WALLED LAKE HEAD START
GOVERNANCE

Relates to Head Start Program Performance Standard(s) 1301.1

Overall Purpose of Program Governance Policies:
A formal program governance structure provides an agency with strong oversight and broad representation from the community. Head Start leadership consists of three key entities:
- Governing body and Tribal Council
- Policy Committee
- Management staff

Purpose:
The WLCSD governing body carries out the legal and fiscal responsibilities of the organization to oversee the Early Head Start and Head Start programs. The governing body is elected by the Walled Lake Consolidated School District. The Head Start/Early Head Start Parent Policy Committee is composed of Head Start/Early Head Start parents and community stakeholders. The Policy Committee sets programmatic direction. The Policy Committee ensures that all voices are involved in the decision making processes and creates a system of checks and balances. The management staff oversees day to day Head Start program operations.

Procedure:
1. WLCSD has established a governing body to carry out legal and fiscal responsibilities while providing oversight of the Early and Head Start programs.
2. An OLHSA Head Start Parent Policy Council has been established at the agency grantee level, parent policy committees have been established at the delegate level, and parent committees have been established at the center level.
3. WLCSD Head Start management staff supervises day to day program operations.
WALLED LAKE HEAD START
GOVERNING BODY

Relates to Head Start Program Performance Standard(s) 1301.2

Overall Purpose of Governing Body Policies:
The agency must ensure that the governing body is composed of members that can carry out the legal and fiscal responsibilities of the organization to oversee the Early Head Start and Head Start programs without a conflict of interest. The governing body’s duties consist of monitoring results and data on school readiness. The agency’s governing body may establish advisory committees to provide effective governance.

(a) Composition

**Purpose:**
The governing body’s composition is outlined in the Head Start Act Sec. 642(c)(1)(B) to ensure that members from a variety of backgrounds are present to provide fiscal and legal responsibility at the Head Start agency. Agency procedures are aimed at reducing conflict of interest for members of the governing body.

**Procedure:**
1. The agency requires that the governing body consists of the Walled Lake Consolidated School District School Board. This Board is elected by members of the district community.

(b) Duties and Responsibilities

**Purpose:**
The governing body’s duties and responsibilities are outlined in the Head Start Act Sec. 642(c)(1)(E) to ensure members are performing all duties related to fiscal and legal responsibility at the Head Start agency while monitoring results and data related to school readiness goals.

**Procedure:**
1. Governing body members have fiscal and legal responsibility to administer and oversee Head Start programs including maintaining federal funds. They approve all major financial expenditures of the agency and the agency’s operating budget. They also select an independent financial auditor to report serious financial policies to the governing body, unless a state auditor is assigned as required by any state laws. They also monitor the progress of audit findings.
2. The governing body adopts practices that allow for active and educated governance of the EHS/Head Start program including the full participation in planning,
development, and assessment of Head Start programs including following Impasse Policies (see HSPPS 1301.6).

3. The governing body ensures the compliance with state, federal, tribal and local laws. They are also responsible for reviewing and approving the established recruitment, selection, and enrollment criteria for children, and reviewing program proposals for funding and amendments. These items would be received from Head Start Staff and approved by the Parent Policy Committee.

4. Head Start staff provides the governing body with Policy Committee approved monthly reports that include the following items:
   a. Director’s Dashboard Reports (health and school readiness programmatic information, enrollment reports, & meal counts)
   b. Monthly Head Start Budgets, financial statements, and annual audits
   c. ACF Informational Memorandums & ACF Program Instruction
   d. Program Information Reports (PIR)
   e. Annual self-assessments, community wide strategic planning, and Head Start needs assessments

   These reports are prepared monthly and are shared with the governing body and reviewed at each of their board meetings. With this information the governing body is able to make informed decisions about Head Start program planning and policies.

5. The governing body reviews Head Start grant programmatic and fiscal provision progress including implementation of corrective action plans.

6. The governing body approves personnel policies on how the agency hires, evaluates, terminates, and compensates employees including the Head Start Director, and any other person in an equivalent position with the agency. They also develop procedures on selection of Policy Committee members.

7. The governing body develops, adopts, and updates written standards and formal procedures regarding conflict of interest for governing body members, Head Start employees, and consultants. They also investigate complaints when necessary.

(c) Advisory Committees

**Purpose:**
As the governing body finds it practical and necessary, they may create advisory committees to manage key accountabilities related to Head Start program governance and improvement.

**Procedure:**
1. The advisory committee’s structure, supervision, and communication are to be set up so the governing body still has fiscal and legal responsibility for the Head Start program.
2. The appropriate HHS official must be notified about the advisory committee’s creation.
WALLED LAKE HEAD START
POLICY COUNCIL & POLICY COMMITTEE

Relates to Head Start Program Performance Standard(s) 1301.3

Overall Purpose of Policy Council and Policy Committee Policies:
A formal program governance structure provides an agency with strong oversight and broad representation from the community. Head Start leadership consists of three key entities:
- Governing body and Tribal Council
- Policy Council
- Management staff
The Policy Council sets programmatic direction and provides a system of checks and balances to strengthen the Head Start program governance structure.

(a) Establishing policy council and policy committees

**Purpose:**
Policy councils are established at the grantee level and policy committees at the delegate level to provide Head Start agency programmatic direction.

**Procedure:**
1. OLHSA’s policy council has been established at the grantee center in Pontiac.
2. All current delegate programs have established policy committees. Any newly appointed delegate centers are required to establish policy committees following Head Start guidelines as early in the school year as possible.
3. The Head Start policy council and committees provide program direction, design, strategic planning, and self-assessment.
4. We will make every effort to provide translation services, when they are needed.

(b) Composition

**Purpose:**
Policy council and policy committee composition guidelines are established to ensure that parents with enrolled children have proportional representation on the council and committees. The program must also ensure that policy council and committee members do not have a conflict of interest.

**Procedure:**
1. At the grantee level, at least 51% of policy council members must be parents/guardians of currently enrolled Head Start or Early Head Start children. At the delegate level, at least 51% of policy committee members must be parents/guardians of currently enrolled Head Start or Early Head Start children.
2. The remaining members for the policy council and committees shall be composed of community representatives, not to exceed 49% membership. Persons who may be interested in serving on the council as a community representative are elected by grantee and delegate parents whose children are currently enrolled in the program and presented to the council for elected positions. Once they are voted in by the majority of the council members, they have all rights and privileges as any current parent and may seek to run for an office.

3. All programs will have representatives and alternates elected to the Policy Council. Grantee and delegate programs shall elect parent/guardian representatives based on the following formula:
   a. Programs with up to and including 68 funded enrollment will have one representative
   b. Programs with 69 – 136 funded enrollment will have two representatives
   c. Programs with 137 – 205 funded enrollment will have 3 representatives
   d. Programs with 206 – 274 funded enrollment will have 4 representatives
   e. Programs with 275-343 will have 5 representatives
   f. Programs with funded enrollment over 343 will have 6 representatives.

4. OLHSA’s Policy Council and Policy Committees at delegate sites ensure that members do not have a conflict of interest with the Head Start agency, which includes the delegate sites. Policy council and policy committee members annually review conflict of interest policies and it is documented in a certificate that they will and abide by the conflict of interest guidelines. Policy council and policy committee members are not compensated for their service on the council or committee. Head Start Staff, including delegate staff, may not serve on the policy council or committee, unless they are a parent that substitutes on occasion.

(c) Duties and responsibilities

**Purpose:** Policy councils are responsible for reporting activities and programmatic decisions to the governing body and delegate agencies.

**Procedure:**
1. At the monthly policy council meetings, members of the OLHSA Policy Council review and approve:
   - activities and policies related to parents supporting program operations that show that the agency is responsive to parent and community needs
   - application and amendments for Head Start programmatic funding
   - Director’s Dashboard report that shows program recruitment, selection, enrollment priorities, attendance and meal counts.
   - budget planning for program expenditures and credit card reports
   - monthly Personnel Committee Reports
   - ACF Memo’s (Information Memorandums and Program Instructions)
2. Yearly the policy council reviews Early Head Start/Head Start Policy Council By-laws which includes reimbursement policies for participation in policy council activities, program personnel policies regarding program staff employment/dismissal, and develop procedures on how policy council members will be elected. Policy Council also reviews audits, self-assessment, community needs assessment and PIR. The policy council is also involved in the recommendation of delegate agency selection, including their service area.

3. The Policy Council reports monthly to the governing body and delegates regarding any programmatic decisions that have been made.

4. OLHSA Policy Council and Delegate Policy Committees use ongoing monitoring, school readiness goals data, program goals outlined in the HSPPS §1302.102, and review information outlined in the HSA 642(d)(2) to conduct program responsibilities.

(d) Term

**Purpose:** Policy council and delegate policy committee members have set term limits to ensure proper parent and community stakeholder representation

**Procedure:**
1. Policy Council and committee members will be selected to serve on their respective council or committee for a one year term. At the beginning of the program service year, grantees and delegate centers will provide the OLHSA Policy Council with their selected policy council members by submitting an OLHSA Early Head Start/Head Start Policy Council Representatives Letter of Certification.  
2. Policy council and committee representatives may serve for up to five terms, served in one year terms, as outlined in the Early Head Start/Head Start By-laws. Each additional year term that a member would like to serve must be noted and submitted by Letter of Certification to the OLHSA Policy Council.
3. OLHSA Early Head Start/Head Start or delegate centers must seat a successor policy council or committee prior to dissolving the previous policy council or committee.

(e) Reimbursement

**Purpose:** A program will enable policy council and policy committee representatives to fully participate in their responsibilities; this may involve reasonable reimbursements.

**Procedure:**
1. OLHSA Early Head Start Policy Council and delegate policy committee representatives are reimbursed for mileage at $.40/mile to attend policy council, personnel committee, and governing body meetings so they are able to fully participate in their policy council/committee responsibilities.
2. Agency policy council and delegate committee representatives are provided babysitting accommodations so they are able to participate fully in policy council/committee tasks. If a babysitter is not provided for a policy council, personnel committee, or governing body meeting the policy council or committee representative will be reimbursed for a babysitter as outlined in the by-laws.
WALLED LAKE HEAD START
PARENT COMMITTEE

Relates to Head Start Program Performance Standard(s) 1301.4

Overall Purpose of Parent Committee Policies:
Parent committees are an integral part in assisting the director, agency governing board, and management teams to determine ways that Head Start and Early Head Start programs engage parents, families, and the community.

(a) Establishing parent committees

**Purpose:**
Provide direction on who can participate on the parent committee.

**Procedure:**
1. WLCSD Early Head/Head Start establishes parent committees at the beginning of the program year at each of the Head Start/Early Head Start program. Parent committees are exclusively composed of parents of children currently enrolled in the program.
2. Parent committee members regularly receive information about leadership opportunities, including information about the role of policy council/committee members and the process for election.

(b) Requirements of parent committees

**Purpose:**
Agencies must determine the best strategies to engage families in the parent committee and carry out the responsibilities of being a parent committee member.

**Procedure:**
1. WLCSD Family Advocates are advised by parent committee members about the development of local program policies, activities, and services that will meet the needs of children and their families.
2. Parent committee members from each center serve on WLCSD’s Policy Council and delegate policy committees and provide the council/committee updates and parent concerns from the parent committee. Policy Council minutes are shared at Policy Committee meetings.
3. Parent committee members that have been selected to serve on the WLCSD Policy Council and the WLCSD Personnel Committee participate in the recruitment of candidates by providing employment opportunity updates to the community and also assist with the screening of potential Head Start employees.
Walled Lake HEAD START
GOVERNANCE POLICIES

Relates to Head Start Program Performance Standard(s) 1301.5

Overall Purpose of Governing Body, Advisory Committee, and Policy Council Training

Policy:
The governing body, policy committee, and any advisory committee members receive training and technical assistance and orientations to ensure that members have a proper understanding of the information that they receive and can in turn effectively oversee and participate in Head Start Programs.

Procedure:
1. Nominated WALLED LAKE HEAD START Governing Body members receive governance orientation prior to election; existing governance body members receive governance update training every two years.
2. WALLED LAKE HEAD START Head Start Policy Committee members receive monthly training and technical assistance regarding budget and audit review, policy council elected positions, the role of personnel committee members, governance training, ERSEA (Eligibility, Recruitment, Selection, Enrollment, and Attendance), mental health, CLASS, health and nutrition, and Head Start Program Performance Standards.
3. WALLED LAKE HEAD START Governing Body and Head Start Policy Committee members receive ERSEA (Eligibility, Recruitment, Selection, Enrollment, and Attendance) training in accordance with the requirements of HSPPS 1302.12(m) within 180 days of the beginning of a new term of election.
Relates to Head Start Program Performance Standard(s) 1301.6

Overall Purpose of Impasse Procedures:
Impasse procedures are written jointly between the governing body and the policy council to have clear procedures for resolving internal disputes that include impasse procedures.

Procedure:
1. WLCSD Early Head/Head Start Policy Committee and the WLCSD School Board jointly created written Impasse Procedures to quickly resolve internal disputes.
2. These Impasse Procedures are located in the WLCSD Early Head Start/Head Start Bylaws and are reviewed annually and approved by the agency’s policy Committee and the governing board.
3. These Impasse Procedures exhibit that the governing body and policy Committee consider proposed decisions from each other. The governing body and/or the policy Committee will notify in writing why they do not accept the other party’s decisions. This will happen after sub-committees review the issues for no more than a maximum of thirty (30) calendar days.
4. If no decision has been made after 30 days, a letter will be submitted by the policy Committee and/or the governing board to the Administration for Children and Families requesting use of funds for a mutually agreed upon mediator to assist with resolution. The letter would outline the key impasse issues.
5. Working with a mediator does not mean all parties are interested in compromising. This procedure would not deny other remedies to either party including arbitration binding or non-binding per agreement of the two groups. This process is not a substitute for any legal remedy, litigation, investigation, or review by independent parties.
6. If after the mediation process there has been no resolution, the governing body and policy Committee would select a mutually agreed upon arbitrator. This arbitrator’s findings related to the impasse would be final.
Overall Purpose of Health Program Services Policies:
A program must provide high-quality health, oral health, mental health, and nutrition services that are developmentally, culturally, and linguistically appropriate and that will support each child’s growth and school readiness. OLHSA EHS/HS work to make the connection for the families that health is a cornerstone to future achievements in school and life, otherwise a child will not flourish in his/her academic career.

A program must establish and maintain a Health Services Advisory Committee that includes Head Start parents, professionals, and other volunteers from the community. This group is crucial to the health of the children and in our community. With this viewpoint we are able to assist, assess and improve the health of the children and families in the communities in which we serve.

(a) Promoting Health

**Purpose:**
A program must implement a process to ensure children receive or have access to health, oral health, mental health, and nutrition services. If any of these are not met the program must work with our community partners and the families to ensure services are made readily available.

**Procedure:**
Our Health Services Advisory Committee meets once in the Fall and again in the Spring each school year. The advisory committee reviews policy and procedures related to health and provides guidance to the program on addressing community health issues.

The committee is headed by our Medical Director Dr. David Obudzinski. Our Community Partners which include but are not limited to: Oakland Integrated Health Network, Lions Club hearing and vision, Baker Nursing College, Oakland Health Department, WIC, Easter Seals, insurance carriers and or advisors along with our Delegate nurses and directors and parents from the program.
WLCSD HEAD START
EARLY HEAD START & HEAD START
COLLABORATION AND COMMUNICATION

Relates to Head Start Performance Standard(s) 1302.41

Overall Purpose of Collaboration and Communication Policies:
Programs must collaborate with parents as partners in the health and well-being of their children in a linguistically and culturally appropriate manner and communicate with parents about their child’s health needs and development concerns in a timely and effective manner.

Advance authorization is obtained within the enrollment process and is signed by the families. Our policies and procedures for health emergencies are posted in each classroom for the families to be made aware of them. It is also mentioned during orientation that they are located on the classroom walls.

This enables the parent to become the advocate for their child’s health and developmental needs. It also then empowers the adult(s) to become an advocate for themselves, their family and the community in which they live.

(a) Promoting Collaboration and Communication

Purpose:
WLCSD EHS/HS must implement a process to ensure that the family and staff are working together for the overall well-being of the child. This is done using information that is at an acceptable educational level while being culturally aware. In order to ensure this is being maintained we are in weekly contact with families via in person, phone, letters, text, emails etc.

Procedure:

DETERMINING STATUS OF SCREENINGS:
The Associate Director for Health will run bimonthly reports to determine upcoming expiring/outstanding health screenings for all children. Based on the ‘Due In’ FacsPro Reports, clinics will be scheduled and the following process will be followed as the due date for health screenings approaches.

1) For health screenings due in **15-30 calendar days**:
   Family Advocates/Nurse will:
   - Discuss importance of having current health screenings.
- Give reminder and community medical/dental resource list to parent/guardian at home visits, drop-off/pick-up, or Socialization and put copy in child’s file
- Complete the Parent Health Reminder Letter (with due date and FE/FA contact info), give to parent/guardian at Home Visit, drop-off/pick up or Socialization and put copy in child’s file
- Document all interactions with parents and/or health providers in FacsPro case notes

2) For health screenings due in **8-14 calendar days**: 
   Family Advocates/Nurse will:
   - Continue to discuss importance of having current health screenings.
   - Discuss particular challenges/barriers the family may be facing in obtaining required health screenings and develop a plan with parents to obtain the necessary health screenings
   - Document all interactions with parents and/or health providers, as well as plan for obtaining the necessary health screenings, in FacsPro case notes

3) For health screenings due in **7 calendar days or less**: 
   Family Advocate/Nurse will:
   - Discuss the importance of health screenings.
   - Discuss particular challenges/barriers the family may be facing in obtaining required health screenings
   - Continue to work closely with parent and/or health providers to obtain needed health screening information.
   - Document all interactions with parents and/or health providers in FacsPro case notes

**PROCESS FOR FOLLOW-UP ON HEALTH SCREENINGS:**

1) When a child **does not pass** a health screening and/or the result of a health screening is **not within normal limits**:

   Nurse **will:**
- Determine if the screening was not passed due to the child being uncooperative and therefore unable to screen. If equipment is available, the child should be rescreened at the next home visit. If so, this should be documented in case notes and child should be added to list for scheduled upcoming clinic to be rescreened.

- Document status of health screening in FacsPro as ‘Rescreen’ and result of health screening in FacsPro as ‘Fail/Follow up Required’

- If screening was completed on-site, send documentation of screening home with child and discuss follow-up options and next steps with the parent/guardian

- If screening was not completed on-site, contact parent/guardian to discuss follow-up options and next steps

- Document all interactions with parents/guardians and/or health providers, as well as plan for obtaining the necessary follow-up, in FacsPro case notes

2) When a referral is needed:

   Nurse will:
   Complete the following steps within 14 days of issue being identified:
   - Discuss importance of health screenings and proper follow-up with parents
   - Give the community medical/dental resource list to parent/guardian
   - Discuss particular challenges/barriers the family may be facing in obtaining follow-up on health screenings
   - Document status of health screening in FacsPro as ‘Needs Medical Treatment’ and result of health screening in FacsPro as ‘Referral Made’
   - Document all interactions with parents and/or health providers, as well as plan for obtaining the necessary follow-up, in FacsPro case notes

3) For health screenings with the FacsPro result of ‘Referral Made’:

   Nurse will:
   - Discuss with parents progress made on health screening follow-up and steps.
   - Discuss particular challenges/barriers the family may be facing in obtaining follow-up on health screenings
   - If follow-up has not been completed, document contact/discussion with parent in FacsPro case notes
   - Continue to work with family and make contact weekly until referral has been completed
   - Document all interactions with parents and/or health providers, as well as plan for plan to obtaining the necessary follow-up, in FacsPro case notes
- If, after continuing to work with a family to reach this health-related family engagement goal, the nurse determines that additional resources are needed for family to complete the referral, the nurse should notify WLCSD Head Start Supervisor of specific resources needed. The Supervisor will inquire with WLCSD for Health Services. The appropriate AD will then reach out to health providers and/or community resources to assist in meeting the needs of the family.

- If, despite continued follow-up by the nurse, no progress is made on the needed follow-up/further diagnostic testing, the WLCSD Head Start Supervisor should contact WLCSD to get guidance on next steps and indicate actions taken in FacsPro case notes.

- When follow-up has been completed, document status of health screening in FacsPro as ‘Treatment Complete’ and result of health screening in FacsPro as ‘Treatment Completed’

**REMEMBER PROCESS FOR IMMUNIZATIONS (using MCIR System):**

1) At enrollment, the Intake Coordinator/Family Advocate will:
   - Print the current MCIR status letter
   - Give letter to parent, highlighting the current immunization status and any needed immunizations
   - Discuss importance of having current immunizations
   - Put copy in child’s file
   - Enter initial/current immunization status in FacsPro
   - If immunizations were needed, follow-up with family within 14 days & document in FacsPro
   - Continue to follow-up/document until all immunizations are current

2) At the end of the program year (or when a child drops from the program), the FA/FE will:
   - Print the current MCIR status letter
   - Give/send home letter to parent, highlighting the current immunization status and any needed immunizations
   - Discuss importance of having current immunizations
   - Put copy in child’s file
   - Enter current immunization status in FacsPro to reflect immunization status at the end of the program/upon exit from the program
Relates to Head Start Performance Standard(s) 1302.42

Overall Purpose of Health Status Policies:
We must determine children's source of care within 30 days from the first date of attendance. We will support parents in ensuring children are up-to-date and ensure children receive ongoing necessary care. We work with the family to determine if a child has health insurance and support families in accessing health insurance if they do not. The overall health and care of the child leads to school readiness and good health habits for life.

(a) Promoting a Source of Health Care

**Purpose:**
A program must assist families in accessing a source of care and health insurance that will meet the outlined criteria. Should this not be met we will continue to work with the family to explain the importance and procedures in order to obtain health insurance and care.

**Procedure:** Listed below in policy

(b) Ensuring up to date child health status

**Purpose:**
A program must implement a process to ensure children are up to date on preventative and primary medical and oral health incorporating the state of Michigan EPSDT well care, immunizations and HSAC recommendations starting on the child’s first date of attendance. If necessary we must directly facilitate the parents in obtaining the services needed by the child.

**Procedure:** Listed below in policy

(c) Ongoing Care

**Purpose:**
A program must implement a process to help parents continue to follow recommended schedules of EPSDT health requirements. The program will offer parents resources to assist in completing these requirements.

Procedure:
(d) Extended follow up care

**Purpose:** Listed below in policy
A program must facilitate further diagnostic testing, evaluation, treatment, and follow up plan as appropriate by a licensed and credentialed professional for each child with a health problem or a developmental delay. This will occur based upon system of tracking and services provided and monitoring the implantation of the follow up plan.

Procedure:

(e) Use of funds

**Purpose:**
A program must use program funds for the provision of diapers and formula for enrolled children during the program day. A program may use program funds for professional medical and oral health services when no other sources of funding is available.

Procedure:

**HEALTH SERVICES SCREENING & FOLLOW-UP PROCEDURE**

*Covers 1302.42*

To ensure compliance of well child visits for students enrolled in Early Head Start Center Base and Home Base programs, staff will work in collaboration with the parents to obtain current health screening information and obtain/arrange for further diagnostic testing and treatment as appropriate.

Family engagement staff begins working with families at enrollment, explaining the importance of health and developmental screenings and helping parents make the connection between up to date health screenings and school readiness.

Nurse inputs initial health screening information including physical exam, immunizations, hemoglobin, lead, hearing, vision, blood pressure and dental exam. Nurse reviews and maintain each child’s file to determine family needs and follow-up services as needed.
Head Start is a school readiness program. The health-related activities required by the Head Start Program Performance Standards (HSPPS) are designed to ensure that every child who enters the program achieves his or her optimal development.

Head Start is used as an inclusive term for all program options offered by Early Head Start, Head Start, Migrant and Seasonal Head Start, and Alaska Native American Indian programs. Sections identify Early Head Start or Head Start when appropriate.

The Facspro data system is used to track data for the following health screenings:

- Blood Pressure
- Dental
- Growth
- Health History
- Hearing
- Hemoglobin/Hematocrit
- Lead
- Nutrition Assessment
- Nutrition Screening
- Vision
- Immunization Status (initial and current status only)

*The state-based MCIR system is used to track dates of all individual immunizations for children. Therefore individual immunizations will not be recorded in Facspro.*

**Requirements for Health Services**

- The Family Advocate/Family Educator will educate families on the EPSDT guidelines and best practice for physical screening and health requirements. This will be done during enrollment or during the first home visit with the family by completing the Early Head Start Well Child Health Requirements form. Parents should be given a completed form and a copy should be maintained in the child’s paper file.
- The Nurse will assess if a child has a medical and dental home and then document this information in Facspro. This information is entered on the Health tab under General Data which includes Health Worker, Medical Home, Determination Date, Dental Home and Determination Date.
- Within 30 days of the first date of attendance it must be determined if a child has an ongoing source of medical care.
If a Medical or Dental Home is needed then the Family Advocate/Family Educator/Nurse will assist the family with resources to fulfill this need. This may include but is not limited to: providing a list of local physicians and dentists, assisting the family to obtain or sign up for insurance and or calling an office for the family to assist them in scheduling an appointment. Any assistance given to the family will be case noted in Current Customer Notes which is located on the top left side of the Facspro screen.

- The Family Advocate/Family Educator will assist the family with scheduling routine appointments as needed.
- The Family Advocate/Family Educator will also assist families with any barriers to completing the health requirements including assisting with insurance, referrals, obtaining a pediatrician and or dentist.

**Hearing Screenings**

- An auditory screening will be conducted within 45 calendar days of the child’s first date of attendance if the child is one year of age and older.
- Newborn hearing screenings should be obtained and printed off from MCIR and/or obtain a copy of results from hospital discharge paperwork parents received. The results will be documented in Facspro under the screening listed as Hearing. The newborn hearing screening will be entered into Facspro with the expiration date of the child’s first birth date.
- Hearing screening will be repeated when the child turns 12 months of age and then on a yearly basis.

**Vision Screenings**

- A visual screening will be conducted within 45 calendar days of the child’s first date of attendance.
- If a child is under one year of age vision will be documented in Facspro based on the first Well Baby Check that is obtained. Therefore you will enter the date the Well Baby Check was performed with an expiration date of the child’s first birth date.
- Vision screening will be done when the child turns 12 months of age and then on a yearly basis.

**Dental Screenings**

- Are recommended when the child is one year of age or the eruption of teeth. A full dental exam is not required until the child is three years old. We recommend that a child start seeing a dentist on a routine basis if possible starting in EHS. Any dental screenings performed by a dentist and/or a dental hygienist will be entered as the date the screening was performed with an expiration date of the child’s third date of birth. If a child is seen on a routine basis throughout the EHS program you will continue to enter the expirations date as the child’s third date of birth.

**Blood Pressure**

- Blood pressure screening will be done at 3 years of age (not required by EHS until the child turns 3 years of age). If a blood pressure is documented on a health appraisal then it will be documented in Facspro with an expiration date of the third birthdate.

**Lead**

- Lead is required at 12 months of age. Lead results can also be obtained from MICR.

**Hemoglobin/Hematocrit (Hgb/Hct)**
• HCT/HGB is required at 12 months.

**Growth**

• Growth Information must be entered at a minimum two times per year (taken 6 months apart). Growth information will be taken off each health appraisal and entered onto Facspro. If growth information is not obtained from health appraisal a height, weight and head circumference measurement will be taken within 45 days of the child’s first date of attendance.

**REPORTING & CASE MANAGEMENT**

- All health screening data must be entered by the appropriate staff. The ‘Entering Health & Immunization Data’ Instructions should be followed when entering health screening results into FacsPro. The proper fields, statuses, results and dates are outlined in these instructions.
- On the second and fourth Friday of each month, the Associate Director for Health will run FacsPro reports to show each health screening listed in this procedure, that are due in 30, 45 or 90 days. The report will show the screenings that are overdue, due in, and completed. Based on these reports, a summary is created and shared with the Managers.
- The delegate supervisor and nurse review these summaries, to help guide the actions to be taken by the nurse in follow-up with families on upcoming or outstanding health screenings and track progress made towards compliance.

**DETERMINING STATUS OF SCREENINGS:**

The Associate Director for Health will run bimonthly reports to determine upcoming expiring/outstanding health screenings for all children. Based on the 'Due In' FacsPro Reports, the following process will be followed as the due date for health screenings approaches.

1) For health screenings due in **15-30 calendar days:**
   - Family Advocate/Nurse
     - Sends letter reminder and community medical/dental resource list to parent/guardian and put copy in child’s file
- Complete the Parent Health Reminder Letter (with due date and FE/FA contact info), give to parent/guardian.
- Document all interactions with parents and/or health providers in FacsPro case notes

**PROCESS FOR FOLLOW-UP ON HEALTH SCREENINGS:**

1) **When a child does not pass a health screening and/or the result of a health screening is not within normal limits:**

   **Nurse will:**
   
   - Determine if the screening was not passed due to the child being uncooperative and therefore unable to screen. If equipment is available, the child should be rescreened at the next home visit. If so, this should be documented in casenotes and child should be added to list for scheduled upcoming clinic to be rescreened.
   - Document status of health screening in FacsPro as ‘Rescreen’ and result of health screening in FacsPro as ‘Fail/Follow up Required’
   - If screening was completed on-site, send documentation of screening home with child and discuss follow-up options and next steps with the parent/guardian
   - If screening was not completed on-site, contact parent/guardian to discuss follow-up options and next steps
   - Document all interactions with parents/guardians and/or health providers, as well as plan for obtaining the necessary follow-up, in FacsPro case notes

2) **When a referral is needed:**

   **Nurse will:**
   
   Complete the following steps within 14 days of issue being identified:
   - Discuss importance of health screenings and proper follow-up with parents
   - Give the community medical/dental resource list to parent/guardian
   - Discuss particular challenges/barriers the family may be facing in obtaining follow-up on health screenings
   - Document status of health screening in FacsPro as ‘Needs Medical Treatment’ and result of health screening in FacsPro as ‘Referral Made’
- Document all interactions with parents and/or health providers, as well as plan for obtaining the necessary follow-up, in FacsPro case notes

3) For health screenings with the FacsPro result of ‘Referral Made’:

Nurse will:

- Discuss particular challenges/barriers the family may be facing in obtaining follow-up on health screenings
- If follow-up has not been completed, document contact/discussion with parent in FacsPro case notes
- Continue to work with family and make contact weekly until referral has been completed
- Document all interactions with parents and/or health providers, as well as plan for plan to obtaining the necessary follow-up, in FacsPro case notes
- If, after continuing to work with a family to reach this health-related family engagement goal, the nurse determines that additional resources are needed for family to complete the referral, the nurse should notify WLCSD Head Start Supervisor to discuss specific resources needed for health services. The nurse will then reach out to health providers and/or community resources to assist in meeting the needs of the family.
- If, despite continued follow-up by the nurse, no progress is made on the needed follow-up/further diagnostic testing, the WLCSD Head Start Supervisor should contact the OLHSA to get guidance on next steps and indicate actions taken in FacsPro case notes.
- When follow-up has been completed, document status of health screening in FacsPro as ‘Treatment Complete’ and result of health screening in FacsPro as ‘Treatment Completed’

**REMEMBER PROCESS FOR IMMUNIZATIONS (using MCIR System):**

1) At enrollment, the Intake Coordinator/Family Advocate will:
   - Print the current MCIR status letter
   - Give letter to parent, highlighting the current immunization status and any needed immunizations
   - Discuss importance of having current immunizations
   - Put copy in child’s file
   - Enter initial/current immunization status in FacsPro
- If immunizations were needed, follow-up with family within 14 days & document in FacsPro
- Continue to follow-up/document until all immunizations are current

2) At the end of the program year (or when a child drops from the program), the EHS Nurse will:
   - Print the current MCIR status letter
   - Give/send home letter to parent, highlighting the current immunization status and any needed immunizations
   - Discuss importance of having current immunizations
   - Put copy in child’s file
   - Enter current immunization status in FacsPro to reflect immunization status at the end of the program/upon exit from the program
WALLED LAKE HEAD START
MANAGEMENT SYSTEMS POLICY

Relates to Head Start Performance Standard(s) 1302.100, 1302.101

Purpose:
A program must provide management and a process of ongoing monitoring and continuous improvement for achieving program goals that ensures child safety and the delivery of effective, high-quality program services.

Procedure:
(a) Implementation of management system:
(1) The WLCSD Head Start program structure allows for effective management and oversight of program operations. Program staff meet regularly to review and assess a variety of program data. A monthly dashboard report, containing information from all content areas, program options and program sites, is completed and reviewed regularly to ensure oversight. The dashboard report is distributed to the WLCSD Board, as well as policy committee for review.
(2) Staff performance appraisals are completed each year between supervisors and staff. Appraisals provide opportunity for staff and supervisor to discuss progress made on individual goals and set new goals for the upcoming year. Supervisors then meet with staff throughout the year to revisit these goals and provide the support to meet their goals. Staff meetings are held regularly, allowing opportunity for staff to discuss ideas for continuous program improvement.
(3) No less than annually, program management staff review budget and staffing patterns to promote continuity of care for all children enrolled. The results of self-assessment, community needs assessment, staff/parent surveys, etc. are reviewed annually to ensure that program options are meeting the current needs of children, families and staff. Annual staff trainings are held at the beginning of each program year for all staff. Additional trainings and staff development opportunities are provided throughout the year as needed.
(4) WLCSD’s finance department maintains an automated accounting system to ensure effective oversight of fiscal/budget information. FacsPro, our agency-wide database, is the record keeping system used to track all programmatic data and ensure proper oversight.
(b) Coordinated approaches:
(1) To ensure a program-wide coordinated approach to training and professional development, OLHSA managers from all content areas meet regularly to ensure that training needs for staff in all content areas are being met. Staff training interest/need surveys are completed annually and results are shared widely when developing our training plan each year. A coordinated effort is made to ensure that programmatic staff in all service areas benefit from funds designated for training and staff development.
(2) Information from our community needs assessment is analyzed annually to ensure we are meeting the needs of children who are dual language learners and their families. Information regarding languages spoken by children and family members is collected at enrollment and entered into our database, allowing us to gather and analyze this data on an ongoing basis. Based on the data collected, staff from all content areas partner with local community organizations to meet the needs and provide additional services to these children and families through translation/interpretation services, connecting
them with community resources, updates to forms/program materials, linking them to staff that also speak that language and choosing the classroom placement that will best meet their needs.

(3) To ensure the full and effective participation of all children with disabilities, all facilities in which we operate programs are ADA compliant. Family engagement, health, nutrition, mental health and disability staff work closely to ensure the necessary referrals are made and services are received. When appropriate, staff from all content areas come together for a staffing meeting to discuss all areas of concern/need and develop the most appropriate plan for each child, individualizing program materials, curriculum and instruction as needed.

(4) Data from all programmatic areas is compiled into a dashboard report and analyzed monthly by the management team. This report is then shared with the WLCSD Board as well as the policy council. The data is analyzed throughout the year to identify trends, areas of concern and areas for improvement. All data entered into the FacsPro database is secure. Staff is assigned a username and password to access the database system. All staff sign confidentiality agreements and entries into the database are date/time stamped ensuring the protection and privacy of children’s records.
Walled Lake HEAD START
PROGRAM GOALS POLICY

Relates to Head Start Performance Standard(s) 1302.102

Purpose:
A program, in collaboration with the governing body and policy council, must establish goals and measurable objectives, monitor program performance and use data for continuous improvement.

Procedure:

(a) Establishing program goals
Using information identified in our community assessment, program goals are established every five years and then reviewed annually to ensure they are still relevant in meeting the needs of the families in our community. These long-term strategic goals detail tasks with measurable outcomes to demonstrate progress made. WLCSD establishes school readiness goals at their programmatic level, based on program-specific data. To ensure children are safe at all times, health and safety practices are a priority when establishing goals.

(b) Monitoring program performance
(1) Using data collected through the monthly dashboard and other monitoring reports, quality and compliance issues can be identified and corrected immediately. Delegate programs are reviewed a minimum of four times per program year by OLHSA staff. Additional visits are conducted as necessary by other grantee staff, such as content area Managers, Associate Directors, Deputy Director and Director throughout the program year. Files are reviewed at the discretion of the OLHSA review staff. Unless otherwise noted a sampling of files are reviewed in all areas at the discretion of the OLHSA review staff (at least 10%). Each Delegate program receives a complete review of each content area a minimum of three times per year. The Fiscal Management area is comprehensively reviewed by OLHSA Finance staff annually. If any concerns are found during a visit they will be discussed with the program staff immediately. If programs have any missing information that can be immediately corrected, they will be given the opportunity to make those corrections. Information that cannot be immediately corrected will be indicated on checklists, observations and tracking forms. If there are specific areas that require follow-up, it will be noted on the bottom of the visit summary, along with a follow-up review date. A complete report including a visit summary form with copies of any checklists, observations and tracking forms used to monitor the program will be emailed to the Delegate program within two weeks after the review visit. If there are specific areas that require follow-up, the Reviewer will return to the program on the designated date. If the follow-up area has not been corrected at that time, a Non-Compliance Follow-Up Report will be required and noted on the bottom of the Follow-Up Visit Summary. The Deputy/Associate Director will then complete the Non-Compliance Report and contact the program directly. If applicable, a compliance corrective action plan will be developed and submitted to the grantee with an appropriate compliance due date. Deputy/Associate Directors will continue to work with the program until all non-compliances have been corrected. In addition to the external monitoring conducted by OLHSA review staff, internal monitoring must be conducted by each delegate program. Program directors and coordinators monitor all content areas and staff appropriately throughout the year. Internal Monitoring Procedures must be developed and written by each delegate program to address the needs and programming of their individual program. When a monitoring visit has been completed for either the grantee or delegate, the visit summary forms, checklists, observations and tracking forms will be uploaded and saved on the OLHSA share drive. This ensures the
appropriate staff has immediate access to ongoing monitoring information. Health and Safety screeners are completed twice per year (fall and spring) in all classrooms and playground checklists are also completed daily for all playgrounds. Additional internal monitoring safety checks are completed by grantee staff throughout the program year.

(2) Program goals are reviewed quarterly by the management team. If warranted by changes in the community, staffing patterns or needs of families we serve, program goals will be adapted or modified as needed. School readiness goals are also reviewed quarterly by the management team, using COR data to demonstrate progress and identify areas for additional staff development. Progress on goals is regularly shared with policy committee. A self-assessment is conducted annually using program data including child assessment data, parent and family engagement data. The Head Start Self-Assessment consists of four stages: Preparing For Self-Assessment, Collecting and Analyzing the Information, Assessment of Findings and Strengthening Your Program. Programs should identify staff, parents, and community members, including policy council/committee and governing body members to participate in the self-assessment process. Management/staff members will serve as the data review/analysis team and will review all relevant data to determine areas of strength, areas for improvement and possible program innovations. The data review/analysis team will collect relevant quantitative and qualitative data and for all management systems. Review and analyze assigned data by individual sites as well as program as a whole, focusing on effectiveness, progress, implementation and compliance towards:
   a. Program and school readiness goals and objectives
   b. Regulatory requirements
   c. Program quality
   d. Development and implementation of strong management systems
   e. Overall program and fiscal operations
   f. Service delivery

Upon completion of review of the data, the data review/analysis team will complete a summary of findings, identifying strengths and areas for improvement in all of those areas listed above, evaluating underlying causes and systemic issues. For those areas warranting additional review and input, develop ‘big picture’ questions for the self-assessment team to review. On the day of the self-assessment, all members of the self-assessment team will participate in orientation using the OLHSA PowerPoint. The self-assessment team will be divided into groups and team leaders will present the summary of findings and ‘big picture’ questions. All relevant data/information will be available for review by the self-assessment team. At the conclusion of review and discussion within each group (for each area of interest assigned), all ideas, suggestions and proposed changes will be documented by the team leader and compiled into a summary report outlining all ideas, suggestions and changes/improvements proposed by the self-assessment team members. The self-assessment has little value unless the program uses the information to drive program improvements. Therefore, in this final stage, the management team will review all ideas, suggestions and proposed changes made by the self-assessment team as a driving force to develop program improvements goals, desired outcomes, and action plans. The management team will then identify those suggestions that are not feasible due to staffing limitations, fiscal constraints, compliance issues or other reasons. For all other suggestions, they will develop a plan to incorporate suggestions into program plans, staff development plans and service delivery procedures in a timely manner as appropriate. All program improvement plans must be completed by mid-May, a date specifically designated by the Grantee each year.
Results of the self-assessment and the plan for program improvement should be communicated
widely and in a timely manner to the governing body, staff, Policy Council/Committee, parents, community partners, and the responsible HHS official.

(c) Using data for continuous improvement

Ongoing analysis of programmatic data contained in the internal monitoring reports, monthly dashboard reports, annual self-assessment findings, as well as the aggregated child-assessment data will inform strategies for continuous improvement in all program service areas. Child-level assessment data is aggregated and analyzed three times per year, including subgroups such as dual language learners and children with disabilities. Staff surveys, CLASS Observation data and annual staff performance appraisal data will be used to guide staff development efforts throughout the program year. Family engagement data such as family goals, needs assessment, PIR data and school readiness data will be evaluated to plan family engagement events. Information from on-going monitoring and the annual self-assessment will help to identify program needs and develop plans for program improvement. School readiness and long-term program goals will be adjusted as needed based on the continuous analysis of data.

(d) Reporting

(1) To ensure ongoing oversight, data dashboard reports are submitted monthly to the policy committee at their regularly scheduled meetings.

The Regional Office of Head Start will be notified by our Head Start Director should a significant incident affecting the health and safety of program participants, circumstances affecting the financial viability of the program, breaches of personally identifiable information, or program involvement in legal proceedings occur.

The Regional Office of Head Start will also be notified by our Head Start Director of any matter for which notification or a report to state or local authorities is required including:
  a. Reports regarding staff or volunteer compliance with federal, state or local laws addressing child abuse and neglect or laws governing sex offenders;
  b. Incidents that require classrooms or centers to be unexpectedly closed for any reason;
  c. Legal proceedings by any party that are directly related to program operations;
  d. Disqualification from Child and Adult Care Food Program (CACFP) and licensing revocation.

(2) A Head Start Annual Report will be completed each year and made available to the public that discloses the following:
  a. The total amount of public and private funds received and the amount from each source
  b. An explanation of budgetary expenditures and proposed budget for the fiscal year
  c. The total number of children and families served, the average monthly enrollment (as a percentage of funded enrollment), and the percentage of eligible children served
  d. The results of the most recent review by the Secretary and the financial audit
  e. The percentage of enrolled children that received medical and dental exams
  f. Information about parent involvement activities
  g. The agency’s efforts to prepare children for kindergarten
  h. Any other information required by the Secretary

(3) If our program has been found to have a deficiency, a quality improvement plan will be submitted to the Regional Office of Head Start as required.
Relates to Head Start Performance Standard(s) 1302.11

Purpose:
Every five years WALLED LAKE will conduct a community needs assessment to collect data about community strengths, needs and resources. The Early Childhood Division will use this data to make decisions about long and short term goals, selection criteria, the type of services provided for children and families and to determine collaboration possibilities with other agencies. Data will be updated each year as needed.

(a) Service Area
1. In the grant application we proposed to serve the following service areas within Oakland County:
   WALLED LAKE will directly operate programs in Brandon, Pontiac, Royal Oak, Auburn Hills, Hazel Park, Oak Park, Huron Valley, and Rochester. WALLED LAKE will oversee the following public school delegate locations within Oakland County: Berkley, Farmington, Ferndale, Holly, Lake Orion/Oxford, Lamphere, Walled Lake, and Waterford.
2. If the Community Needs Assessment indicates there is a need to change the service area, WALLED LAKE will submit to ACF a new service area proposal for approval.

(b) Community Wide Strategic Planning and Needs Assessment (Community Assessment)

1. Every five years WALLED LAKE will conduct a community needs assessment that builds on strengths and resources in accordance with Performance Standard 1302.11 that will include:

   (i) The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:

      (A) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A));

      (B) Children in foster care; and

      (C) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;
(ii) The education, health, nutrition and social service needs of eligible children and

(iii) Typical work, school, and training schedules of parents with eligible children;

(iv) Other child development, child care centers, and family child care programs that
serve eligible children, including home visiting, publicly funded state and local
preschools, and the approximate number of eligible children served;

(v) Resources that are available in the community to address the needs of eligible
children and their families; and,

(vi) Strengths of the community.

2. Walled Lake Head Start will annually review and update the community assessment to
reflect any family surveys that would indicate a significant change including increased
availability of publicly-funded pre-kindergarten- (including an assessment of how the
pre-kindergarten available in the community meets the needs of the parents and
children served by the program, and whether it is offered for a full school day), rates of
family and child homelessness, and significant shifts in community demographics and
resources.

3. Walled Lake Head Start will consider whether the characteristics of the community
allow it to include children from diverse economic backgrounds that would be
supported by other funding sources, including private pay, in addition to the program’s
eligible funded enrollment. WALLED LAKE Early Head Start/Head Start will not enroll
children from diverse economic backgrounds if it would result in serving less than our
eligible funded enrollment.
WALLED LAKE HEAD START
DETERMINING, VERIFYING AND DOCUMENTING ELIGIBILITY

Relates to Head Start Performance Standard(s) 1302.12

Purpose:

Describes the requirements and procedures for the eligibility determinations, recruitment, selection, enrollment and attendance of children.

This policy contains the procedures and process overview for all of the above.

PROCEDURE:
DETERMINING, VERIFYING AND DOCUMENTING ELIGIBILITY

Eligibility is based on the child’s age and family income. All criteria are verified by the program before eligibility is determined. In regards to income eligibility, the program’s first priority is to enroll families at or below 100% of the Federal Poverty Level, families receiving public assistance, children in foster care or children from homeless families.

Eligibility
Staff will conduct an in-person interview with all families interested in enrolling their child(ren) in Head Start. Staff will verify income eligibility based on one of the following, and will place a copy of the verification documents used in the child’s paper file:

- Family income is equal to or below 100% of the Federal Poverty Line (FPL)
- Family income is between 101%-130% of the FPL (requires approval)
- Family income is above 131% of the FPL (requires approval)
- Family is currently receiving public assistance (SSI or TANF/FIP/cash assistance)
- Child is in foster care
- Family is homeless, as defined by the McKinney Vento Homeless Assistance Act

Income is commonly verified with tax forms or pay stubs documenting 12 months of income, but additional documents may be collected based on availability or accessibility.

Age Eligibility
Staff will verify, and place a paper copy of any verification documents in the child’s paper file, a child’s birthday and/or current age to determine eligibility. Staff will make every effort to collect a birth certificate, hospital verification of birth, Affidavit of Parentage or other such document. In the case of foster care, homelessness or if obtaining this document will place undue hardship on the child’s family, then program staff will document in FacsPro their attempts at verification and will determine eligibility without supporting documents.

Additional Allowances
Staff is required to submit an Over Income Referral Form to the Associate Director for Family Engagement when a family income is above 100% of the FPL. The program will allow up to 10% of the programs funded enrollment to be children with family income above 100% of FPL. The usage and availability of these slots is approved and tracked by the AD for Family Engagement.

If, during a program year the program has enrolled all of its available 10% of over-income slots, and remains under enrolled, the program may choose to exercise their option to enroll an additional 35% of children from families with income between 101% and 130% of FPL. These families must meet the guidelines for selection that have been
established by the program and will generally have a documented need for Head Start, such as children with disabilities, teen parents, incarceration or concerns about abuse or neglect. The usage and availability will also be tracked by the AD for Family Engagement. At no time should program staff accept or enroll the additional 35% of children without advanced written permission from the Associate Director for Family Engagement.

**Duration of Eligibility**

If a child is determined and participates in the Head Start program, the child will remain eligible through the conclusion of the following program year. The program may elect not to re-enroll a child when there has been a significant change in the family’s income or risk factors.

If a child is determined eligible and participates in the Early Head Start program, the child will remain eligible through their third birthday, or when the child becomes eligible for Head Start.

A program must re-verify the eligibility of a child moving from Early Head Start to Head Start. The program has ensured that children transitioning from Early Head Start to Head Start are prioritized using the program's Family Risk Criteria.

A child that has been determined eligible but does not participate in either Early Head Start or Head Start will not retain their eligibility into the following program year. The child’s eligibility must be re-verified. Children that remained on the program’s active waitlist but did not receive services will be prioritized for enrollment using the Family Risk Criteria.

**Records**

The program will keep eligibility documentation for each child that include:

- Copies of any documents or signed statements that are necessary to verify eligibility
- A statement that program staff have made reasonable efforts to verify information through an in-person interview, describing all efforts made to verify eligibility through the applying family or a third party source.
- A signed release form for each separate third party source the program must contact to verify eligibility
- A Head Start Eligibility Verification Form, signed by the verifying staff member

These documents must be kept of file no less than one year after the child has stopped receiving services.

**Training on Eligibility**

The program will train all governing body, policy council, program management and staff who determine eligibility on the program's procedures and any applicable federal regulations related to child and family eligibility. The program will, at a minimum, contain:

- Methods on how to collect complete and accurate eligibility information.
- Strategies for treating all families with dignity and respect and for dealing with potential issues of domestic violence, stigma and privacy
- Describe agency and program policy and procedures that take action against staff, families or any participant who attempt to provide or provide intentionally false eligibility information or documentation

This training will be provided to each new staff within 90 days of employment and to governing body and policy council members within 180 days of the beginning of either’s term.

Prior to each new program year, during the program’s all-staff orientation, this training will be provided to all staff.

New staff members who make eligibility determination will be provided with an in-depth training session on individual forms and directions within 30 days of hire. This training will be provided to all staff who make eligibility determinations either yearly or as procedures are updated. Programs must keep documentation of these trainings for a period of three years.
WALLED LAKE HEAD START
RECRUITMENT OF CHILDREN

Relates to Head Start Performance Standard(s) 1302.13

Purpose:

In order to reach those most in need of services, a program must develop and implement a recruitment process designed to inform all families with eligible children within the recruitment area of the availability of program services and assist them in applying for admission to the program. A program must include efforts to recruit children with disabilities, in foster care or from homeless families into the recruitment plan.

This policy contains the procedures and process overview for the above.

PROCEDURE:

The program’s recruitment process is designed to ensure each program option opens and remains at full enrollment for the entirety of the program year. The number of applications taken should exceed the program’s funded enrollment slots. Staff will actively recruit children who are 3-5 years old.

Recruitment will prioritize eligible families and children with diagnosed disabilities. Proactive recruitment will take place year round, and referrals will be accepted from community partners at any time.

A) Active recruitment of new children may include:

1. Staff will work in partnership with foster care agencies and agencies that assist the homeless (shelters, soup kitchens, and warming centers).

2. Staff will attend local community events and network with families to ensure they are aware of Early Head Start/Head Start (EHS/HS) services.

3. Staff will see walk-in clients to their local community school that are eligible for EHS/HS

4. Door to door recruitment within neighborhoods and local business or service agencies will be ongoing throughout the program year.
   a. Businesses such as Laundromats, child care centers and grocery stores that cater to the program’s target population will be prioritized

5. Staff will visit and network with staff at local birthing center and pediatrician offices.

6. Staff will network and build relationships with staff at local human services agencies to boost referrals to EHS/HS
   a. Agencies such as homeless providers, DHHS offices, MichiganWorks!, with services to eligible families will be prioritized.

7. OLHSA and/or community school districts will host enrollment fairs, preschool expos, health fairs and free community events and will market those events to eligible children and families

B. Active recruitment of re-enrolling children will include:
1. Staff will review all current files and determine children that are eligible for additional years of services with EHS/HS

2. Returning families will receive a phone call or letter requesting the visit their center to update their Family Partnership Agreement, Health records, nutritional assessments, emergency cards, etc... Families meet with Family Advocates to complete this process.

C. Referrals
Once a community partner has made a referral for a potentially eligible family a staff member responsible for enrollment will contact the family and assist them in completing an EHS/HS application within two weeks.

D. Waitlist
A waitlist is established after all funded slots have been filled. Recruitment of children to join the active waitlist is ongoing.

E. Documentation
Staff responsible for recruitment will report on their community efforts to ensure eligible families are aware of the services available.
WALLED LAKE HEAD START
SELECTION

Relates to Head Start Performance Standard(s) 1302.14

Purpose:

To ensure children with the highest level of need receive the services of the program, selection criteria will be established that weighs the prioritization of applicants and their relevant risk factors.

This policy contains the procedures and process overview for the above.

PROCEDURE:

A) Selection is based on the income or category of eligibility of each family, and the extent to which a child or family meets the program’s established Family Risk Criteria. Staff members are trained and must use the Family Risk Criteria to rank children and ensure children are properly prioritized based on their risk criteria points.

a. Family Risk Criteria points are assessed during an intake interview and include points based on the child’s family income, homelessness, whether the child is in foster care, the child’s age and whether the child is eligible for special education services.

b. Family Risk Criteria points are also used to identify family and community needs identified in the community needs assessment.

c. Families with the highest number of points are selected into the program first.

d. When a vacancy occurs during the program year, the staff member responsible for placement should notify the family that is identified as most at risk by reviewing the waitlist and selecting the child with the highest Family Risk Criteria score.

e. A child considered the most at risk may not be placed in a classroom in the following exceptions only, and the child with the next highest number of risk criteria points should be selected:

   i. The child’s family declines classroom placement at the time the vacancy occurs.

   ii. The child cannot be placed into a classroom with the vacancy due to childcare licensing restrictions.

   iii. The child has not yet reached the age eligibility for a blended-funding classroom.

B) Children eligible for services under IDEA

a. The program will ensure at least 10% of its total funded enrollment is filled by children eligible for services under IDEA.

b. The program will prioritize children eligible for services under IDEA using the Family Risk Criteria described in Section A of this policy.

c. If the program does not meet this 10% requirement, a waiver request will be submitted.

C) Waiting Lists

a. The program will accept applications from interested families at any time, ensuring an active, ranked waitlist using the Family Risk Criteria described in Section A of this policy.
Relates to Head Start Performance Standard(s) 1302.15

Purpose:

To ensure the program maintains its funded enrollment, including through the use of reserved slots, and fills slots as soon as possible after vacancies are identified.

POLICY:

A) The program will maintain its funded enrollment throughout the program year
   a. All funded enrollment slots, including those with blended funding sources, must be filled
   b. The program will make every effort, as vacancies are identified, to fill slots within 30 days using the procedure outlined in 1302.13 Recruitment of Children

B) The program will make efforts to ensure continuity of enrollment by maintaining the participation of eligible children for the following program year
   a. Parents of currently enrolled children that will remain age eligible for the next program year will be contacted for re-enrollment and complete this process beginning in March of the current program year.
   b. The program will work to ensure any child identified as homeless, or in foster care, maintains their enrollment in program should the family move to a different service area. The program will work with the child’s parents to transition them to a program in different service area, if that is what best fits the family’s need.
   c. The program will work with currently enrolled families that move outside of the service area to transition to another program. In order to maintain continuity of enrollment, the child may remain in the program if there are no available slots in their receiving program.
   d. The program will comply with the immunization requirements as outlined in Michigan State Child Care Licensing

C) Voluntary Parent Participation
   a. Though parent participation is welcomed and encouraged, as outlined in 1302.34 Parent Family Engagement in Education and 1302.50 Family Engagement, it will not be considered as a requirement of any child’s enrollment.
WALLED LAKE HEAD START
ATTENDANCE

Relates to Head Start Performance Standard(s) 1302.16

Purpose:

Attendance is critical to the success of children enrolled in a high quality early childhood education program. In order to fully benefit from Head Start, children must arrive on time and attend regularly. Attendance in early childhood is the most accurate predictor of a child’s attendance through fifth grade, with children that miss more than 10% of school in preschool going on to miss at least 10% of their instructional time through grade school. Research has shown that children who have regular attendance in a high-quality early childhood program are better able to develop the social emotional skills necessary to adapt to and excel in school.

WALLED LAKE Head Start promotes regular attendance and will work with families to overcome barriers to attending school or participating in home visits.

This policy contains the procedures and process overview for the above.

PROCEDURE:

A: Promoting regular attendance.

A program must track attendance for each child.

- The Agency data management system, FacsPro, is used to track attendance.
- The staff procedure for entering attendance is as follows:
  1. Attendance for all center based programs must be entered at which time occurs first: the point of first meal service for all centers or by 9:00AM on the current day.
  2. Attendance should be taken using the following codes:
     - P – Present
     - E – Excused. If Excused is chosen, the ‘Reason’ field must be filled in with the explanation of the child’s absence. An absence is only considered excused if a child’s parent calls and informs the program of the absence prior to the start of the school day.
     - U – Unexcused
     - C – Center Closed. This should be used only on days that school was scheduled such as snow days or building emergencies. Normal off-school days should be left blank.
     - T- Tardy. This should be used when a child is more than 30 minutes late. For centers that are required to take Point of Service Attendance, the original attendance mark may be changed to tardy after first meal service.

1) The program will ensure children are safe when they do not arrive at school. If any child is unexpectedly absent within one hour of the program start time, the following staff procedure will be followed:
   a. Family Advocates (FA) will view Attendance Reports for their assigned classrooms one hour after the class start time.
   b. If a child has an unexcused absence (U) the FA will call the child’s parent to ensure safety. For home visiting programs, the Family Educator will call the family to ensure safety if they are not present for a scheduled visit.
   c. The FA will make one phone call to the child’s parent(s). The attendance promotion policy outlined below will be followed if the child is determined to have an unexcused absence.
   d. FAs will discuss with the importance of on-time arrival, or advance notification of a child’s absence.
   e. All parent contact, by Teacher or FA, regarding a wellness check will be documented in FacsPro
2) The program will work with families to promote regular attendance. The following staff procedure will be followed for center based programs:

- Parents/Guardians will be informed of the Head Start Attendance Policy at the initial Head Start orientation and contact numbers for the center base staff to contact if their child will not be attending class.

- Teachers will notify Family Advocates when a child is absent unexcused. Family Advocates and teaching staff will review the classroom attendance in Facspro on a weekly basis to ensure proper attendance records and determine patterns of absenteeism. If an attendance issue/pattern of absence is identified, the family advocate and teacher will discuss the best approach for contacting the family to discuss any issues/barriers the family may be facing.

- If absences are excused, no special action is required unless the parent indicates a need for assistance. At which time, the Family Advocate will continue to keep in contact with the family and provide assistance and resources as appropriate. These absences will be entered as ‘excused’ absences in the attendance screen of Facspro.

- Parents will be notified of the program’s attendance policy, the importance of regular attendance and made aware that excessive or chronic absenteeism will result in their child being placed on their center’s waitlist.

- When a child has two unexcused absences within a two week-period the following steps will be started.
  1. The family advocate/teacher will attempt to contact the family by phone, email or through emergency contact information expressing concern and offering assistance.
     • The First Notice of Attendance Concern will be sent to the family, offering assistance and urging the family to contact the program within three school days.
     • If contact is made with the family the Family Advocate will remind family of the attendance policy, discuss the importance of regular attendance, remind the family to always notify the center when an absence occurs, discuss possible family support procedures.
  2. Within the next two weeks, if the child has had more than two additional unexcused absences the child is considered chronically absent and the following steps will occur:
     • The Family Advocate will again contact the family, inform them of the unexcused absences and revisit the attendance policy, make sure family support is in place, discuss support options, discuss the policy on excessive or chronic absenteeism which may result in the child being placed back on their center’s waitlist.
     • If after three additional school days, despite continued attempts by the Family Advocate/Teacher, no contact has been made with the family, the Second Notice of Attendance Concern will be sent to the family, offering assistance, urging the family to contact the program within three days or conduct a home visit as necessary.
  3. When a child has excessive absences or is considered chronically absent the following steps will take place:
     • The Family Advocate will ensure all action that have been taken and reason for excessive or chronic absences is documented in FacsPro and the child’s file.
     • The Family Advocate will contact the family to inform them their child is being placed on their center’s waitlist.
• The Family Advocate will send a final letter to the family informing them their child has been placed on their center's waitlist

- Once all of these steps have been followed and all attempts to contact the family or improve attendance have been unsuccessful, the child will be removed from the class list and placed on the waitlist. All contacts by family advocate/teacher must be documented in Facspro case notes.

- If a letter is returned due to a change in address at any point during this process, the letter is then placed in the child's file, a notation is made in the case notes and the child is placed on the center's waiting list.

2

- SPECIAL NOTE: For those children who have been accepted and are expected to attend, but have yet to attend, the above outlined procedure should also be followed with one variation: If a child has yet to attend, their absences should be recorded as 'unexcused' regardless of whether contact has been made with a parent and/or a parent has indicated an illness or well-documented circumstances. Until a child has attended for at least one day, all absences will be recorded as 'unexcused' in the Facspro attendance screen.

2(b) Managing systemic program attendance issues: If a program's monthly average daily attendance rate falls below 85 percent, the program must analyze the cases of absenteeism to identify any systemic issues that contribute to the program's absentee rate. The program must use this data to make necessary changes in a timely manner as part of ongoing oversight and correction. The staff procedure is as follows:

- Each month the Family Service Advocate will send a report to the Preschool Supervisor of all classrooms with attendance below the required 85%. The Preschool Supervisor, along with appropriate staff members, will analyze available data and determine if any correlation exists between child attendance and teacher attendance, COR scores, CLASS observations, and the prevalent reasons for children's absences.

- Family Advocates will be made aware of commonly existing barriers and will work with identified families to overcome challenges preventing on-time, regular attendance.

- All interactions with specific families will be documented in FacsPro case notes.

3) Supporting attendance of homeless children

1. If the program determines the child is eligible under the McKinney Vento Homeless Assistance Act, as defined in 1302.12, the child will be allowed to maintain enrollment in the program for up to 90 days with immunizations or other eligibility records, the exception being a physical exam as required by State of Michigan Child Care Licensing.

   a. Homeless children needing a physical will be referred to the clinic nearest their current residence.

2. If a family experiencing homelessness has irregular attendance due to transportation challenges, the program will work with the family on overcoming this barrier. Family Advocates will work with parents to determine any assistance available through state funding, DHS Pathways workers, churches, etc...
WALLED LAKE HEAD START
SEVERELY CHALLENGING BEHAVIOR POLICY AND PROCEDURES

Relates to Head Start Performance Standard(s) 1302.17
Overall Purpose of Behavior Policy:

In keeping with federal performance standards (1302.17) and promoting a healthy and safe environment for all children and staff, WALLED LAKE Head Start has established a Severely Challenging Behavior Policy. A child may be considered for alternate program options/variations if the behavior that is expressed by a child during classroom hours, is repetitive and endangers or threatens another child or classroom staff. At no time will a child be expelled for such behaviors.

(a) Limitations on Suspensions
(b) Prohibition on Expulsion

Purpose:
Severely challenging behaviors include, but are not limited to: biting, hitting, kicking, choking, throwing objects that may cause harm, and inappropriate sexual behaviors. These behaviors not only hinder the educational growth of the classroom but the child displaying the behavior. With appropriate interventions WALLED LAKE Head Start’s purpose is to decrease aggressive behavior, protect safety of all involved and ensure educational growth while in EHS/HS.

PROCEDURE:

LEVEL I

If a child, on a regular basis (two times per week or more), is harming himself/herself, or others, or destroying property, then the following procedure is used:

1. A staffing referral is made, either by parent or staff member, outlining the general and/or behavioral concerns.
2. Teacher and Teacher Assistant record anecdotal notes, including the behavior observed, time, date, place, apparent triggers and others involved. This takes place for three (3) weeks unless it is an emergency situation.
3. Parent signs permission for observation by support staff. Appropriate support staff (mental health, disabilities, etc.) talks with the family advocate and parent to see if there is additional information that would be helpful in understanding and solving the issue. Mental Health Staff will complete a questionnaire with parent to help obtain additional information. Support staff provides a copy of the permission for observation to the Family Advocate, providing details as necessary.
4. Appropriate support staff makes and records observations.
5. Once observation is complete, Teacher, Family Advocate and support staff meet and decide if the situation requires a staffing.
6. If child has IFSP/IEP, LEA will be consulted on services provided to child and family. Information will be brought in for review during the staffing.
7. If a staffing is deemed necessary, the Family Advocate contacts the parents to schedule meeting. (The Family Advocate is the primary contact for the family.) Staff and parents share their observations and information and together develop an Action Plan. This plan will outline strategies to be implemented in both at home and in the classroom by parents, teachers and other applicable support staff to help eliminate the behavior. Everyone signs off on the plan..
8. A follow up meeting is scheduled for two weeks to discuss progress. During the two week period, the Teacher continues to record child’s behavior.
9. Level I should take a minimum of four (4) weeks and a maximum of eight (8) weeks.

LEVEL II
If the disruptive behavior continues the following procedure will be implemented:

1. A second follow up staffing meeting will be scheduled to review the Level I plan and its implementation. The Family Advocate will contact the parent to set up the meeting. The following questions to be considered in this meeting are:

- Have strategies been implemented on a consistent basis by both parent(s) and staff?
- Has there been measurable improvement in the child's behavior since the implementation of the strategies?
- Have parents and staff made a reasonable effort to follow Mental Health/Disability recommendations, but the child’s disruptive behavior continues?
- Is the behavior life-threatening or does it pose an injury risk to self?
- Does the behavior seriously interfere with students’ learning or the other students’ learning?
- Does the behavior hurt other children or staff or damage materials?
- Has trained staff found it necessary to hold the child to keep the child and others safe?

2. Depending on the answers to the above questions, staff and parents will discuss and decide whether to continue with the Level I plan, or if it is necessary to continue to Level III.

LEVEL III

1. If a decision is made to move to Level III program staff and parents work together to construct an alternate program option that would best meet the needs of the child and family. The Mental Health/Disabilities staff, the Preschool Supervisor and Family Service Advocate will also attend this meeting. Options to be considered include:

- A shortened school day
- Fewer days per week
- Parents attending class with child

2. An Alternative Program Option Plan is written that includes input and signatures from parents/guardians and staff. The Alternative Program Option Plan is a positive plan of action which includes specific action steps, goals and time frames to improve the child's behavior with the ultimate goal of returning the child to the original program option. Parents and staff write out specifics. The plan should include any plans for further evaluation and or counseling by external mental health staff or by public school special services professionals.

3. In the event the parent or guardian, fails, refuses or is not able to comply and cooperate with the Alternative Program Options Plan and the child's behavior continues to present a danger, threat or concern for safety for other children or adults in the classroom, the following will be a final consideration. The child's parent/s, Teacher, Center or Education Manager, Director and/or Deputy Director for Early Childhood Services, Family Advocate, Mental Health Coordinator, and Associate Director for Grantee Programs, will meet and consider all alternatives available for the best interest of the child and the program. It may be necessary to serve the child in the home base option.
WALLED LAKE HEAD START FEES POLICIES

Relates to Head Start Performance Standard(s) 1302.18

Purpose:
To ensure enrolled children and their families are not paying any fees in order to participate in their Head Start program. Head Start will ensure all enrolled children are able to fully participate in all program events.

Procedure
1. No fees will be charged to enrolled students and families for any activities that take place in the classroom. This includes off-site field trips or events.

2. Walled Lake Head Start will only accept a fee from families of enrolled children for services that are in addition to services funded by EHS/Head Start, such as child care before or after funded EHS/Head Start classroom hours.

3. WALLED LAKE Head Start will not enroll other non-Head Start families to the extent allowed by any other applicable federal, state or local funding sources and charge fees to private pay families.
Determining Program Structure

Relates to Head Start Performance Standard(s) 1302.20 (a)(b)(c)(d)

Overall Purpose of Policies:

The purpose of this policy is to plan program options that meet the needs of families in the communities where they are located, including consideration of full school day, full working day, extended year, slot conversion, etc.

(a) Choose a program option.
   Options include center based and home based.

(b) Comprehensive services
   All program options deliver full range of services as defined by the performance standards and the Head Start Act.

(c) Conversion of slots
   If it becomes apparent that a conversion of slots would be beneficial to the community based on the community needs assessment, and identified program trends, the procedure outlined in 1302.20(c)1-4 would be followed according to the performance standards.

(d) Source of funding:
   Regardless of funding source, hours of planned class operations will follow the Head Start/EHS standards as well as any applicable additional standards.

Procedure:
1. Analyze the community needs assessment as part of pre-planning for refunding.
2. Survey parents to further assess needs.
3. Determine program option(s) that are most appropriate for meeting the needs of children and families, including home based, center based, family child care, and or a locally designed and approved option.
4. Determine if there is a need for slot conversion. If yes, following the procedure outlined in 1302.21(3).
5. Determine the calendar and hours of service based on community needs assessment, survey data, schedules of local elementary schools, and the requirements established in the performance standards and child care licensing.

(1) Head Start:
   (i) Will provide a minimum of 128 days per year, operating four days per week.
By August 1, 2021 we will provide 1,020 annual hours of planned class operations over the course of at least eight months per year for all of our Head Start center-base classes.

6. The Management team develops proposed program option and calendar.
7. Proposal for program options is given to policy committee for approval.
8. Management team will implement.
Walled Lake Head Start
Center Based Option

Relates to Head Start Performance Standard: 1302.21

Overall Purpose of Center Based Option Policy:

The overall purpose of center base classrooms is to provide a safe and consistent environment for children to learn through active participation and relationships with peers and teachers.

(a) Setting.

The center-based option delivers the full range of Head Start services consistent with Education and child development services are delivered primarily in classroom settings.

(b) Ratios and group size.

(1) Staff-child ratios and group size maximums must be determined by the age of the majority of children and the needs of children present.

Procedure:

1. Staff-child ratios are determined by the age of the majority of the children in the classroom.
2. Walled Lake follows state licensing requirements for teacher-child ratios and group size when it is the more stringent of the requirements.
3. GRSP classrooms have a ratio of 2:8 per state GRSP funding requirements.

(c) Service duration.

Procedure:

1. Head Start is full day. Classrooms operate 7 hours per day, four days per week.
2. Each year a calendar is developed to ensure at least 128 days per program year taking into account classes may be closed due to weather or building problems.
3. If the number of class days closed exceeds the number allowed additional days will be added to the calendar to ensure 128 days of programming.

(d) Licensing and square footage requirements.

Procedure:
1. Walled Lake follows state licensing requirements for teacher-child ratios and group size when it is the more stringent of the requirements.
2. Classrooms have at least 35 square feet of usable indoor space per child. Outdoor play areas have at least 75 square feet of usable outdoor play space per child.
Purpose:

The purpose of 1302.30 is to describe how WALLED LAKE provides high quality early childhood education programming through Head Start, Early Head Start, and EHS home based services. Our programs are research based, data driven, and incorporate best practices from the field.

1302.31; 1302.32

(a) Teaching and the learning environment; Curricula

WALLED LAKE uses the High Scope curriculum in Head Start classrooms. It is a research based and child focused curriculum. Children learn through a carefully designed process of learning through discovery, called active participatory learning. Learning and development are anchored by long-term, trusting relationships with teachers, who are close at hand to support children as they play and learn. High/Scope aligns with the Head Start Early Learning Framework, as well as Michigan Standards for Quality in Early Education and the NAEYC Standards of Quality.

(b) Effective teaching practices:

1(iii)(iv) High Scope is based on how children develop, and focuses on all areas of child's development. High Scope meets the child where they are, and encourages them to develop at their own rate.

The High/Scope approach is based around the following five principles:

1. Active Learning
2. Adult-child interaction
3. Physical environment
4. Schedules and routine
5. Child observation

Active Learning involves the concepts that children learn with their whole body and with all their senses.
Adult/child interaction involves creating trusting, supportive relationships between children and caregivers. This includes providing continuity of care, responsiveness of caregivers, and following children’s lead.

Physical environments are arranged for active learning to take place in a developmentally appropriate manner that supports learning.

Predictable schedules and routines are established but are also flexible enough to allow for individualization. Routines include guidelines for feeding and mealtime, arrival and departures, nap time, choice time, outside time, and group time. Preschoolers are provided with a variety of child-initiated and teacher initiated activities.

Child observation is ongoing, and occurs within the natural flow of the day. Teaching staff record observations, and use them to share with parents, and to plan for children’s individual development.

Teachers plan developmentally appropriate learning experiences in language, literacy, social and emotional development, math, science, social studies, creative arts, and physical development that are focused toward achieving progress outlined in the Head Start Early Learning Outcomes Framework: Ages Birth to Five and incorporate the key developmental indicators that are an essential component of High Scope.

Procedure:

1. Lesson plans take into consideration information from child assessment data such as COR, ASQ, DECA and informal teacher observations.
2. Lesson plans are developed and revised frequently, often daily, to accommodate children’s development and interests.
3. Lesson plans cover all areas of children’s development, and are designed to have a balance of child-initiated and teacher initiated activities.
4. Teachers use lesson plans to document individualization for each child. This enables teachers to scaffold learning for individual children.
5. Staff review lesson plans weekly to ensure that plans are appropriate and effective.
6. Supervisor conducts Program Quality Assessments (PQA) during the year to ensure that classrooms are appropriate, effective environments for children.
7. CLASS observations are conducted during the school year to assess the quality of teacher child interactions in Head Start classrooms.
8. The supervisor observes classrooms to ensure environments are appropriate, productive, safe, fun places for children to learn and grow.

9. Opportunities for learning are embedded in every part of the HS day, including eating, rest time, and outdoor time. Teachers engage with children, talking, asking questions, providing feedback. During rest time, children have the option of looking at books or doing a quiet activity such as a puzzle if they are unable to nap.

(2)(i)(ii) Being a dual language learner is considered an asset in WALLED LAKE’s Head Start and Early Head Start programs. Parents are encouraged to continue the development of the home language while their children are learning English.

Dual Language Procedures:

**Head Start: English Acquisition while promoting home language:**

1. At time of enrollment, family is asked if the child is exposed to another language on a consistent basis. This could be through a relative, community, etc. This is noted on the enrollment form.

2. Family Advocates as well as teaching staff encourage families to continue speaking to the child in their home language. The value of the home language in developing English is explained.

3. Teaching staff share with families the process of how children acquire a second language.

4. When more than 50% of children speak one language, a minimum of 1 staff person in the classroom speaks the language as well.

5. Books, songs, and finger plays in the home language are used whenever possible.

6. Families and other volunteers who speak the home language of the child are encouraged to come into the classroom.

7. Families are encouraged to share things from their background with the class.

8. Routines are kept as consistent as possible so that dual language learners can predict what will happen next.

9. Grammatically simple and consistent language is used to give directions, provide instructions, and label items.

1302.32 (a)(2) Effective implementation of the curriculum –

**PROCEDURE:**

1. Head Start classrooms are assessed in the fall of the school year using the CLASS tool.

2. Teachers are provided with feedback, and work with their Center Manager or Education Manager to set goals based on the results.
3. Teachers are then provided with training, and support based on their CLASS scores. Training may be individual, or in small or large group settings.

4. Classrooms are reassessed in the spring to determine growth and further opportunities.

5. Head Start classrooms will also be assessed using the PQA (Program Quality Assessment). In the fall, the Environmental section of the PQA is conducted.

6. Based on the results, teachers work with their Center Manager/Education Manager to set goals.

7. Training, technical assistance, and/or support are provided as needed.

8. Classrooms are assessed in the winter on classroom routines.

9. Based on the results, teachers work with their Education Manager to set goals.

10. Training, technical assistance, and/or support are provided as needed.

11. Classrooms are assessed in adult/child interaction in the spring.

12. Based on the results, teachers work with their Education Manager to set goals.

13. Training, technical assistance, and/or support are provided as needed.
WALLED LAKE HEAD START
CHILD SCREENINGS & ASSESSMENTS

Relates to Head Start Performance Standard: 1302.33

Overall Purpose of Child Screening and Assessment Policy:

The purpose of the developmental screening with Head Start is to determine any possible referrals to the disability/mental health staff, provide needed support to teachers and to assess the positive outcomes Head Start may have had for children in this area of development.

(a) Screening

Purpose:

The screening’s purpose is to identify health, developmental and/or other factors that may interfere with a child’s learning, growth and development. It is used to provide teachers and families with information to plan activities and address concerns. Screenings are done with parental consent and input.

Developmental Screening

The Ages and Stages Questionnaire (ASQ) is a developmental screening tool. It is a research validated used in conjunction with information from family members and staff.

Procedure:

1. The Ages and Stages Questionnaire (ASQ) developmental assessment is to be completed by the parents or EHS/HS staff within 45 days of start date or first home visit. Teachers and/or home visitors will complete ASQ on children with parent at first home visit if within 45 days of start.
   a. Teachers and/or home visitors will do a file review of class and make a list of children who do not have an ASQ in the file.
   b. Teachers and/or home visitors will input ASQ into the ASQ online system for scoring.
   c. Score sheet is printed and given to Education Manager for FXP. EHS teachers and home visitors will input ASQ results in FXP.
   d. Screening is put into FXP within two weeks after completion.
   e. If child scores any areas in Monitor (Grey) teacher or home visitor is responsible to rescreen child in two months to monitor growth.
   f. Education manager will pull report monthly and give list to teachers for rescreen.
   g. For Head Start, if child scores two areas in the Refer (Black) area or Refer in Communications a referral is sent to site’s disability coordinator.
   h. Education Manager fills out referral form and gives to disability coordinator.
   i. For EHS home base, if a child scores one area in the black a referral to Early On is filled out and sent to part C referral agency by family educator.
j. If the child’s home language is not English then qualified bilingual staff, contractor or consultant will conduct the screening for language skills in the child’s home language. An interpreter will be used in conjunction with a qualified staff person to conduct the screening when there is not a qualified bilingual staff available.

Social and Emotional Screening Tool

The Devereux Early Childhood Assessment (DECA and DECA-IT) is a social emotional tool designed to focus on three positive protective factors and assess for needs. The purpose of the DECA within Early Head Start/Head Start is to determine any possible referrals to the mental health professional, provide needed support to teachers/home visitors and to assess the positive outcomes Early Head Start/Head Start may have had for children in this area of social/emotional development.

Procedure:

a. It is to be completed by the mental health professional, classroom staff, home visitor or parent with mental health provider’s consultation within 45 calendar days of start date or first home visit for home based programs. A total of two assessments are to be completed within a program year for Head Start and three for Early Head Start. One assessment due upon entry and every four months after until three assessments have been completed for program year.

b. The first assessment is recorded on the Facspro data system under “Health Screenings” to document 45 day completion each year. The next two assessments do not need to be recorder on Facspro.

c. If a child scores two areas in the “need” section or “need” in behavioral a referral to the Mental Health Coordinator is made and mental health will document follow-up on Facspro and/or in the file.

d. This document will be kept in the child’s file in the Mental Health folder.

2. Referrals

Procedure

a. For Head Start, if child scores two areas in the Refer (Black) area or Refer in Communications a referral is sent to site’s disability coordinator.

b. Education Manager fills out referral form and gives to disability coordinator.

c. For EHS home base, if a child scores one area in the black a referral to Early On is filled out and sent to part C referral agency by family educator.

d. If a child has a significant delay, OLHSA will partner with parents to help them access services to help address the child’s identified needs.

e. Devereux Early Childhood Assessment-Infant Toddler is a social emotional tool designed to focus on three positive protective factors and assess for needs. The purpose of the DECA-IT within Early Head Start is to determine any possible referrals to the mental health professional, provide needed support to teachers/home visitors and to assess the positive outcomes Early Head Start may have had for children in this area of development.
(b) **Assessment for individualization.**

OLHSA uses the Child Observation Record (COR) which is a valid and reliable observation based child assessment tool completed to provide ongoing information to evaluate the child's development level and progress. It’s outcomes align with the goals described in the Head Start Early Learning Child Outcomes Framework: Ages Birth to Five. COR provides accurate data for individual child planning.

**Procedure:**

1. Teachers and home visitors receive training on the COR.
2. Teachers and home visitors will observe each child’s behavior and take anecdotal notes beginning with the start of school and on an on-going basis.
3. Observations will scored by teachers and home visitors.
4. Teachers and home visitors will print and review the COR outcomes report. They will make necessary adjustments to the curriculum and instruction to support each child’s overall learning and development in conjunction with school readiness goals.
5. Early Head Start staff will run the COR outcomes report four times a year. Head Start teachers will run the COR outcomes report three times a year. Scoring periods are determined at the beginning of each program year.
6. Head Start Education Managers and Early Head Start Education Manager and Supervisors will review COR outcomes report and meet with teachers or family educators as needed to make the adjustments or recommendations.
7. If the child’s home language is not English then qualified bilingual staff, contractor or consultant will conduct the assessment for language skills in the child’s home language. An interpreter will be used in conjunction with a qualified staff person to conduct the assessment when there is not a qualified bilingual staff available.

**Education Review**

- Head Start Education Managers and Early Head Start Education Manager and Supervisors will be responsible for monitoring COR to ensure they are taking and scoring anecdotal notes appropriately. Status reports will be reviewed monthly by Head Start Education Managers and Early Head Start Education Manager and Supervisors.
- Deputy Director for School Readiness will take note of any program wide trends across the Grantee and Delegate sites and make recommendations as needed.

**OLHSA Responsibilities**

- OLHSA will provide COR program, updates, training and technical support.
- OLHSA will monitor Delegate and Grantee programs to ensure compliance.
WALLED LAKE HEAD START
PARENT AND FAMILY ENGAGEMENT IN EDUCATION

Relates to Head Start Performance Standard(s) 1302.34

Purpose:

Center based programs recognize a parent’s role as the lifelong educator of their child(ren). The program strongly encourages parent participation in their child’s education, and provides ample opportunities for parents to engage both at home and in the classroom. Parents will also be given the opportunity to socialize with their peers in nurturing, confidential environments.

This policy contains the procedures and process overview for the above.

PROCEDURE:

A) The program will provide opportunities for parents and family members to be involved in the program’s education services.
   a. Parents are able to access or participate in their child’s classroom at any time during program hours
   b. Teachers communicate daily with children’s parents about their child’s progress and participation in the program
      i. Communication may be through classroom visits, phone calls, text message, newsletter, art work display, etc...
   c. Teachers and home visitors will hold conferences with parents no less than twice per program year to ensure mutual understanding of the child’s education and developmental progress
      i. Conferences are held in the fall and spring of each program year. The second conference is child–led.
      ii. Conference forms will be filled out with the parents to indicate that the conference took place and that all pertinent information was addressed.
      iii. Individual goals are set for each child in conjunction with the family.
      iv. Conference attendance is entered in Facspro in Action Plans.
   d. The program will design and make available take–home activity suggestions, such as Home Links, that families can work on together to bridge the child’s classroom and home environments
   e. Parents have the opportunity to learn about and provide feedback on any classroom activities or curriculum. Parents will also have the opportunity to learn using similar curricula and to ask questions about their child’s classroom structure or learning plan.
      i. At least four times per year parents are invited to center activities where an activity using their child’s curriculum will be planned
   f. Parents and family members are encouraged to volunteer in a child’s classroom
      i. A parent survey is conducted at the time of application. The surveys are used to plan family engagement activities based on parents interest and skills.
      ii. Parents unable to volunteer in the classroom may be provided with virtual or...
off-site volunteer opportunities

g. Program staff will conduct at least two home visits per program year for each child in a center based classroom.
   
   i. These visits are meant to engage the parents, and entire household, in the child's learning and development
   ii. The results of screenings and assessments are shared during home visits and conferences. This information is documented on the Home Visit and Conference forms.
   iii. Visits may be done at another location if a visit to the child's home presents a safety hazard for staff or at parent request
   iv. Visits must always be done in a location that affords the parent privacy
   v. Home visits are documented by Home Visit form which is signed by the parents.
WALLED LAKE HEAD START
ORAL HEALTH POLICIES

Relates to Head Start Performance Standard(s) 1302.43

Overall Purpose of Oral Health Policies:
When young children have poor oral health care it affects their ability to have good nutritional eating habits. Children whom have routine oral health care screenings and follow up care they are able to focus their attention to healthy eating habits which are necessary for school readiness which we are committed to supporting.

(a) Promoting Oral Health

Purpose:
A program must promote effective oral health hygiene by ensuring all children with teeth are assisted by appropriate staff in brushing their teeth with toothpaste that contains fluoride once daily. We provide children with a new toothbrush every three months and each classroom with toothpaste containing fluoride.

Procedure:
Toothbrushes are supplied to each classroom along with fluoridated toothpaste every three months. Toothbrushes are replaced prior to every three months if an illness has spread through the classroom or for those instances when they have either been dropped on the floor or thrown out. Teaching staff is to have the children brush their teeth once per day at a time determined by the teaching staff. Teachers can demonstrate the correct way of brushing teeth by use of either models of teeth, use of a dental puppet or by demonstrating how they brush their own teeth.
WALLED LAKE HEAD START
NUTRITION POLICIES

Relates to Head Start Performance Standard(s) 1302.44

Overall Purpose of Nutrition Policies:
Good nutrition is an important part of a healthy lifestyle and eating habits are developed as early as two years old. Having good nutrition improves children’s ability to grow, develop, and achieve and maintain a healthy weight as well as help children get the nutrients their bodies need to stay healthy, active, and strong. WALLED LAKE is dedicated to providing nutrient dense and well-balanced meals and snacks for all Early Head Start/Head Start children by having a team of dietitians review and implement menus each month. Good nutrition aids in a child’s health and wellbeing, which increases their attendance and focus.

WALLED LAKE follows the family-style mealtime policy as endorsed by the Office of Head Start. Family-style meals are a great way to introduce healthy foods, model healthy behaviors, and provide chances for nutrition education. It is also an opportunity for children to have meaningful conversations with adults and develop social relationships. It helps build independence by allowing children to make decisions and take responsibility, develop fine and gross motor skills by asking children to pour, pass, serve, and share food as well as enhance language and social skills when children practice table manners and learn appropriate meal time behavior.

(a) Nutrition Service Requirements

Purpose:
A program must design and implement nutrition services that are culturally and developmentally appropriate, meet the nutritional needs of and accommodate the feeding requirements of each child, including children with special dietary needs and children with disabilities. Family style meals are encouraged to help foster communication and conversations that contribute to a child’s learning, development, and socialization.

Procedure:
- Nutrition services are provided for all enrolled Head Start children by a Registered Dietitian (RD) who ensures meals provide one half to two thirds of the child's daily nutritional needs.
- RDs review menus on a monthly basis to ensure foods are developmentally appropriate for each age group, no potentially hazardous choking foods are present, daily nutritional needs are being met, and special dietary needs are accommodated.
- Special dietary needs are provided for religious preference, children with developmental delays, or physician documented food allergies.
- Menus are culturally diverse to expose children to a variety of ethnic tastes, to the extent possible.
- Family style meals are encouraged at all locations, where possible.
- Upon arrival, children are offered breakfast if they have not already consumed the meal at home. Children who arrive to a center after breakfast has been served will still receive a nourishing meal should they accept one when offered at arrival.
• Healthy meals and snacks are provided during home based socializations.
• Drinking water is available for Early Head Start/Head Start children as they request throughout the day.
• Meal observations are done by the Dietitians during on-going monitoring.

(b) Payment Sources

Purpose:
A program must use funds from USDA Food, Nutrition, and Consumer Services child nutrition programs as the primary source of payment for meal services. Early Head Start and Head Start funds may be used to cover those allowable costs not covered by the USDA.

Procedure:
• Meals and snacks follow the meal guidelines for Head Start requirements, CACFP, and NSLP.
• Meal attendance is taken at point of service (POS) for all students during meals and snacks in order to be eligible for claiming reimbursement.
• The dietitians and nutrition manager review each classroom’s POS meal attendance for accuracy and consistency before submitting the monthly claim to CACFP for all sites qualified.
• Reimbursement funds are only used for foodservice payment compensation.
MENTAL HEALTH AND SOCIAL/EMOTIONAL WELLBEING

Relates to Head Start Performance Standard(s) 1302.45

Overall Purpose of Mental Health Policies:
The goal of HEAD START’s Mental Health Service area (per the performance standards) is to assure HEAD START children develop healthy self-esteem and social competency. In Oakland County, HEAD START families existing at or below the poverty level result in a great deal of individual and family stress. Financial constraints due to unemployment, physical or emotional disabilities and lack of marketable job skills, coupled with unsatisfactory housing, transportation and medical resources, create an unstable and emotionally taxing environment for both adults and children.

(a) Wellness promotion

Purpose:
We work to meet the total needs of the child including education, physical health, parent involvement, social services and mental health. As a part of HEAD START, the mental health services area believes that a child’s level of self-esteem and the quality of that child’s life are interdependent. Families are perceived as the principal influence on a child’s development. Mental health issues are encountered daily by HEAD START children, families and staff in their dealings and in dealings with the surrounding community. Mental health must be maintained to cope effectively with our environments.

Procedure:

In light HEAD START’s philosophy we are working to foster:

1. Respect for individual and cultural differences, encouraging the appreciation of individuality and uniqueness.
2. Enhancement of adults (parents and teachers) understanding of the preschooler’s physical, emotional, and cognitive growth and development.
3. Self-esteem by empowering increasing autonomy and recognizing individual values, special-ness and membership within a group. This includes encouraging sociability, responsibility, positive coping skills, problem solving and feeling secure in relationships with adults.
4. Emphasis on the need for establishing supportive and nurturing in-home and classroom environments.
5. Identification of potential crisis situations and their consequences and assistance for parents in remediating and preventing them.

(b) Mental Health Consultant
A program must ensure mental health consultants assist with social/emotional concerns of children, parents and staff.

**Purpose:**
A mental health coordinator or consultant provides trainings and technical assistance to staff and parents regarding mental health issues. The coordinator/consultant also meets with the Mental Health/Disability Associate Director on a monthly basis to plan, assess and evaluate services delivery.

OLHSA employs LMSWs to assist all program options. Each center has access to a social worker at least once a week. Schedule is posted and contact information available.

**Procedure:**

To provide mental health services on behalf of all Early Head Start/Head Start children and families. Children considered by staff to have serious behavioral issues in the classroom should be referred for staffing to the multi-disciplinary team. Refer to the disability section in the Policies & Procedures Manual.

When a crisis or situation arises that requires immediate response from the mental health staff, the need is met and does not wait for the next staffing meeting. When the crisis is under control the child may be staffed for further intervention from other service areas as needed.

Social workers provide:

1. Trauma informed counseling and crisis intervention within the EARLY HEAD START/HEAD START year for children, parents, and staff.
2. Referral to community resources for on-going Therapy.
3. Workshops with parent and staff groups.
4. Consultation for all students and special needs children.
6. Classroom observations
7. Interventions and strategies for children with challenging behaviors
8. Interventions and strategies for children with social emotional concerns
9. Behavioral screening implementation and follow up
10. Monthly information on social/emotional development to teachers and parents.
ED LAKE HEAD START
FAMILY SUPPORT SERVICES
FOR HEALTH, NUTRITION AND MENTAL HEALTH

Relates to Head Start Performance Standard(s) 1302.46

Purpose:
WALLED LAKE Head Start will collaborate with parents to promote children’s health and well-being by providing medical, oral, nutrition and mental Health education support services that are understandable to individuals, including individuals with low health literacy.

Procedure:

Health
A. Parent education activities are provided by programs and activities in and out of the classroom that include parent participation. All Children’s classroom activities have a parent component. Parents receive letters, flyers, and personal invitations regarding upcoming planned activities. Parent support groups and training opportunities are included during parent meetings and times when parents are available. The activities are scheduled according to results of parent surveys.
   a. Opportunities for parents to learn will include:
      1. Medical and oral health care
      2. Emergency first aid
      3. Environmental hazards and health and safety practices for the home including health and developmental consequences of tobacco products use and exposure to lead
      4. Safe sleep

B. WALLED LAKE staff provides ongoing support to assist parents’ navigation through health systems to meet the general health needs of their children. Family Advocates will assist parents by:
   1. Understanding how to access health insurance for themselves and their families, including information about private and public health insurance and designated enrollment periods.
   2. In understanding the results of diagnostic and treatment procedures as well as plans for ongoing care; and,
   3. In familiarizing their children with services they will receive while enrolled in the program and to enroll and participate in a system of ongoing family health care.

Nutrition
a. During enrollment families fill out a nutrition screening that will assess the child’s nutritional status. During this time the importance of healthy eating and good nutrition
are discussed. Opportunities for sharing information on the importance of physical activity and nutritious meal planning are provided as resources and when possible, through family engagement events.

**Mental Health**

a. Information regarding social-emotional development is shared with parents through parent meetings, printed materials and one-on-one consultation with parents. These may include discussions about child development, discipline and other social-emotional issues that parents may bring up.

b. The Family Partnership agreement form is used to identify parental concerns regarding the child’s mental health. The Family Advocates use a check-off system on this form during enrollment and throughout the program year as thy re-assess the family needs with the parents. If a need is identified, a referral form is filled out and given to the Mental Health coordinator.

c. During the home visit while the teacher is meeting with the parent, observations are shared and parental input is requested. If specific mental health concerns are brought up, a referral will be initiated to the multidisciplinary staffing team. Documentation of the meeting will be maintained in the child’s file. The multidisciplinary team staffing process is explained to the parent during the enrollment process and parent orientation.

d. Parenting skills information is made available to parents through the initial parent orientation, parent meetings, and other printed material such as the parent handbook. Support staff is available to answer questions and address specific concerns. When atypical behaviors are observed, parents are contacted and a referral is made to the multidisciplinary team.

e. Parents receive pedestrian training during parent orientation. Parents receive information on appropriate vehicle and pedestrian safety for keeping children safe.
ABUSE AND NEGLECT/MANDATED REPORTER POLICIES

Relates to Performance Standards: 1302.47

Overall Purpose of Abuse and Neglect Policy:
It is essential to intervene in any suspected case of abuse and neglect, both for the safety of the child and for the wellness of the family. Federal, State and Tribal laws require educators and caregivers to report all suspected cases of abuse and neglect. Establishing these procedures helps staff determine when and to whom such a report must be made.

Head Start plays an important role in working with families to prevent child abuse and neglect. Head Start staff identifies risk factors for abuse, and work with families to clarify appropriate expectations, enhance parenting skills, and offer the family emotional support and resources.

(b)(4) (i)k and (b) (5) (i): Safety Training/ Safety practices

Purpose:

In compliance with Head Start Performance Standards, Head Start Staff are required to comply with the Child Protection law of the State of Michigan. The State of Michigan Child Protection Law, Act No. 238, Public Acts of 1975, as amended, being sections 722.621-722-636, Michigan Compiled Laws, is available in each program center. Parts of this law are summarized below:

“Child abuse” means harm or threatened harm to a child’s health or welfare by a parent, legal guardian, or any other person responsible for the child’s health that occurs through non-accidental physical or mental injury; sexual abuse; sexual exploitation; or maltreatment.

“Child neglect” means harm or threatened harm to a child’s health or welfare by a parent, legal guardian, or any other person responsible for the child’s health or welfare that occurs through either of the following:

* Negligent treatment, including the failure to provide adequate food, clothing, shelter or medical care.
* Placing a child at unreasonable risk to the child’s health or welfare by failure of the parent, legal guardian, or any other person who is able to do so and has, or should have, knowledge of the risk.

Who is required to report to Child Protective Services?
Head Start staff who have reasonable cause to suspect child abuse or neglect are required to report. Staff will attend a yearly training that defines “reasonable cause”.

No staff person will be penalized for making a report. All reports made are assumed to be made in good faith.

**Failure of staff member to make a report could result in being found guilty of a misdemeanor. In addition, failure to report is a violation of the State of Michigan Child Care Licensing regulations.**

**Procedure for Identifying Abuse or Neglect**

An annual training is provided for all Head Start staff and parents, regarding procedures related to prevention, identification and intervention on child abuse/neglect issues and staff mandated reporting. The following procedure is in place for identification of abuse or neglect:

If a teacher or other staff member has reasonable cause to suspect an injury, such as a bruise, scar, or burn, might be the result of abuse, they immediately report by phone to Child Protective Services; within 72 hours a written report must be sent (see Procedure for Reporting Abuse, below). The Mental Health Coordinator is available for support and assistance in making the report to Child Protective Services.

If in doubt whether abuse/neglect is the cause of an injury, the staff member contacts the Mental Health Coordinator, who will assist in deciding the appropriate next step. Steps might include, but are not limited to, an assessment by the Health Coordinator, asking the parent for more information, or asking the child about the injury.

If questioning the child, you should:

* Avoid physical barriers.
* Avoid displays of shock; do not criticize the child or the perpetrator.
* Avoid badgering or leading questions. **Any questions should be open-ended.**
* Maintain eye contact.
* Show the child that you are concerned.
* Give the child time to respond to your questions.
* Reassure the child that you believe them and that they were right to tell you, and that it is not their fault.
* Let the child know what action you will take and reassure them that you will protect them.
* Assess the child’s immediate need for safety.
* It is not the place of Early Head Start/Head Start staff to determine that a child is or is not being abused or neglected; but only to report suspected abuse or neglect.

Whether or not it is determined that a report to Child Protective Services must be made, the teacher or staff member who observed the injury will keep an anecdotal account of the incident in a safe place that ensures confidentiality will be kept. A teacher will continue to observe the child as they will all children. Any second injury noticed will be noted in the same fashion, and the same procedure followed.

If there is any evidence that a child is in a life-threatening or seriously dangerous situation, a report will be made to Child Protective Services immediately.

If a parent shares with Early Head Start/Head Start staff his or her concern that he/she may be abusing a child or children, the staff will work to help this parent to get needed services and support. This may include supporting the family in reporting the situation to Child Protective services. In addition, resource staff such as Mental Health or Disabilities Coordinator may be appropriate for providing additional support and resources for the family.

When the Early Head Start/Head Start Program believes a child is being neglected, such as not being provided with adequate food, clothing, medical attention or protection, the appropriate staff will speak with the parent. Staff can then work with the parents/family in order to help them improve parenting skills and find resources to support them in caring for their children. The Early Head Start/Head Start program is required to report known or suspected neglect.

**Procedure for Reporting Abuse or Neglect**

All Head Start staff is required by the State of Michigan Child Protection Law to report suspected or known child abuse or neglect. A phone report is to be made **IMMEDIATELY** to the Child Protective Services Department of the Department of Human Services.

When child abuse or neglect is known or suspected, the following steps are taken:

1. The Mental Health Coordinator is informed and will be available to assist with reporting.

2. The oral (phone) report will be made immediately to the DHS/CPS centralized intake office at (855) 444-3911. When this report is made, the intake worker will give the caller a “Log Number.” This number should be recorded at the top of the Form 3200 (see step 3, below).
3. Within 72 hours of the oral report, a written report of the incident will be sent to the DHS/CPS unit. This report is made by using the Form 3200, Report of Actual or Suspected Child Abuse or Neglect. In most cases, the written report is made by faxing the completed form immediately following the oral report. The fax number for this report is (616) 977-1154 or (616) 977-1158. The original form is then retained in the Mental Health Coordinator’s locked, confidential file. Associate Director for Mental Health and Disabilities is notified of the report.

4. For the safety of the child and the reporting staff, Child Protective Services reports are kept confidential. Information regarding the identity of involved parties is not disclosed to any individuals not directly involved in the reporting process.
WALLED LAKE HEAD START
ENSURING HOME VISIT SAFETY

Relates to Performance Standards: 1302.47

Purpose: Safety Training
All staff has orientation training that goes over all Safety concerns and requirements. Home-visit safety falls into this category of safety training. Policy is to ensure the safety of staff, parents and children when out in the community.

Procedure:
Staff who provide services or visit a participant in the home must adhere to the agency safety practices.

- Staff members should not enter a home to provide services without the presence of an adult in the home.
- At the initial visit, it is essential that a thorough environmental assessment is performed to identify areas of concern that may impact the safety of the participant as well as that of the staff that will provide services in the home.
- All safety concerns should be documented and provided to the supervisor for the participant’s file.
- If the participant and his/her family or friends are not able to address these safety concerns, staff will evaluate if service can be provided.
- Manager will be notified when staff is leaving for home visit and notified when returned.
- All staff will have access to cell phone on home visits.
- Staff will receive Tips and Resource sheet for safe and effective home visiting along with appropriate training.

WALLED LAKE Head Start wants to provide a safe and non-threatening environment for those arranging for and providing services. Families should be instructed as follows:

- Keep animals/pets outside or away from staff.
- Have no guns or weapons visible when staff is in your home.
- Refrain from using profane or offensive language when communicating with the staff.
- Refrain from using verbal or physical abuse toward staff.
- Refrain from any and all illegal or illicit activities.
- Be considerate to those providing or arranging services by treating others with respect and dignity.
- Follow and actively participate in the agreed upon plan.

If illegal activities are witnessed by a staff member, the staff should:

- Exit the home immediately and call 911 to make a police report.
- The staff must follow up by completing an incident/Accident Report and conferencing with their supervisor within one business day of the incident. (The use of medical Marijuana is not considered illegal activity as long as the participant is legally enrolled as a recipient.)
All Safety concerns of the participant and staff are taken seriously. If an employee or participant feels that their safety needs are not being adequately addressed, they should use the appropriate Grievance Procedure.
EARLY HEAD START & HEAD START
SAFETY PRACTICES

Relates to Head Start Performance Standard: 1302.47

Purpose:
WALLED LAKE Head Start will establish, train staff, implement, and enforce a system of health and safety practices that ensure children are kept safe at all times. A program should consult Caring for our Children Basics, available at http://www.acf.hhs.gov/sites/default/files/ecd/caring_for_our_childrenBasics.pdf, for additional information to develop and implement adequate safety policies and practices described in this part.

WALLED LAKE Head Start will implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with §1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety.

Procedure:
(1) Facilities.

WALLED LAKE adheres to the State of Michigan Licensing requirements for child care centers in accordance with rule 1302.21.

(i) WALLED LAKE adheres to licensing requirements for child care centers in accordance with §§1302.21(d)(1) and 1302.23(d).

(ii) WALLED LAKE has developed and implements a pest control procedure in accordance with the State of Michigan Licensing requirements for child care centers in accordance with rule R. 400.8380 Maintenance of Premises (g) (a) (b) (c).

(iii) WALLED LAKE adheres to the State of Michigan Licensing requirements for child care centers in accordance with rule R 400.8375 Premises, R. 400.8380 Maintenance of premises and R. 400.8385 Poisonous or toxic materials.

(iv) WALLED LAKE adheres to the State of Michigan Licensing requirements for child care centers in accordance with rule R 400.8385 Poisonous or toxic materials.

(v) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R400.8370 (3) Light, ventilation, and screening.

(vi) WALLED LAKE ensures that each Head Start and Early Head Start classroom maintains an up to date first aid and emergency supplies kit. The first aid kit will be kept in a cabinet that is labeled in a location that is known to all staff. The first aid kit and emergency supplies kit will be inaccessible to children. When children leave the center for walks or to utilize the playground, back-packs will be used. First aid kits are restocked once a month or as needed.

Procedure:
(2) Equipment and Materials
WALLED LAKE ensures that all indoor and outdoor play equipment, cribs, cots, feeding, chairs, strollers, and other equipment used in the care of all enrolled children, and as applicable, other equipment and materials meet standards set by the Consumer Product Safety Commission (CPSC) or the American Society for Testing and Materials, International (ASTM).

(i) WALLED LAKE adheres to the Head Start procedure for cleaning/sanitizing toys/surfaces. The schedule of cleaning is based on recommendations from the Michigan Department of Community Health and the Michigan Department of Human Services.

Cleaning Procedure:
- Scrub well with soap and water.
- Rinse with clean water.

Disinfecting Procedure:
- Scrub well with soap and water
- Rinse with clean water
- Spray or wipe environmental surfaces with approved sanitizer
- Disinfect toys using 3 step procedure of
  - Soapy fresh water
  - Clear water rinse
  - Bleach water solution submersion of 1 minute
- Air dry

(ii) WALLED LAKE adheres to the State of Michigan requirement for Child Care Centers in accordance with rule R 400.8173 equipment.

Procedure:
(3) Background checks
- Prior to hire, all staff must adhere to a background check.
- All WALLED LAKE Head Start staff are given a criminal history check using the Michigan department of state police internet criminal history access tool (ICHAT).
- A copy of the ICHAT is kept on file at the center.
- All WALLED LAKE Head Start staff are screened for any history of child and abuse and neglect history prior to hire through the local Department of Human Service Central Registry Clearance.
- A copy of the central registry clearance is kept on file at the center.
- If a staff person has resided outside of Michigan as an adult within the 10 years immediately preceding the date of hire, a criminal history check equivalent to Michigan department of state police internet criminal history tool (ICHAT) and the department of human services central registry clearance is requested for all states
of previous residence during those 10 years. The out-of-state requests and any responses are kept on file at the center.

Procedure:

(4) Safety Training

- All WALLED LAKE staff receive training upon hire to address items A-K of this section.
- A pre-service training is conducted yearly in the month of August for all newly hired and returning staff to address items A-K of this section.
- All staff without regular child contact participates in orientation upon hire and training as needed in alignment with the State of Michigan Child Care Licensing Rules and Regulations.

Procedure:

(5) Safety Practices.

WALLED LAKE staff and consultants follows appropriate practices to keep children safe during all activities, including at a minimum:

(i) WALLED LAKE staff is educated on child abuse and neglect to establish child abuse and neglect prevention and recognition strategies.

The training addresses physical, sexual, and emotional abuse.

The training is in compliance with the State of Michigan’s reporting laws.

(ii) WALLED LAKE staff adheres to the safe sleep practices as recommended by the American Academy of Pediatrics (AAP). Cribs comply with the current U.S. Consumer Product Safety Commission (CPSC) and ASTM International safety standard.

(iii) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R 400.8125 staff and volunteers.

(iv) Children are only released to adults authorized by parent or legal guardians whose identity has been verified by photo identification.

Names, addresses, and the telephone numbers of persons authorized to pick up child will be obtained during the enrollment process and regularly reviewed, along with clarification/documentation of any custody issues/court orders.

Authorized pick up persons is documented on the child’s information card.

(v) WALLED LAKE adheres to performance standard 1302.90 in accordance with rule 1302.47.
Procedure:

(6) Hygiene Practices.

All WALLED LAKE staff systematically and routinely implements hygiene practices.

(i) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R.400.8137 diapering; toileting.

(ii) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R.400.8310 food preparation areas, R.400.8315 food and equipment storage, R.400.8320 food preparation, R.400.8325 sanitization.

(iii) WALLED LAKE adheres to the Centers for Disease Control and Prevention (CDC) to handle potential exposure to blood and other potentially infectious fluids.

Teachers and Caregivers are trained upon hire and annually thereafter.

Trainings adhere to the requirements of the Occupational Safety and Health Administration (OSHA).

Procedure:

(7) Administrative safety procedures.

WALLED LAKE Programs establish, follow, and practice, appropriate administrative safety procedures.

(i) WALLED LAKE follows the Emergency Preparedness Plan in the event emergencies including fire prevention and response.

(ii) Public Act 368 of the 1978 Michigan Complied Laws and the Michigan Department of Public Health Rules and Regulations regarding communicable disease control, state that school administrators (or their designee) must report cases of certain diseases to their local health department.

Head Start/Early Head Start Center Managers (or their designee) will be responsible for reporting cases of communicable disease on a weekly basis through the Oakland County Health and Human Services portal (HHSCP).

(iii) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R.400.8152 medication; administrative procedures.

WALLED LAKE implemented and follows the Health Services Screening & Follow-Up Procedure in addition to the Child Medication Log/Behavior Log for Head Start and Early Head Start.

(iv) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R.400.8143 (1), (2) children’s records.

(v) WALLED LAKE Implemented and follows the Head Start/ Early Head Start Food & Nutrition Policy.

Procedure:

(8) Disaster preparedness plan

WALLED LAKE follows the Emergency Preparedness Plan located in the Center Manager’s office, in the event of any natural or manmade disasters.

(i) WALLED LAKE adheres to the State of Michigan requirements for child care centers in accordance with rule R. 400.8158 Incident, accident, injury, illness, death, fire reporting.
WALLED LAKE HEAD START
FAMILY ENGAGEMENT

Relates to Head Start Performance Standard(s) 1302.50

Purpose:
The program will integrate family engagement strategies and activity into all systems and content areas. The program will implement a two-generational approach that will address the needs of children and their families. Prevalent family needs will be assessed through the use of a family partnership agreement, needs assessment, community assessment and family/staff relationships. Families will have access to resources and referrals at all times and will be afforded privacy and translation services.

This policy contains the procedures and process overview for the above.

PROCEDURE:

A) The program will work to engage parents in their children’s learning and development by supporting parents in their role as their child’s primary teacher.
   a. Program policies and procedure for including parents and families in educational activities are detailed in 1302.34 Family Engagement in Education and Child Development Services
   b. The program will work to involve fathers in all educational and engagement activities

B) Develop trusting, mutually respective relationship with parents to structure services that not only create a welcoming environment but to support individual cultural, ethnic and linguistic needs of families

C) Collaborate with families on the creation of a Family Partnership Agreement encouraging family well-being though goal setting, needs assessment and health services.
   a. Program policies and procedure for the family partnership process are detailed in 1302.52 Family Partnership Services

D) Provide parents the opportunity to participate in the program as employees or volunteers
   a. Parents are made aware of employment opportunities at parent committee meetings, through job posting bulletin boards and from teachers and family advocates.
   b. All open positions are presented to the Policy Council each meeting as an agenda item.
   c. All parents are invited and encouraged to volunteer in all aspects of the program. The program provides volunteer training and attempts to offer activities that meet a variety of parent interest and schedules such as classroom volunteers, preparation of materials or representing their program in a policy group.

E) Conduct family engagement services in the families preferred language, to the extent possible
   a. An effort is made to recruit and hire staff that is bilingual in the program’s common languages.
   b. Families are always encouraged and welcomed to bring interpreters or family members to all engagement opportunities

F) Implement procedures for teachers, Family Educators, Family Advocates and support staff to share information with each other.
   a. Teachers and Family Advocates are required to hold Case Management Meetings every month to discuss unresolved or on-going needs of children and families. As a result of these meetings teachers and Family Advocates develop a partnership approach to work with families to meet needs or resolve issues.
   b. Commonly discussed Case Management meeting topics are attendance, health needs and challenging behaviors.
Purpose:
WALLED LAKE Head Start will promote shared responsibility with parents for children’s early learning and development by implementing family engagement strategies to foster parental confidence and skills in promoting children’s learning and development. Parents and families are their children’s most important educators. Through positive interactions with their children, parents promote healthy development and prepare them for school.

PROCEDURE:

(A) Home links are educational activities for a family member to support home learning. These activities promote positive interactions that support the parent child relationship.

(B) Family Engagement Events will be scheduled and offer educational activities that include supporting the parent-child relationship and child development.

(C) Staff begins to educate parents on the importance of regular attendance beginning at enrollment. Students who attend on a regular basis have better educational outcomes. When a student’s attendance becomes a concern, staff will work with the family to determine the barriers to regular attendance.

(D) Dual Language Learner families are provided with information and resources about the benefits of bilingualism to encourage their child’s literate competencies in two languages.

(E) WALLED LAKE Head Start provides parents/families opportunities throughout the school year to participate in a parenting group using The Incredible Years Parenting Curriculum. The programs are designed to work jointly to promote emotional, social, and academic competence and to prevent, reduce, and treat behavioral and emotional problems in young children. The parent group is led by WALLED LAKE’s Mental Health staff. The Incredible Years is a series of interlocking, evidence-based programs for parents, children, and teachers, supported by over 30 years of research. The goal is to prevent and treat young children's behavior problems and promote their social, emotional, and academic competence.
WALLED LAKE HEAD START
FAMILY PARTNERSHIP SERVICES

Relates to Head Start Performance Standard(s) 1302.52

Purpose:
Parent and Family Engagement in Head Start is about building relationships with families that support family well-being, strong relationships between parents and their children and ongoing learning and development for both parents and children.

This policy contains the procedures and process overview for the above.

PROCEDURE:

A) The program has implemented a family partnership process that includes a Family Partnership Agreement that supports family well-being, safety, health, economic stability and the services available to foster children, homeless children and children with disabilities.

B) Intake and family assessment procedures are used to identify family strengths and needs.
   a. All family partnership services are driven by the Parent, Family and Community Engagement Framework outcomes of family well-being, parent-child relationships, families as lifelong educators, families as learners, family engagement in transitions, family connections to peers and community, families as advocates and leaders.

C) All family partnership services are individualized for each family. Parents are the primary drivers of choosing their family’s goals.
   a. An initial Family Partnership Agreement, including all demographic, eligibility, family history, health history, nutrition, risk factor and program related information will be completed at the time of the family’s initial intake and application. An initial needs assessment is also completed at application.
   b. Family Advocates (Family Educators in home-based programs) will work with all families to establish family engagement goals using the Family Engagement Goals and Objectives Form.
   c. Prior to meeting with a family, staff will review the family’s entire file and assess the family’s strengths, challenges, past needs and health needs to better assist the parent/guardians in choosing appropriate and attainable goals for the family.
   d. Family Interaction sessions are to take place with the family at least three times per year. During this interaction, staff will review and assist the family with goal setting, conduct a thorough needs assessment and review children's health needs.
   e. Identified needs will be followed up on with respect to their priority. Resources will be given and staff will follow up with families to ensure they have followed through on their referral to meet their needs.
   f. During the goal setting process, staff and parents will identify resources needed, steps to take and support will be provided on an on-going bases to assist the parent through this process.
      i. Family Interactions are to take place at least three times during the Head Start program year and four times during the Early Head Start program year.
         1. Interaction #1 – September – November
         2. Interaction #2 – December –February
         3. Interaction #3 – March – May
         4. Interaction #4 – June – August (EHS only)
      ii. An Assessment/Baseline survey will be completed with the first and last needs assessments.
   g. As families make progress toward completing their chosen goals, staff will indicate the progress made. The progress will be noted on the Family Engagement Goals and Objectives Form as well as recording
the appropriate Action Plan in FacsPro.

h. Parent Signature and Date are required to document each family interaction, goal review and needs assessment. Staff Signature and Date are also required. Special notes of resources provided to the family should be indicated in the Notes/Resources Provided section on the appropriate forms as well as recorded in FacsPro using case notes, Action Plans and PIR Household Information.

i. Families should have at least three (3) active goals at any time throughout the program year. As goals are completed, staff will work with families to choose additional goals. If any goal has not been completed at the end of the program year, staff will provide families with resources to complete their goals.

j. Needs Assessments should be reviewed immediately and resources provided based on the urgency and intensity of the identified needs.

D) The program will always work with families to identify their existing relationships with community agencies. If a family has an on-going plan with another agency the program will document such and avoid duplicating resources. Agencies or services available to the family will be provided by staff to ensure every resource is used in order to meet family needs.
WALLED LAKE HEAD START
COMMUNITY PARTNERSHIPS AND COORDINATION WITH
OTHER EARLY CHILDHOOD AND EDUCATION PROGRAMS POLICY

Relates to Head Start Performance Standard(s) 1302.53

Purpose:
Community partnering is a vital element of the program which takes into account the interests and needs of parents, children and the program as a whole. Connections are made with agencies and services that will meet the needs of our families as well as enhance and strengthen WALLED LAKE Head Start programming for parents and children.
Formal partnership agreements have been developed with agencies as needed and include area human services programs, public school districts and collaborating project partners. Informal and ongoing partnerships with numerous agencies solidify Head Start as a viable part of each community and ensure the availability and usage of those agencies and services by our families.

(a) Community Partnerships

(1) WALLED LAKE Head Start is an active collaborating partner in all of the communities served and has representatives on most community networking groups including early childhood groups, Public and Charter school partnerships, Lions Club, OIHN, OCHD, Dentists R Us have led to new community initiatives that have benefits beyond those to low income children and their families.

(2) WALLED LAKE, through OLHSA, has established collaborative partnerships with the following agencies:
   (i) Health Care Providers - OIHN
   (ii) Individuals and agencies – Easter Seals, Local Education Agency in which each of our Head Start programs are located.
   (iii) Family preservation and support services – Care house, Oakland Family Services
   (iv) Educational and cultural institutions – Pontiac Library
   (v) TANF - DHHS
   (vi) Housing Assistance McKinney Vento - WALLED LAKE
   (vii) Domestic Violence Prevention - Haven
   (vii) Other Organizations –

(b) Coordination with other programs and systems
The purpose of Head Start to coordinate services with other programs is to build collaborative partnerships between federally funded EHS/Head Start programs and community partners to expand access to high quality services for low income children and their families in Oakland County. Through coordination with other programs WALLED LAKE will create a network of community partnerships as a base to provide high quality comprehensive services.

(1) WALLED LAKE EHS/Head Start will participate in the Michigan Quality Rating and Improvement System (QRIS).

Data Systems – Our COR Database system is used in partnership with Oakland Schools to share Child Observation Record data for improved outcomes.
EARLY HEAD START & HEAD START
MULTIDISCIPLINARY STAFFING

Relates to Head Start Performance Standard(s) 1302.60, 1302.61

Overall Purpose of Children with Disabilities Policies:
A program must ensure enrolled children with disabilities, including but not limited to those who are eligible for services under IDEA, and their families receive all applicable program services delivered in the least restrictive environment and that they fully participate in all program activities.

Purpose:
A multidisciplinary Staffing meeting is needed when a staff notices a child could use more supports in the classroom for behavioral, developmental or health concerns prior to entry and during school year. The multidisciplinary approach involves all disciplines for a comprehensive look at all areas of the child’s life which could be affecting their educational outcomes. The Multidisciplinary Staffing meeting includes representatives from Education, Family Engagement, Mental Health, Disabilities, Health, and Nutrition. Parent or Guardian will all be included in the staffing process.

Procedure:
When a staff identifies a concern in the areas of development, behavioral or health:

- Notify supervisor of concern
- Supervisor will conduct an observation and look at classroom management/facilitation. Then complete a classroom checklist with possible universal strategies for implementation.
- If determined more individual strategies are needed, teacher will complete the Multidisciplinary staffing form with specific information on what current issue is and what/how long strategies have been tried.
- Supervisor to schedule meeting and send email to invite appropriate staff.
- After receiving email:
  - Family Advocate will contact family about meeting time and reason.
  - All other staff will complete classroom observation.
- At the meeting, the team will discuss observations, assessments and staff concerns.
- A staffing action plan will be developed at this time and a copy will be given to the teacher.
- Tools given to the teacher for tracking of specific strategies for two to four weeks.
- All original staffing forms will be kept by the Supervisor.
• If specific behavioral problems continue and become more urgent after first Staffing meeting then move to “Challenging Behavior” Procedure.
WALLED LAKE HEAD START
CHILDREN WITH DISABILITIES

Relates to Head Start Performance Standard(s) 1302.60, 1302.61, 1302.62 and 1302.63

Overall Purpose of Children with Disabilities Policies:
Program must ensure that enrolled children with disabilities, including but not limited to those eligible for services through the LEA, receive appropriate services according to IDEA and children suspected of delay receive referral to LEA for services. Head Start is used as the inclusive general education setting for children who have a disability. Children with disabilities are included in all classroom and group activities. Programs must collaborate with parents of children with disabilities and ensure the needs of the entire family are being met. Along with Parents, programs also collaborate with the Local Educational Agency (LEA)/Part C Agency to identify and implement the IFSP/IEP.

(a) Additional Services for children with disabilities

**Purpose:**
Each Head Start child with a disability has an IEP through the LEA. Early Head Start children who qualify have an IFSP through Early On, the part C provider. Services are provided by the LEA, however, programs are still required to individualize for the child and ensure services are being provided. Children with disabilities are required to be included in all general education activities and programs need to provide modification to make that happen effectively.

**Procedure:**

1. Upon enrollment into the program, if child has an IEP/IFSP, family advocates will receive a copy from the parent and complete referral to disability coordinator within two weeks.
2. Disability Coordinator will review IEP/IFSP and enter information into data base system.
3. Disability Coordinator will contact the family to discuss child’s needs and receive written permission to discuss services with LEA.
4. Disability Coordinator is assigned to coordinate all efforts and resources, avoid duplication of services, and act as contact person for the parents.
5. Disability Coordinator works with staff to make accommodations and provide support for IEP/IFSP goals in the classroom.
6. Head Start lesson plans will include any necessary classroom and/or teaching modifications necessary to allow children with disabilities to participate in the full range of activities.
7. Assistive equipment is available if needed, and guidance is provided by the disability coordinator.
8. Children are included in small and large group activities in Head Start classrooms.
9. Head Start staff receives training regarding best inclusion practices and accommodations.

(b) Services during IDEA eligibility determination

**Purpose:**
This Policy is to ensure that children identified as having a specific concern in development receive supports in the classroom as well as being referred to LEA agency. During the evaluation process, staff will work with classroom teachers on appropriate classroom supports that enhancing the child’s educational development. The Multidisciplinary staffing policy addresses additional detail on children with behavior, development or health concerns.

**Procedure:**

Referral Process:
1. Parent, classroom teacher or staff identifies a concern with childhood development.
2. Internal referral given to disability coordinator for HS.
3. Once a referral is received, someone from the disability team will come to the classroom and do an observation and screening.
4. Once the observation and screening are completed, the disabilities coordinator will meet with the teacher to let them know if a school district referral is advisable.
5. If that is the case, the disabilities coordinator will contact the parent to set up a meeting and go over options as well as obtain permission for further observation and evaluation if needed.
6. If school district referral is not advisable as this time, disability coordinator will work with teacher and parents on implementing strategies in classroom and monitor progress.
7. If an evaluation is needed, the parent will be encouraged and supported to make a phone call to the school district Special Education Department and request an evaluation for their child. The disabilities team is happy to provide phone numbers, or even sit with the parent while they make the call. Our phones are always available for this purpose.
8. If the referred child is eligible for a school district IEP or Part C provider for an IFSP, the Head Start/EHS classroom teacher or home visitor will be encouraged to attend the IEP/IFSP meeting.
9. Once services begin for this child, the School District employees will sign the children they are seeing in and out of the classroom. Services are provided on site.
10. If evaluation and IEP/IFSP team determine that a self-contained classroom is more appropriate, staff will facilitate transition.

(c) Additional Services for children with an IFSP or IEP

**Purpose:**
To ensure the individual needs of children eligible for services under IDEA are met and that children are working toward their IEP/IFSP goals.

**Procedure:**

**Services**

1. The LEA provides Special Education and related services. The Disabilities Coordinator processes the referral and does follow-up to make sure evaluations are completed and services provided.
2. The LEA invites Head Start to the IEP meeting, where evaluation results are presented and placement or services are discussed.
3. The Disabilities Coordinator serves as a liaison between the LEA and the family, and supports parents’ efforts and decisions.
4. The LEA Team develops the IEP in compliance with the federal regulations as outlined by the IDEA law.
5. Evaluations and services for children in Early Head Start are arranged through the part C provider, Early On.
6. IEP/IFSP goals are individualized per child and are written in lesson plans.

*This procedure reflects the current requirements under the Head Start Reauthorization Act of 2007.*

**Transition**

1. For any child with a disability, all preparations must be made in advance of the child’s first day of entry into the program, even if the child starts later than the rest of the children. This is particularly important for children with severe disabilities, and chronic or terminal conditions.
2. For children coming into Early Head Start with an IFSP, a meeting is held between appropriate staff, Early On staff, and parents to provide transition planning for the child.
3. At the end of the Head Start school year, a meeting is held with the parent, teacher and (invited) Local Education Agency (LEA) representative to complete the IEP Planning Meeting Summary Form for
transition needs. At the time the LEA provides the parent with transition expectations and completes an IEP, if needed.

4. All preparations are to be documented by completing the OLHSA Head Start Transition Plan with the parent/guardian.

Additional Services for Parents

1. Disability Coordinator meets with parents of children who have a diagnosed disability or children with a developmental concern.
2. Staff works as liaison between LEA and parent.
3. During evaluation determination, staff discuss the process under IDEA and go over parent/child rights.
4. Staff provides individual and/or group meetings on being an advocate for one’s child.
5. During the IFSP/IEP determination. Parents follow the process determined by the IDEA law and OLHSA staff is present to help with understanding.

Coordination and Collaboration with the local agency responsible for implementing IDEA

1. Each LEA that is a part of the Head Start/Early Head Start program has signed an “Interagency Agreement”.
2. OLHSA staff attend IFSP/IEP when possible and share information related to appropriate goals.

See EHS.HS. Interagency Agreement for further details.
WALLED LAKE HEAD START
TRANSITIONS FROM HEAD START TO KINDERGARTEN

Relates to Head Start Performance Standard(s) 1302.71

Purpose:
The purpose of transition policies is to ensure that children and families move from our programs to the next program as smoothly as possible.

(a) Implementing transition strategies and practices.

Purpose:
The purpose of this policy is to assist children and families with a smooth and successful transition from Head Start into kindergarten.

(b) Family collaborations for transitions

(1)(2) WALLED LAKE works with parents to understand their child’s development and be an advocate for their child as they enter kindergarten.

(i) Help parents understand their child’s progress during Head Start;

Procedure:
1. Parents participate in two home visits and two conferences during the school year. The child’s progress is shared at each home visit and conference using the COR Family Report (Child Observation Record), Ages and Stages Questionnaire (ASQ), and the child’s portfolio. Topics to be covered are listed on the first and second conference forms, and first and second home visit forms. Topics include results of screenings, parent concerns, etc.
2. During the second home visit, teaching staff and Family Advocates meet with families to discuss kindergarten placement options.
3. First and second home visit forms and first and second conference forms are filled out and signed by the staff with the parents.
4. A copy of each form and report is placed in the child’s file, in the Education section. Parents also receive a copy of each form, as well as copies of the COR Family Report and the results of the ASQ and DECA.

(ii) WALLED LAKE helps parents understand practices we use to effectively provide academic and social support for their children during their transition to kindergarten and foster their continued involvement in the education of their child;
**Procedure:**
1. Education Manager sends kindergarten round up information to parents for their local schools when it becomes available.
2. Education staff works with local kindergarten teachers to arrange for a visit to a kindergarten classroom. Parents are encouraged to attend with their child.
3. Education staff invites parents to a “Parent Connection” meeting in the spring of the year. Topics for the meeting include how to support your child’s transition to kindergarten, how to support children’s developing literacy skills, volunteering in the kindergarten classroom, available resources, the importance of being involved in your child’s education and the local parent/teacher group, etc.
4. Parents receive a handbook of activities they can do with their child during the summer months to prepare them for kindergarten.

(iii) WALLED LAKE prepares parents to exercise their rights and responsibilities concerning the education of their children in the elementary school setting, including services and supports available to children with disabilities and various options for their child to participate in language instruction educational programs.

**Procedure:**

(iv) Assist parents in the ongoing communication with teachers and other school personnel so that parents can participate in decisions related to their children’s education.

**Procedure:**
1. See above section (b) (2) (ii) and (iii)
2. Additionally, as children are preparing to exit Head Start, Family Advocates provide parents with copies of their child’s information to take with them to enroll in kindergarten.

(c) (1)(2) Community collaborations for transitions:
WALLED LAKE works with local education agencies to support parents in successful transitions to kindergarten for children, their families, and the elementary school.

**Procedure:**

1. At the end of the school year, parents are given copies of their child’s records, COR Family report, ASQ results, DECA results, and their child’s portfolio. Families are encouraged to share this information with the kindergarten teacher.
2. Education Manager will ensure that summer school information is given to parents, and will assist parents in the enrollment process as needed.

3. WALLED LAKE’s public relations department will ensure that the information is posted on social media.

4. Education Managers and teaching staff will plan activities to use within the classroom. These may include: setting up a “kindergarten class” in the house area, having a kindergarten student come and visit the preschool classroom and tell what kindergarten is like, have a kindergarten teacher come and visit the preschool classroom, write a letter to their kindergarten teacher, write a letter to future preschool students, etc.

(d) **Transition services for children with an IEP:** See 1302.60
WALLED LAKE HEAD START
TRANSITIONS BETWEEN PROGRAMS

Relates to Head Start Performance Standard: 1302.72

Overall Purpose of Transition between Programs Policy:
Planning transitions helps to minimize disruption of the family system and promotes child functioning at home and in school and community settings. Transitions may occur when there is a change in agencies, location or type of services, providers, program/child/family status, or funding sources.

Procedure:

(a) For families who move out of the community, WALLED LAKE will support a family’s transition to another program by reviewing with them a listing of early childhood programs in the new community that meets their needs.

(b) For families who will transition their children to other early education programs, including public pre-kindergarten, in the year prior to kindergarten entry WALLED LAKE will follow the strategies and activities described in §1302.71(b) and (c)(1) and (2), as practicable and appropriate.
Relates to Head Start Performance Standard(s) 1302.90 Personnel policies (a)(b)(c)(d)

Overall Purpose of Policies:

The purpose of this policy is to establish written personnel policies and procedures that are approved by governing body and policy council and govern the recruitment, selection, and evaluation of current and potential employees.

(a) Establishing personnel policies and procedures
See above purpose

(b) Background checks and selection process Procedure:

1. Upon receiving an application for an open position, Supervisor will evaluate the application and/or resume, and transcripts to see if the applicant is qualified for the position.
2. If the applicant is qualified for the open position, the Preschool staff will contact the applicant to schedule an interview.
3. If the Preschool Supervisor is satisfied with the results of the interview, the department will verify references, conduct a sex offender registry check and obtain one of the following:
   (i) State or tribal criminal history records, including fingerprint checks, or
   (ii) FBI criminal history records including fingerprint checks.

HR will review information found in each employment application and complete background check to assess the relevancy of any issue uncovered by the complete background check including any arrest, pending criminal charges, or conviction and must use Child Care and Development Fund disqualification factors described in 42 USC 9858©(1)(d) and 42 USC 9858(h)(1) to determine whether the prospective employee can be hired or the current employee must be terminated.

After a person is hired for employment, HR has 90 days to complete the background check process by obtaining:

(i) Whichever check listed in paragraph (b)(4) of this section was not obtained prior to the date of hire; and
(ii) Child abuse and neglect state registry check, if available.

Results are again reviewed by HR to ensure that newly hired employees, consultants, or contractors do not have unsupervised access to children until the complete background check process described in paragraphs (b)(1) through (4)(ii) in this section is complete.
The HR department conducts the complete background check for each employee, consultant, or contractor at least once every five years which must include each of the four checks listed in paragraphs (b)(1)-(4) of this section, and review and make employment decisions based on the information as described in paragraph (b)(3) of this section. Current and former program parents are always encouraged to apply for employment vacancies for which they are qualified.

*** The State of Michigan is working on a process where we have a candidate’s information sent to them and they will conduct all fingerprint checks, both state and FBI, as well as child abuse and neglect, and sex offender registry. When this is in place, WLCSD will not need to conduct additional fingerprint checks. Once this is in place, the policy will be changed to reflect the new process.

(c) Standards of Conduct
(1) WLCSD ensures that all staff, consultants, contractors, and volunteers are trained and follow all applicable codes of conduct related to their position. Codes of conduct follow all State of Michigan licensing requirements, Head Start requirements, High/Scope conflict resolution guidelines, and NAEYC Ethical code of conduct requirements.
(i)(ii) All staff are trained in positive guidance strategies. This may include High/Scope conflict resolution and Trauma Smart.

(a) During new employee orientation, staff is introduced to the NAEYC code of ethical conduct. Staff are given an overview of the code of ethical conduct, concentrating on Principle 1.1 – “Above all, we shall not harm children. We shall not participate in practices that are emotionally damaging, physically harmful, disrespectful, degrading, dangerous, exploitative, or intimidating to children. This principle has precedence over all others in this code.”

(b) Additionally, staff is trained on “What is inappropriate behavior towards children?” This document is very specific, detailing what inappropriate behavior towards children looks like. Every new staff person is trained and signs this document. The WLCSD employee policies outline policy, including penalties for not adhering to policy.

(c) The classroom climate is formally evaluated using the CLASS tool twice during the school year. The CLASS tool includes a measurement of positive climate and negative climate. If a classroom’s score indicates a need for support in either of these areas, the appropriate management personnel is contacted to provide support.

(d) Second Step is used to also support the children with Social Emotional coping skills.
(iii) Staff promotes and exemplifies respect for all people, and do not engage in stereotyping or bias of any kind. Staff receives training in this area on a yearly basis at minimum. The WLCSD employee handbooks outline WLCSD policy, including penalties for not adhering to policy.

(iv) Staff also receives training on the confidentiality policy as defined by WLCSD standards, as well as subpart C of part 1303 and applicable federal, state, and local laws. The WLCSD employee handbooks outline WLCSD policy, including penalties for not adhering to policy.

(v) WLCSD staff, consultants, contractors, and volunteers are trained on the crucial importance of no child ever being left unattended at any time, for any reason. The WLCSD employee handbooks outline WLCSD policy, including penalties for not adhering to policy.

(d) Communication with dual language learners and their families

(1) During the initial intake appointment with a family, Family Advocates talk with the family, assisting them with filling out forms indicating their ethnic background and home language.

(2) When needed and available, an interpreter is provided to assist with translation services for families.

(3) As needed and when feasible, documents are translated into other languages.

(4) Staffing patterns are adjusted as needed, to ensure that if a majority of children in a classroom speak the same language, at least one staff member speaks the same language as well, or translation services are made available to staff.
EARLY HEAD START/HEAD START
STAFF QUALIFICATION POLICY

Relates to Head Start Performance Standard(s: 1302.91

(a) Purpose:
WLCSD Early Head Start/Head Start ensures that all staff, consultants, and contractors engaged in the delivery of program services have sufficient knowledge, training and experience, and competencies to fulfill the roles and responsibilities of their positions and to ensure high-quality service delivery in accordance with the program performance standard. WLCSD provides ongoing training and professional development to support staff in fulfilling their roles and responsibilities.

Procedure:

Staff Qualification and Competency Requirements will be followed when hiring for the positions outlined in this procedure.

(b) Early Head Start/Head Start Director will meet the minimum requirements of a Bachelors Degree including a minimum of five years experience in staff supervision, fiscal management, and program administration.

(c) Fiscal Officer will meet the requirements of either being a certified public accountant or will have at a minimum a Bachelors Degree in accounting, business, fiscal management or a related field.

(d) Child and Family Services Management staff qualification requirements:

(2) Education Management – School Readiness (Education) will have a minimum of a Bachelor’s degree in Early Childhood Education or a related field, as well as early education teaching experience.

Center Managers and Education Managers have a minimum qualification of a Bachelors’ degree in Early Childhood or a related field, as well as early education teaching experience.

(a) Child and Family services staff requirements:

(1) Head Start center based teacher qualifications: WLCSD strives to hire bachelor’s level teachers whenever possible. WLCSD teachers have a minimum of an Associate’s degree.

(2) WLCSD Head Start Assistant Teachers have a minimum of a CDA, or are enrolled in a CDA course upon hire, to be completed within two years as outlined in the Head Start Act.

(3) WLCSD does not currently have any Family Child Care Partnerships.
(4) Center based provider competencies:

Twice a year a CLASS assessment is conducted by a certified assessor to provide staff with feedback on the quality of teacher and child interactions in their classroom. The results of this assessment are used to provide feedback to staff on how to improve their practice.

Head Start/GSRP classrooms are assessed using the PQA (Program Quality Assessment) tool a minimum of one time per year. This is also used to provide feedback to teaching staff to improve practice.

Staff receive training on working with children with disabilities, both collectively and individually as needed. Disability Coordinators work with individual classroom staff to help make accommodations for children with special needs.

Staff also receive training on working with dual language learners. Staff are encouraged to ask families to share their language and culture in the classroom through songs, stories, etc.

(7) Family services staff qualification requirements:
(a) Family Advocates will have a minimum a Bachelors degree in social work, human services, family services, counseling or a related field. If a Family Advocates Degree is in a field related but outside what is listed, within 18 months of hire, Family Advocates will begin a program to receive the Family Service Credential.

(8) Health Services Staff
(a) The Nurse will have a Bachelor’s Degree in Nursing.
(b) Mental Health Coordinators will have a Masters in Social Work and hold a current license.
(c) Disability Coordinators will have a Bachelors Degree in Education with a concentration in Special Education.
(d) Nutritionist will have a minimum of a Bachelor’s Degree in Dietetics.
WALLED LAKEHEAD START
TRAINING AND PROFESSIONAL DEVELOPMENT

Relates to Head Start Performance Standard(s): 1302.92   Training and professional development

Purpose: Staff are provided with training and professional development collectively and individually in order to provide high quality services to our clients.

(a) All new staff, consultants, and volunteers attend “Head Start 101”. This training is designed to introduce staff to the mission and history of WLCSD and Head Start/, as well as key components of each entity. The training includes the following topics:
  • Brief history of WLCSD and Head Start
  • Performance Standards, Head Start Act of 2007, other regulations and guidance
  • Program components: Governance, ERSEA, Family Engagement, Reunification, Education and ELOF (including school readiness goals and outcomes), Health, Nutrition, Mental Health, Disabilities
  • In-kind
  • Staff development
  • Data driven decisions
  • Monitoring
  • Recognizing and reporting abuse and neglect
  • Positive behavior support for children and NAEYC Code of Conduct
  • Pedestrian safety

(b) (1) Teaching staff complete a minimum of 16 clock hours of training and professional development as required by Child Care Licensing in the state of Michigan.
  (i) Training is based on identified needs of individuals, small groups, and large groups. Data from assessments, as well as new performance standard regulations, best practices in the field, and new initiatives are examined to determine the best course of action for training.
  (ii) Annual trainings on a variety of required topics are addressed every August prior to the start of school. Topics include recognizing and reporting possible child abuse and neglect, CACFP, blood borne pathogens, etc.
  (iii) New Teacher Academy – Teaching staff who are new to WLCSD and/or new to teaching are included in the New Teacher Academy. This group meets monthly to provide additional support and training for staff in any areas of need, including WLCSD policies and procedures, Head Start/EHS/GSRP requirements, curriculum including CLASS and PQA, etc.

(3) Family Services Staff attend trainings provided though Michigan Head Start Association on implementing family engagement strategies. MHSA also provides quarterly networking
meetings for Family Service staff on ERSEA. Family Service Staff attend a PFCE Community of Learners event on Family Engagement through Stginternational.

(4) Family Service, health and disabilities staff receive training to increase their knowledge and competencies upon hire and then annually on improving child and family outcomes.

(5) WLCSD uses the CLASS tool and the PQA tool to assess program and classroom quality, assess progress on the school readiness goals, provide feedback and set goals with staff, develop TLC groups, and measure the effectiveness of professional development.

a) The CLASS tool is used to determine overall classroom quality in the key areas of instructional support, classroom organization, and emotional support. PQA is used to assess curriculum fidelity.

CLASS/PQA Procedure:
1. Each classroom is assessed by a certified CLASS assessor in the fall of the year. Each class will also receive a PQA assessment, beginning with an environmental assessment in the fall.
2. Staff are provided feedback based on the CLASS and PQA assessments. Goals for each teaching team are developed for the year based on CLASS and PQA data.
3. Data is assessed across the program to determine the area of greatest need. Once the area of greatest need is determined, teaching teams who would benefit most from intensive coaching in a specific area are identified, and assigned to the Teachers Learning and Collaborating (TLC) group covering that topic.
4. TLC learning group is led by a coach who has been trained in practice based coaching and TLC groups. The TLC works together to improve practice based on the TLC model.
5. A second CLASS evaluation is done in the spring to assess growth and provide further suggestions for improving practice. When possible, a second PQA is also done in spring.
6. Teaching staff who are not part of the TLC will be provided with training to assist them with meeting their individual goals.
7. For HS/GSRP blended classrooms, an independent Early Childhood Specialist, contracted through the Intermediate school district, observes the classroom, and completes parts A and B of the PQA tool. For Head Start/EHS classrooms, a Center Manager or Education Manager completes part A of the PQA.

b) Challenging behaviors – WLCSD has developed a challenging behavior policy to address the increasing number and severity of challenging behaviors in the classroom.

Challenging Behaviors Procedure:
See policy following 1302.92.
Teaching staff are provided additional support and professional development to assist in dealing with challenging behavior when needed.

c) Transitions: See section 1302.70 Transition Services  
d) Disabilities: Staff are provided with training annually both in large groups and individually to help meet the needs of the children with special needs in their classrooms.  
e) Dual language learners – Staff are provided pre-service training on working effectively with dual language learners and their families. Strategies include, but are not limited to:
   - Providing a teacher or assistant teacher who speaks the native language if more than 50% of the children speak a language other than English;  
   - Encouraging families to share songs, stories, phrases, key words, and fingerplays in their native language with the teacher and the class;  
   - Labeling items in both languages as appropriate;  
   - Using repetitive telegraphic language, pictures, and gestures to help children understand directions, etc.  

f) Using data to individualize for children – WLCSD uses the Child Observation Record to assess growth and outcomes for children, collectively and individually.

COR Procedure:  

EDUCATIONAL OUTCOMES SYSTEM

Head Start:  
1. Teachers begin taking notes during the first week of class.  
2. Teachers will watch children in each class, and take notes based on their observations.  
3. Teachers will enter the notes into the computer, and score each item.  
4. Using the High/Scope method, play will be based on children's interests, as well as around key experiences.  
5. Group notes and multiple scorings for notes are acceptable, but should not be the standard.

COR Outcomes Generator  
1. Four times a year (EHS)/ Three times a year (HS), teachers will print an outcomes report.  
2. Education Managers will review the reports, meeting with teachers whose report indicates a need for assistance.  
3. Preschool Supervisor will review the reports, and make necessary recommendations as needed.

TEACHER RESPONSE
1. Teachers will examine their own reports, making adjustments to the curriculum emphasis as needed to individualize for children. Information is shared with families at conferences.
2. Teachers use individual children’s COR information, as well as information from ASQ, DECA, family input, general observation to individualize for each child.

EDUCATION REVIEW

1. Education Managers will be responsible for monitoring teachers to ensure they are taking and scoring notes appropriately. Education Managers will review status reports monthly.

2. Staff will also note any program wide trends across the grantee and across the county and make recommendations as needed.

Additionally, data gathered from COR, CLASS, and PQA are used to provide teaching staff with feedback about their practice, noting strengths and opportunities for improvement.
WALLED LAKE HEAD START
STAFF HEALTH AND WELLNESS POLICY

Relates to Head Start Performance Standard(s) 1302.93

Purpose:
The health and wellness of Head Start staff members has a direct impact on their overall ability to perform their job responsibilities. WLCSD Head Start will ensure that staff does not pose a risk to others.

Procedure:

(a) Staff Health
Each staff member will have an initial health exam upon hire that includes tests for communicable diseases (TB Test) and a re-examination every 5 years (or as recommended by their health care provider). Initial Exam must be within last six months prior to date of hire.

(b) Staff Wellness
Staff are represented encouraged to participate in activities that address staff health and wellness.

1. Employee Assistance Program – WLCSD provides employees confidential health and wellness support through the Employee Assistance Program. Employees may request these services on their own or if a Supervisor feels it is necessary, they can be referred.
<table>
<thead>
<tr>
<th></th>
<th>HS Performance Standards</th>
<th>Childcare Licensing</th>
<th>WLCSD EHS/HS Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Which Staff: Each staff member has an initial health exam and a periodic re-examination as recommended by their health care provider, that includes tests for communicable diseases (1302.93 - pg.57)</td>
<td>Which Staff: Staff who have contact with children at least 4 hours/week for more than 2 consecutive weeks (400.8128)</td>
<td>Which Staff: All staff who have regular contact with children as defined below</td>
</tr>
<tr>
<td></td>
<td>How Often: Each staff member has an initial health exam and a periodic re-examination as recommended by their health care provider, that includes tests for communicable diseases (1302.93 - pg.57)</td>
<td>How Often: Within one year before employment unless moving to a new licensee (400.8128)</td>
<td>How Often: An initial exam with periodic re-examination as defined below</td>
</tr>
<tr>
<td>TB Test</td>
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<td></td>
<td>Which Staff: Each staff member has an initial health exam and a periodic re-examination as recommended by their health care provider, that includes tests for communicable diseases (1302.93 - pg.57)</td>
<td>How Often: Not required per Childcare Center Revision. Effective 1/2/2014, 400.5128 was eliminated</td>
<td>Which Staff: All staff who have regular contact with children as defined below</td>
</tr>
<tr>
<td></td>
<td></td>
<td>How Often: Not required per Childcare Center Revision. Effective 1/2/2014, 400.5128 was eliminated</td>
<td>How Often: An initial exam with periodic re-examination as defined below</td>
</tr>
<tr>
<td>Physical Exam</td>
<td>Each staff member has an initial health exam and a periodic re-examination as recommended by their health care provider, that includes tests for communicable diseases (1302.93 - pg.57)</td>
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<tr>
<td>CPR/First Aid</td>
<td>All staff with regular child contact (1302.47 - pg.41(J))</td>
<td>All program directors, lead caregivers and at least 1 caregiver on duty in the center at all times (400.8131 (7-8))</td>
<td>All staff who have regular contact with children as defined below as well as 'program director' listed on childcare license</td>
</tr>
<tr>
<td></td>
<td>How Often: Within three months of hire (1302.47)</td>
<td>CPR renewed every 12 months and First Aid every 36 months (400.8131 (7-8))</td>
<td>Within 3 months of hire; CPR renewed every 12 months and First Aid every 36 months (can be completed online)</td>
</tr>
<tr>
<td>Bloodborne Pathogens</td>
<td>All staff with regular child contact (1302.47 - pg.41(A&amp;HI))</td>
<td>Each caregiver, site supervisor and program director (400.8131 (3))</td>
<td>All staff who have regular contact with children as defined below as well as ‘site supervisor’ and ‘program director’ listed on childcare license</td>
</tr>
<tr>
<td></td>
<td>How Often: Within three months of hire (1302.47)</td>
<td>Training must be completed annually. Before unsupervised contact with children (400.8181(3) TA Manual)</td>
<td>Within 3 months of hire; Before unsupervised contact with children; Annually thereafter</td>
</tr>
</tbody>
</table>
NOTES:
1) 'Regular Contact' with children is defined as 'Staff who have contact with children at least 4 hours/week for more than 2 consecutive weeks'
2) 'All Staff' includes anyone who could potentially be placed in a classroom with children unsupervised
3) 'Program Director' and 'Site Supervisor' are designated as they are listed on the childcare license for that location; 'Lead Caregiver' is the Lead Teacher
4) 'Periodic re-examination' for Physical and TB is every 5 years or sooner if specifically recommended by healthcare provider
5) 'Initial Exam' must be within last six months prior to date of hire
WALLED LAKE HEAD START
VOLUNTEER POLICY

Relates to Head Start Performance Standard(s) 1302.94

Purpose:

Volunteers are the most important resource community organizations have. The ability of people to work willingly together for the betterment of their community and themselves is a valuable resource. It is our goal that volunteers find the donation of their time and energy a meaningful experience for themselves as well as for the organization.

Procedure:

Individuals who volunteer on more than one occasion must complete the volunteer process. It is preferable that the process be completed prior to the volunteer beginning service.

1. The Family Service Advocate will forward the Criminal Clearance application form to Human Resources.
2. Human resources will conduct the necessary investigation and/or reference checks.
3. Volunteers that are in regular contact with children must have a TB Test.
4. Volunteers will not be left alone unsupervised with children.
5. Upon completion of the reference checks, Human Resources will post the results on the secure server.
   a. Upon receipt of a favorable response, permission will be given to the volunteer.
   b. If the response Human Resources received is negative, the supervisor will terminate the recruitment or service of the volunteer without making any formal commitment.
   c. This Procedure in no way alters the methods used in the recruitment and hiring of paid staff.

Recording Volunteer Time

1. The staff member to whom a volunteer is assigned is responsible for recording the volunteer’s time. The following information is required when recording volunteer time.
   a. Signature of the Volunteer
   b. The hours worked, start time, end time, and number of hours worked.
   c. The exact activity or service performed by the volunteer.
   d. The volunteer’s occupation or special training if related to the kind of volunteer work they are doing for WLCSD. (To be used to determine the value placed on the volunteer’s time).
   e. The designated staff person should fill in the date and the program or centers involved, and ensure that all the required information has been recorded.

Determining Recordable Time

1. Determine which persons and services can be include in volunteer time.
2. Record volunteer time
   a. Volunteer Service Record Form: To be given to the volunteers to record their own time. This form should be returned to the volunteer’s supervisor by or before the end of each month.
   b. Any statement signed by the volunteer and volunteer’s supervisor that all the information required, as outlined about.
3. The volunteer forms should be completed each time the volunteer donates their time.
4. All volunteer time forms are to be given to the Family Service Advocate, then recorded for the supervisor, who will place a value on the time reported, where they become part of local share records.

**Volunteer Rates**

All rates for volunteers should be consistent with those regular rates paid for similar work in the labor market within the Southeastern Michigan region.

1. If a teacher is paid $17.00 per hour and volunteers for teacher type work, then the time is computed as $17.00 per hour.
2. If a doctor volunteers medical services to our program, and makes $100.00 per hour, then the time is computed as $100.00 per hour.
3. If actual rates are not given on the volunteer’s time form, the Finance Division will assign the time at a standard rate.

**Valuation Of Volunteered Personal Services**

Attached is the “Valuation of Volunteered Personal Services for Purposes of Computing the Non-Federal Share.”

The hourly wage was determined by statistics provided by Bureau of Labor Statistics, Michigan Employment Security Commission, and various local sources.

The wages indicated are current, adjusted for inflation and represent, average earnings of people in the metropolitan Detroit area, in the noted job classifications.

Please release this information to your staff and use the wages in computing the Non-Federal share for volunteered services.
WALLED LAKE HEAD START
PROTECTIONS FOR THE PRIVACY OF CHILD RECORDS
ESTABLISHING PROCEDURES

Relates to Head Start Performance Standard(s: 1303.20 & 1303.21

Purpose:
A Program must establish procedures to protect the confidentiality of any personally identifiable information (PII) in child records.

Procedure:
(a) WLCSD follows the confidentiality provisions under the Family Educational Rights and Privacy Act (FERPA).

(b) WLCSD serves children who are referred to, and/or found eligible for services under, IDEA. WLCSD will therefore comply with the applicable confidentiality provisions in Part B or Part C of IDEA to protect the PII in records of those children.
WALLED LAKE HEAD START
DISCLOSURES, WITH AND WITHOUT, PARENTAL CONSENT

Relates to Head Start Performance Standard(s: 1303.22

Purpose:
To ensure parents understand the procedures to protect confidentiality of any personally identifiable information (PII) in children's files.

Procedure:

(a) Disclosure with parental consent.
(1) WALLED LAKE requires the program to obtain a parent’s written consent before the program may disclose PII from child records.
(2) To protect PII WALLED LAKE will ensure the parent’s written consent specifies what child records may be disclosed, explains why the records will be disclosed, and identifies the party or class of parties to whom the records may be disclosed. The written consent must be signed and dated.
(3) “Signed and dated written consent” under this part may include a record and signature in electronic form that:
   (i) Identifies and authenticates a particular person as the source of the electronic consent; and,
   (ii) Indicates such person's approval of the information.

(4) WALLED LAKE will explain to the parent that the granting of consent is voluntary on the part of the parent and may be revoked at any time. If a parent revokes consent, that revocation is not retroactive and therefore it does not apply to an action that occurred before the consent was revoked.

(b) Disclosure without parental consent but with parental notice and opportunity to refuse.
(1) WALLED LAKE will disclose such PII from child records without parental consent if the program notifies the parent about the disclosure, provides the parent, upon the parent’s request, a copy of the PII from child records to be disclosed in advance, and gives the parent an opportunity to challenge and refuse disclosure of the information in the records, before the program forwards the records to officials at a program, school, or school district in which the child seeks or intends to enroll or where the child is already enrolled so long as the disclosure is related to the child's enrollment or transfer.

(c) Disclosure without parental consent. WALLED LAKE will allow the program to disclose such PII from child records without parental consent to:

(1) Officials within the program or acting for the program, such as contractors and sub recipients, if the official provides services for which the program would otherwise use employees, the program determines it is necessary for Head Start services, and the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement;

(2) Officials within the program, acting for the program, or from a federal or state entity, in connection with an audit or evaluation of education or child development programs, or for enforcement of or compliance with federal legal requirements of the program; provided the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement;
(3) Officials within the program, acting for the program, or from a federal or state entity, to conduct a study to improve child and family outcomes, including improving the quality of programs, for, or on behalf of, the program, provided the program maintains oversight with respect to the use, further disclosure, and maintenance of child records, such as through a written agreement, including the destruction of the PII when no longer needed for the purpose of the disclosure;

(4) Appropriate parties in order to address a disaster, health or safety emergency during the period of the emergency, or a serious health and safety risk such as a serious food allergy, if the program determines that disclosing the PII from child records is necessary to protect the health or safety of children or other persons;

(5) Comply with a judicial order or lawfully issued subpoena, provided the program makes a reasonable effort to notify the parent about all such subpoenas and court orders in advance of the compliance therewith, unless:

   (i) A court has ordered that neither the subpoena, its contents, nor the information provided in response be disclosed;
   (ii) The disclosure is in compliance with an ex parte court order obtained by the United States Attorney General (or designee not lower than an Assistant Attorney General) concerning investigations or prosecutions of an offense listed in 18 U.S.C. 2332b(g)(5)(B) or an act of domestic or international terrorism as defined in 18 U.S.C. 2331.
   (iii) A parent is a party to a court proceeding directly involving child abuse and neglect (as defined in section 3 of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101)) or dependency matters, and the order is issued in the context of that proceeding, additional notice to the parent by the program is not required; or,
   (iv) A program initiates legal action against a parent or a parent initiates legal action against a program, then a program may disclose to the court, also without a court order or subpoena, the child records relevant for the program to act as plaintiff or defendant.

(6) The Secretary of Agriculture or an authorized representative from the Food and Nutrition Service to conduct program monitoring, evaluations, and performance measurements for the Child and Adult Care Food Program under the Richard B. Russell National School Lunch Act or the Child Nutrition Act of 1966, if the results will be reported in an aggregate form that does not identify any individual: provided, that any data collected must be protected in a manner that will not permit the personal identification of students and their parents by other than the authorized representatives of the Secretary of Agriculture and any PII must be destroyed when the data are no longer needed for program monitoring, evaluations, and performance measurements;

(7) A caseworker or other representative from a state, local, or tribal child welfare agency, who has the right to access a case plan for a child who is in foster care placement, when such agency is legally responsible for the child's care and protection, under state or tribal law, if the agency agrees in writing to protect PII, to use information from the child's case plan for specific purposes intended of addressing the child's needs, and to destroy information that is no longer needed for those purposes; and,
(8) Appropriate parties in order to address suspected or known child maltreatment and is consistent with applicable federal, state, local, and tribal laws on reporting child abuse and neglect.

(d) Written agreements. When a program establishes a written agreement with a third party, the procedures to protect such PII must require the program to annually review and, if necessary, update the agreement. If the third party violates the agreement, then the program may:

(1) Provide the third party an opportunity to self-correct; or,

(2) Prohibit the third party from access to records for a set period of time as established by the programs governing body and policy council.

(e) Annual notice. The procedures to protect PII must require the program to annually notify parents of their rights in writing described in this subpart and applicable definitions in §1305, and include in that notice a description of the types of PII that may be disclosed, to whom the PII may be disclosed, and what may constitute a necessary reason for the disclosure without parental consent as described in paragraph (c) of this section.

(f) Limit on disclosing PII. A program must only disclose the information that is deemed necessary for the purpose of the disclosure.
WALLED LAKE HEAD START
PARENTAL RIGHTS

Relates to Head Start Performance Standard(s): 1303.23

Purpose:
To ensure parents understand their rights to inspect their child’s Early Head Start/Head Start record.

Procedure:

a) Inspect record. (1) A parent has the right to inspect child records.

(2) If the parent requests to inspect child records, the program must make the child records available within a reasonable time, but no more than 45 days after receipt of request.

(3) If a program maintains child records that contain information on more than one child, the program must ensure the parent only inspects information that pertains to the parent’s child.

(4) The program shall not destroy a child record with an outstanding request to inspect and review the record under this section.

(b) Amend record. (1) A parent has the right to ask the program to amend information in the child record that the parent believes is inaccurate, misleading, or violates the child’s privacy.

(2) The program must consider the parent’s request and, if the request is denied, render a written decision to the parent within a reasonable time that informs the parent of the right to a hearing.

(c) Hearing. (1) If the parent requests a hearing to challenge information in the child record, the program must schedule a hearing within a reasonable time, notify the parent, in advance, about the hearing, and ensure the person who conducts the hearing does not have a direct interest in its outcome.

(2) The program must ensure the hearing affords the parent a full and fair opportunity to present evidence relevant to the issues.

(3) If the program determines from evidence presented at the hearing that the information in the child records is inaccurate, misleading, or violates the child’s privacy, the program must either amend or remove the information and notify the parent in writing.

(4) If the program determines from evidence presented at the hearing that information in the child records is accurate, does not mislead, or otherwise does not violate the child’s privacy, the program must inform the parent of the right to place a statement in the child records that either comments on the contested information or that states why the parent disagrees with the program’s decision, or both.

(d) Right to copy of record. The program must provide a parent, free of charge, an initial copy of child records disclosed to third parties with parental consent and, upon parent request, an initial copy of child
records disclosed to third parties, unless the disclosure was for a court that ordered neither the subpoena, its contents, nor the information furnished in response be disclosed.

(e) Right to inspect written agreements. A parent has the right to review any written agreements with third parties.
WALLED LAKE HEAD START
MAINTAINING RECORDS

Relates to Head Start Performance Standard(s: 1303.24

Purpose:
To ensure Head Start records are maintained to ensure only authorized persons have access to a child’s file.

Procedure:

(a) WALLED LAKE Head Start will maintain child records in a manner that ensures only parents, and officials within the program or acting on behalf of the program have access, and such records must be destroyed within a reasonable timeframe after such records are no longer needed or required to be maintained. WALLED LAKE will store Head Start student files for a period of three years after the child has left the program.

(b) WALLED LAKE Head Start will maintain, with the child records, for as long as the records are maintained, information on all individuals, agencies, or organizations to whom a disclosure of PII from the child records was made (except for program officials and parents) and why the disclosure was made. If a program uses a web-based data system to maintain child records, the program must ensure such child records are adequately protected and maintained according to current industry security standards.

(c) If a parent places a statement in the child record, the program must maintain the statement with the contested part of the child record for as long as the program maintains the record and, disclose the statement whenever it discloses the portion of the child record to which the statement relates.
(a) Purpose:
A grantee is accountable for the services its delegate agencies provide.

Procedure:

(a) OLHSA as the grantee will support, oversee and ensure delegate agencies provide high-quality services to children and families and meet all applicable Head Start requirements. Oversight will be done through monthly dashboard reports, on-going monitoring, Self-Assessment, PIR and on-going communication.

1. OLHSA as the grantee will only terminate a delegate agency if the grantee shows justification why termination is necessary and provides a process for delegate agencies to appeal termination decisions.

2. The grantee retains legal responsibility and authority and bears financial accountability for the program when services are provided by delegate agencies.
Relates to Head Start Performance Standard(s): 1303.31

Purpose:
To ensure the Delegate program meets the definition of Delegate Agency

Procedure:

(a) If OLHSA, as the grantee, enters into an agreement with another entity to serve children, OLHSA must determine whether the agreement meets the definition of “delegate agency” in section 637(3) of the Act. Delegate agency means a public, private nonprofit (including a community based organization, as defined in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801), or for profit organization or agency to which a grantee has delegated all or part of the responsibility of the grantee for operating a Head Start program.

(b) OLHSA, as the grantee, will not award a delegate agency federal financial assistance unless there is a written agreement/contract and the responsible HHS official approves the agreement before the grantee delegates the operation of the program.
Relates to Head Start Performance Standard(s: 1303.32

Purpose:
Corrective Action Plans for Delegate Programs

Procedure:

OLHSA, as the grantee, we will evaluate and ensure corrective action for delegate agencies according to section 641A(d) of the Act. (d) Evaluations and Corrective Action for Delegate Agencies.

(A) A detailed Monitoring Procedure is in place at the delegate level that assures ongoing monitoring of all program areas of Head Start and Early Head Start.

(B) When a Delegate program is found to be deficient and the non-compliance is not corrected according to the monitoring procedure, a corrective action will be required to ensure the deficiency is corrected.

(C) If the Delegate program has not made the required corrective actions according to the Corrective Action Plan and the timeframe set, the procedures to defund the program will be implemented until the compliance is met.
EARLY HEAD START/HEAD START
TERMINATION OF DELEGATE AGENCIES

Relates to Head Start Performance Standard(s): 1303.33

Purpose:
To show cause for terminating a delegate’s contract.

Procedure:

(a) OLHSA, as the grantee, will show justification why termination of a delegate agency’s contract is appropriate or demonstrate cost effectiveness.

(b)OLHSA’s decision to terminate will not be arbitrary or capricious.

(c) OLHSA has an established procedure for defunding a delegate agency based on specifications in the contract that are not satisfactorily met.

(d) OLHSA has an established procedure for Delegate programs to appeal a defunding decision. The process is fair and timely.

(d) OLHSA will notify the responsible HHS official about the appeal and its decision.
WALLED LAKE HEAD START
TRANSPORTATION SERVICES

Relates to Head Start Performance Standard(s: 1303.70

(a) Purpose:
WALLED LAKE Head Start programs does not provide transportation for Head Start children, with the exception of transport to and from designated field trips, with prior parental consent.

Procedure:

b) Providing transportation services. (1) WALLED LAKE HS does not provide transportation services, either for all or a portion of the children, WALLED LAKE will provide reasonable assistance, such as information about public transportation availability and carpool options to the families of such children to arrange transportation to and from its activities, and provide information about these transportation options in recruitment announcements.

(2) A program that provides transportation services must ensure all accidents involving vehicles that transport children are reported in accordance with applicable state requirements.

(c) Waiver. Through on-going monitoring it is determined that a waiver is needed for our Delegate Head Start programs that cannot provide transportation. A waiver may be requested if any of the following found through on-going monitoring:

(i) Adherence to a requirement in this part would create a safety hazard in the circumstances faced by the agency; and,

(ii) For preschool children, compliance with requirements related to child restraint systems at §§1303.71(d) and 1303.72(a)(1) or bus monitors at §1303.72(a)(4) will result in a significant disruption to the program and the agency demonstrates that waiving such requirements is in the best interest of the children involved.
WALLED LAKE HEAD START
VEHICLES

Relates to Head Start Performance Standard(s: 1303.71

(a) Purpose:
For the safety of WALLED LAKE Head Students being transported the vehicles will be equipped with the features listed in this procedure.

Procedure:

(a) WALLED LAKE CONSOLIDATED SCHOOL DISTRICT, in contract with Dean Transportation, will ensure vehicles used to transport enrolled children are school buses or allowable alternate vehicles that are equipped for use of height- and weight-appropriate child restraint systems, and that have reverse beepers.

(b) Emergency equipment. Each vehicle used in providing such services will be equipped with an emergency communication system clearly labeled and appropriate emergency safety equipment, including a seat belt cutter, charged fire extinguisher, and first aid kit.

(c) Auxiliary seating. WALLED LAKE CONSOLIDATED SCHOOL DISTRICT, in contract with Dean Transportation, will ensure auxiliary seating, such as temporary or folding jump seats, used in vehicles of any type providing such services are built into the vehicle by the manufacturer as part of its standard design, are maintained in proper working order, and are inspected as part of the annual inspection required under paragraph (e)(2)(i) of this section.

(d) Child restraint systems. Each vehicle used to transport Head Start children receiving such services is equipped for use of age-, height- and weight-appropriate child safety restraint systems as defined in part 1305.

(e) Vehicle maintenance. WALLED LAKE CONSOLIDATED SCHOOL DISTRICT, in contract with Dean Transportation, providing transportation perform a daily pre and post route safety check any maintenance concerns are addressed by the School District Mechanics.

(2) WALLED LAKE CONSOLIDATED SCHOOL DISTRICT, in contract with Dean Transportation, are adhering to the following:

(i) An annual safety inspection is completed on all School District buses by the Michigan State Police.

(ii) Inspections are also completed by WALLED LAKE CONSOLIDATED SCHOOL DISTRICT, in contract with Dean Transportation, on a regular basis.

(iii) Each bus driver performs a daily pre and post route safety check.
(f) New vehicle inspection. Bid announcements for school buses and allowable alternate vehicles to transport children in its program include correct specifications and a clear statement of the vehicle's intended use. The program will ensure vehicles are examined at delivery to ensure they are equipped in accordance with the bid specifications and that the manufacturer’s certification of compliance with the applicable FMVSS is included with the vehicle.
Relates to Head Start Performance Standard(s: 1303.72

(a) Purpose:
To ensure the safety of Head Start children that are transported by bus programs will follow vehicle operation safety procedures. Exception to this standard is when a waiver is allowed, to meet compliance.

Procedure:

(1) Each child is seated in a child restraint system appropriate to the child's age, height, and weight.

(2) Baggage and other items transported in the passenger compartment are properly stored and secured, and the aisles remain clear and the doors and emergency exits remain unobstructed at all times.

(3) Up-to-date child rosters and lists of the adults each child is authorized to be released to, including alternates in case of emergency, are maintained and no child is left behind, either at the classroom or on the vehicle at the end of the route.

(4) There is at least staff member on board at all times, with additional staff provided as necessary.

(b) Driver qualifications. A program, must ensure drivers, at a minimum:

(1) In states where such licenses are granted, have a valid Commercial Driver's License (CDL) for vehicles in the same class as the vehicle the driver will operating.

(2) Meet any physical, mental, and other requirements as necessary to perform job-related functions with any necessary reasonable accommodations.

(c) Driver application review. In addition to the applicant review process prescribed §1302.90(b) of this chapter, a program, must ensure the applicant review process for drivers includes, at minimum:

(1) Disclosure by the applicant of all moving traffic violations, regardless of penalty.

(2) A check of the applicant's driving record through the appropriate state agency, including a check of the applicant's record through the National Driver Register, if available.

(3) A check that drivers qualify under the applicable driver training requirements in the state or tribal jurisdiction.
(4) After a conditional employment offer to the applicant and before the applicant begins work as a driver, a medical examination, performed by a licensed doctor of medicine or osteopathy, establishing that the individual possesses the physical ability to perform any job-related functions with any necessary accommodations.

(d) Driver training. (1) A program must ensure any person employed as a driver receives training prior to transporting any enrolled child and receives refresher training each year. Oakland Schools provides this training for School District Bus Drivers.

(2) Training must include:

(i) Classroom instruction and behind-the-wheel instruction sufficient to enable the driver to operate the vehicle in a safe and efficient manner, to safely run a fixed route, to administer basic first aid in case of injury, and to handle emergency situations, including vehicle evacuation, operate any special equipment, such as wheelchair lifts, assistance devices or special occupant restraints, conduct routine maintenance and safety checks of the vehicle, and maintain accurate records as necessary; and,

(ii) Instruction on the topics listed in §1303.75 related to transportation services for children with disabilities.

(3) Ensure the annual evaluation of each driver of a vehicle used to provide such services includes an on-board observation of road performance.

(e) Bus monitor training. A program must train each bus monitor before the monitor begins work, on child boarding and exiting procedures, how to use child restraint systems, completing any required paperwork, how to respond to emergencies and emergency evacuation procedures, how to use special equipment, child pick-up and release procedures, how to conduct and pre- and post-trip vehicle checks. Bus monitors are also subject to staff safety training requirements in §1302.47(b)(4) of this chapter including Cardio Pulmonary Resuscitation (CPR) and first aid.
WALLED LAKE HEAD START
SAFETY PROCEDURES

Relates to Head Start Performance Standard(s: 1303.74

(a) Purpose:
WALLED LAKE Early Head Start/Head Start will ensure children and families understand safe riding practices.

Procedure:

(a) Each HS program that provides bus transportation will ensure children are taught safe riding practices, safety procedures for boarding and leaving the vehicle and for crossing the street to and from the vehicle at stops, recognition of the danger zones around the vehicle, and emergency evacuation procedures, including participating in an emergency evacuation drill conducted on the vehicle the child will be riding. Programs that provide transportation will include this training as a part of their orientation for parents. Programs will review bus safety on a monthly basis during pedestrian safety training for students.

(b) Each Head Start program that provides transportation services will ensure at least two bus evacuation drills in addition to the one required under paragraph (a) of this section are conducted during the program year.