and payment requests. If the family says they have already completed the screening, the Teacher needs to follow PACT procedures including the use of releases to get the screening results.

See Section #1 Early Childhood Development & Health Services for more details.

Child Case Reviews
Home Based Teachers will meet with an assigned Coordinator in November and February/March to review each child’s individual strengths and needs. The Child Case Review will determine what children will have a Family Support Plan. However, you can request a formal Family Support Plan meeting at any time throughout the year. The Child Case Reviews may also determine assistance the Teacher needs to deliver services to the family.

(See more details in the Early Childhood Development and Health section of the Work Plans page 21)

Monthly Health and Inkind Reports Review
Every Home Based Teacher will meet monthly or as requested with their Home Based Education Supervisor to review Health and Inkind reports. The purpose of these meetings will be to increase the number of completed health screenings and Inkind. Meetings will be in person when possible and Teachers will receive updated reports to use in monitoring progress. Home Based Teachers will need to copy all health progress and follow-up sheets and mail them to their Supervisor weekly.

Child Case Notes
This form may be used by staff to document any concerns which they want to discuss or share with a Supervisor or Coordinator. These are confidential and only used as a reflective piece to help problem solve a situation. Mail a copy to the appropriate Supervisor.