

2nd Edition



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# Parent Handbook

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Early Head Start

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2022-23

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# Welcome to Early Head Start

Dear Parents, Guardians and Caregivers,

Welcome to Early Head Start! My name is Alicia Kruk, and I am the Early Head Start and Family Services Supervisor at Washtenaw Intermediate School District (WISD). I have the honor of supporting a team of outstanding Home Visitors who will partner with you in supporting both your child's development and your family's well-being. We are so happy that you have found us and are excited to start getting to know you.

Partnership between Home Visitors and families is the foundation for the Early Head Start program. Young children are learning very quickly, and you, their parent(s) or caregiver(s) are their first and most important teacher. Your home visitor will work in partnership with you to set goals for your child and family so that they are ready for school and for life. Head Start has developed a framework to develop positive and goal-oriented relationships known as the Parent, Family and Community Engagement (PFCE) Framework. This framework was designed to ensure that families and children get what they need to be **ready for school and for life**.

The Early Head Start program provides many opportunities for you to engage in and support your child's health, well-being and learning and to partner with the program. The five primary ways that we do this are:

**Weekly home visits lasting for 1.5 hours:** Very young children learn best in their natural environment engaging in activities and routines that they do every day.

**Socializations:** These opportunities provide an opportunity to connect with other parents/caregivers and for children to engage with one another through developmentally appropriate play.

**Program governance:** All parents and caregivers are invited to participate in program planning and decision making through participation in the Parent Committee and the Policy Council. Meetings are held monthly.

**Ongoing communication:** We promise to provide consistent communication and to listen to you about your family's strengths and needs (ex: parenting, knowledge of child development, community connections, family supports, education, housing etc.).

**Ongoing developmental assessment and health services:** EHS provides early identification of developmental, and health related delays are critical in supporting overall development and school readiness.

Child development support and education is provided using a coaching model. Coaching is a proven practice used for working with parents and caregivers to help them recognize the things they are doing to support their child's learning and development. It is used to build on existing or new strategies within the child's regular environment and daily routines. Coaching involves collaborating with your child's home visitor; jointly thinking about what works, does not work, and why; trying ideas with your child; modeling with your child for you; sharing information; and jointly planning next steps. Here is what coaching will look like:

**Look and Listen:** Together, you and your home visitor will share information, learn about your successes and challenges from previous visits, and learn about what you want to work on. This is a time when your home visitor will observe your interactions with your child to learn what you are already doing so that we can help you build upon it.

**Show and Tell:** This is the time when your home visitor will do some direct teaching to help you understand a potential strategy, how to do it and why it might be a good match for what you are trying to accomplish with

your child. This is also a time when your home visitor may model and/or demonstrate the strategies, activities and interventions for you.

**Practice:** This is the time when you will have the opportunity to practice the strategy. Your home visitor may provide you with verbal guidance and supports during the practice. You may have your home visitor take a video of you practicing so that you can watch and reflect upon it together. Video is a great way to stay in touch with your home visitor and to share what your child is doing between visits.

**Reflection:** This is usually done through questions and conversation. It will help you think about your knowledge, your new strategies, and how you can reach your family's goals. We might use this time to evaluate your progress toward goals.

**Feedback:** Feedback is provided by your home visitor at various times during the visit and it can help you understand and develop new ideas.

Lastly, your home visitor is always working to grow and improve their services. While you are engaged in coaching with your home visitor, they are also engaging the same process with their Early Head Start home visiting coach. Together with their coach, they identify their own strengths and areas of focus, set goals and continuously strive to provide the best services they can for your family. There may be times throughout the program that either myself or the home visiting coach will attend a home visit or ask the home visitor to record a session to support them in their own professional development.

Now that you know more about what to expect from the program, I hope that you feel ready to jump in. If you have any questions about services, you can speak with your home visitor, though you are always welcome to contact me directly.

Thank you,

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## About Early Head Start

Early Head Start is a federally funded program for pregnant women and children from birth through the age of three that provides early, continuous, intensive, and comprehensive child development and family support services. WISD supports Early Head Start through Federal Head Start Funds and State of Michigan funds for home visiting.

WISD began providing home-based Early Head Start programming in 2014. The Early Head Start home-based program option supports children and their families through home visits and group socialization experiences. Early Head Start home visits provide comprehensive services to support and strengthen the relationships between infants, toddlers, and their parents. The strength and quality of these relationships are essential for optimal child development outcomes during this period of rapid social, emotional, physical, and cognitive development.

Powerful research tells us that the period from birth to the age of three is critical in healthy growth and development, as well as to later success in school and life. The national evaluation conducted by Mathematica Policy Research, Inc., and Columbia University's Center for Children and Families, in collaboration with the Early Head Start Research Consortium, found that 3-year-old Early Head Start children performed significantly better on a range of measures of cognitive, language, and social-emotional development than a randomly assigned control group. Some notable benefits included:

- EHS program children scored higher on developmental evaluations
- EHS children engaged their parents more, were less negative toward their parents, and more attentive to objects during play.
- EHS parents rated their children as lower in aggressive behavior than control parents did.
- EHS parents were more emotionally supportive and less detached than control group.
- EHS parents were more likely to report reading to their child every day.
- EHS parents were less likely to report having spanked their children in the past week.
- EHS parents reported a greater repertoire of discipline strategies, including more mild and fewer punitive strategies.

## Schedule of Programming

Early Head Start is a full year program. The program runs from July 1 – June 30 each year. The Home-Based Early Head Start model is an evidence-based model that, when implemented with fidelity, is known to show positive outcomes for those participating.

**Home Visits:** Early Head Start home visits are provided weekly for 90 minutes. You will be offered a minimum of 46 home visits annually.

**Socializations:** The Washtenaw ISD Early Child Department works together to provide consistent opportunities for parents to connect with one another through play groups. There are several options to choose from. Play groups are created using the Parents as Teachers model and rely on your input to determine topics and activities. A minimum of 24 socializations will be provided annually.

## Snow and Building Closures

The safety of our families and staff is very important to us. While we want to spend time with you and your family as often as we can, there are instances in which your home visit or activities may be cancelled. Heavy snow fall could impact the conditions of the roads that our home visitors must travel to get to your home or that you would travel to attend a socialization activity or play group. If it is decided by the Washtenaw ISD Superintendent that the road

conditions are not safe for travel by bus or by car, programming will be cancelled for that day. Additionally, power outages and other building or maintenance issues may also impact your home visitor's ability to access the building to prepare for your home visit or activities.

## **Snow Days and Other Inclement Weather**

When it is determined that programming will not be provided due to poor weather conditions, the decision will be posted on the Washtenaw ISD website and you will be contacted by your home visitor. Visit [www.washtenawisd.org](http://www.washtenawisd.org) for school closings. Please make sure your contact information is updated with your home visitor to also receive WISD's School Messenger texts, phone calls, and emails.

## **Building Closures**

When it is determined that the Washtenaw ISD's administrative office at the Teaching and Learning Center is closed due to a power outage or other building maintenance issue, the decision will be posted on the Washtenaw ISD website and you will be contacted by your home visitor. Visit [www.washtenawisd.org](http://www.washtenawisd.org) for school closings. You can also sign-up for WISD's School Messenger list to receive text, phone and email communication notifying you of closures. Home Visits may still occur if the Teaching and Learning Center is closed. If your home visitor is unable to provide your services due to an inability to access needed materials, they will call to notify you.

# Illness Policy

Our policy on illnesses is meant to protect all of us—children, families, and staff—from contagion and prevent the spread of disease. If you, your children, or another parent/guardian/caregiver in the home has a contagious illness, please contact your home visitor immediately to reschedule your visit to protect the health of EHS staff and other children and their families.

Please contact your home visitor with any questions about participating in a home visit or socialization due to family member illness.

The WISD EHS will exclude an ill, injured, or contagious child from participation if:

- The child's condition prevents him or her from participating in routine activities; or
- The child's condition requires more care than the parent/guardian/caregiver is able to provide without compromising the needs of other children in group situations; or
- The child's condition poses a significant risk to the health and safety of the child or anyone in contact with the child.

A child will not be excluded from the program if it is possible to eliminate the significant risk to health or safety posed by the child's condition or to reduce the risk to an acceptable level. A child will not be excluded if the physician or nurse practitioner approves re-admittance. Conditions for re-admittance are under the control of the Health Advisor and local Health Department.

Symptoms to consider when determining if your child may be ill:

- Severe coughing
- Difficult/rapid breathing
- Yellowish skin or eyes
- Sore throat or trouble swallowing
- Unusually dark, tea-colored urine
- Gray or white stool
- Headache or stiff neck
- Pulling at ears
- Greenish discharge from nose or severely runny nose
- Unusually cranky, less active, etc.

Health assessments will be conducted at Socializations upon your child's arrival. If it is determined that your child may have a contagious disease (based on observations by staff), you will be asked to take your child home.

Children and adults with these illnesses or symptoms will be excluded from program participation:

- **Fever:** A fever is defined as oral temperature of 101° or greater, rectal temperature of 102° or greater, armpit temperature of 100° or greater.
- **Mouth Sores:** Unless the child's physician or local health department authority states in writing that the child is not contagious.
- **Pink Eye:** Until 24 hours after treatment has begun. Defined as pink or red eyes with white or yellow eye discharge, often with matted eyelids after sleep. Includes children with eye pain or redness on eyelids or surrounding skin.
- **Rash:** Until a physician determines the illness not to be communicable.
- **Signs of Possible Severe Illness:** Including unusual lethargy, irritability, persistent crying, difficult breathing, and uncontrolled coughing.
- **Strep Throat:** Until 24 hours after treatment has begun and fever is gone. Includes scarlet fever rash.
- **Uncontrolled Diarrhea:** Until stool has returned to normal for that child. Defined as an increased number of stools (more than two documented in one day) compared with the child's normal pattern; increased stool water and/or decreased form that is not contained by the diaper or toilet use.
- **Vomiting:** Unless illness is determined not to be communicable. Defined as two or more times in the previous 24 hours.



# Program Goals and Objectives

WISD's goal is to promote the continuous improvement of achievement for every student while providing high-quality service to our customers through leadership, innovation, and collaboration. WISD's vision is to be the leader in empowering, facilitating, and delivering a high-quality, boundary-spanning, educational system that educates all children through an equitable, inclusive, and holistic approach.

The Early Head Start Program Goals, along with data, are reviewed three times a year by Parent Committees, School Readiness Parent Advisory, the Policy Council and the WISD Board of Education. Revisions are made as necessary by the School Readiness Workgroup to ensure continuous improvement and alignment with Head Start Early Learning Outcomes Framework. This information allows to continuously review program quality to ensure that all enrolled children will be ready to transition to the next stage of their learning when they exit the program. The current plan's long-term goals and objectives are as follows:

## Program Goal 1:

The program will **provide high-quality early childhood development services** to families and children ages birth-to-five to develop children's life-long love of learning and enhance school readiness.

### Objective(s):

- Establish and maintain school readiness goals in alignment with Office of Head Start goals and revised school readiness National Head Start Framework.
- Maintain high quality early learning and classroom environments.
- Implement program's Parent & Family Engagement Goals to support and encourage children's school readiness.
- Provide nurturing and safe learning environments in communities based upon Community Needs Assessment: situated in early elementary settings that align with LEA school days.
- Provide for health needs of enrolled participants, pregnant mothers, and children up to age five (5).
- Provide high quality and targeted professional development to staff, parents, Policy Council, and Board of Education members to enhance program outcomes and impacts.

## Program Goal 2:

Program shall provide **opportunities to enhance school readiness** for all eligible participants throughout the service area.

### Objective(s):

- Maintain full enrollment of eligible participants for all program options.
- At least 10% of funded enrollment shall be children with a documented disability.
- Build the necessary supports and processes needed to develop and maintain positive mental health and wellness by assuring each classroom has a minimum of 1 mental health observation per year and has access to ongoing supports. And that all enrolled Home-Based EHS families have access to the mental health consult during home visits as needed.

### **Program Goal 3:**

The program will **operate in the most cost-efficient manner possible** to provide high-quality services to Head Start/Early Head Start children, families and staff.

#### **Objective(s):**

- Present and support opportunities for Board and Policy Council members to establish and maintain a formal structure of governance where parents are empowered to actively participate in a shared decision-making process. Early Head Start will operate in partnership with Early On (Part C of IDEA) utilizing Federal, State and Local funding to provide services in a cost-efficient way.
- To provide oversight (monitoring) activities that consider the individual and program outcomes for Head Start and Early Head Start in order to make data driven management decisions affecting project operations.
- Ensure that Non-Federal Share for the program is tracked, documented, and monitored to verify that all contributions are allowable (fiscal)

### **Program Goal 4:**

The program will **strengthen the training and professional development of staff**, aligning with program goals and objectives including ongoing reflective supervision strategies and the provision of individualized coaching.

#### **Objective(s):**

- Increase the education, skill, and expertise of staff.
- Implement Practice Based Coaching.
- Provide ongoing professional development opportunities for Staff
- Monthly New Staff Orientation provided by WISD.

### **Program Goal 5:**

The program will strengthen the transition process for children and families.

#### **Objective(s):**

- Ensure that policies and practices foster a collaborative approach to transition.
- Ensure that all staff are prepared to offer children and families effective support through transitions.

# Parent, Family and Community Engagement (PFCE)

## PFCE Framework

Parent and family engagement in Head Start/Early Head Start (HS/EHS) 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. The Parent, Family, and Community Engagement (PFCE) Framework is a road map for progress in achieving the kinds of outcomes that lead to positive and enduring change for children and families. The PFCE Framework was developed in partnership with programs, families, experts, and the National Center on Parent, Family, and Community Engagement. It is a research-based approach to program change that shows how an agency can work together as a whole—across systems and service areas—to promote parent and family engagement and children’s learning and development.



Working to enhance your children’s school readiness means being engaged in their lifelong success. In the first months and years of a child’s life, they learn primarily from you, their family. When you engage with your child’s learning you can create meaningful interactions and experiences that give children the skills they need to succeed. We want to partner with you to strengthen the positive influence you have on your children’s early learning and school readiness.

Head Start/Early Head Start programs can play a vital role in supporting children’s learning by helping you build on your strengths and overcome challenges. Through partnerships with Head Start/Early Head Start programs and other community resources, you will learn to become an advocate for quality education for your children, improving their educational opportunities.

Ways that you can engage in your child’s education:

- Be an active participant in home visits.
- Develop school readiness goals for their child.
- Work on skills throughout the week to refine skills and show children that you care about their learning and development.
- Talk to your infant or toddler.
- Attend playgroups and socializations.
- Develop family partnership goals.
- Participate in the parent committee.
- Participate on the Policy Council.

# Family Partnership Agreement

We believe that parents are their child's first and most influential teacher. This means that we can't do anything without them. Our work together requires a partnership between you and every parent/caregiver where each of you commit to working together to support their child's development.

Partnership between Home Visitors and families is the foundation for the Early Head Start program. Young children are learning very quickly their parent or caregiver are their first and most important teacher. It is our goal to work together with families to develop this Family Partnership Agreement.

Head Start has created a guide to support a standard for parent, family and community engagement that ensures families and children get what they need to be ready for school and life. The guide is called the Parent, Family and Community Engagement (PFCE) Framework. As partners, we will use the framework to build positive, goal-centered relationships focused on achieving outcomes for you and your child(ren).

The Early Head Start program provides many opportunities for you to engage in and support your child's health, well-being and learning by partnering with the program. The primary ways that we do this are:

1. **Weekly home visits lasting for 1.5 hours:** Very young children learn best in their natural environment engaging in activities and routines that they do every day.
2. **Socializations:** Providing an opportunity to connect with other parents/caregivers and for children to engage with one another through developmentally appropriate play.
3. **Program governance:** All parents are invited to participate in program planning and decision making through participation in the Parent Committee and the Policy Council. Meetings are held monthly.
4. **Ongoing communication about your family's strengths and needs:** Examples include parenting, knowledge of child development, community connections, family supports, education, housing, etc.
5. **Ongoing developmental assessment and health services:** Early identification of developmental and health related delays are critical in supporting overall development and school readiness (Ages and Stages, Milestones, hearing and vision, medical home, dental home).
6. **Goal Setting:** We are dedicated to partnering with you to identify goals related to your child and/or family. Through ongoing conversations about home visits and joint planning (item 1), engagement in socializations and program governance (items 2 and 3) family's needs and strengths (item number 4) and review of assessment and evaluation information for child (item number 5), we will work with you to identify and achieve goals.

The items listed above will drive the work that we do together while you and your child(ren) are enrolled in Early Head Start and through transition to preschool. We look forward to moving forward and growing our partnership with you and your family. On the next page, we will review what you can expect of our program, and what we need from you for you and your family to get the most out of the Early Head Start program.

# Commitment to Partnership Between Families and Early Head Start

## Home Visitor Responsibilities

- I will schedule time for home visits, be on time for each visit, or let you (the parent/guardian/caretaker) know in advance.
- I will work closely with you to identify strengths and needs to set personal and program goals that we will use to plan services.
- I will plan home visits jointly with you, fitting programming into your daily life, routines, and goals.
- I will discuss issues related to the well-being of you and your child, including: health, nutrition, parenting, and community services and provide information and referrals as appropriate.
- I will provide screening and ongoing developmental and family needs assessments to ensure that the Early Head Start program is supporting your family in meaningful ways.
- I will keep you informed of program activities, help you plan for attendance at these, and support you in meeting your family partnership goals (ex: Playgroups, Parent Committee, Policy Council, etc.).
- I will maintain respect and confidentiality in working with your family. Early Head Start home visitors are required by law to report any instances of suspected abuse or neglect involving a child.

## Parent Responsibilities

- I will schedule weekly home visits lasting a minimum of 1.5 hours during which an EHS Home visitor will work directly with myself and my child, engaging in activities based upon family goals. I will work with my home visitor to set up a consistent and reliable time to meet each week.
- I understand that I am invited to participate in socializations (at least 24 will be offered each year).
- I understand that I am invited to participate in Head Start Policy Council, which makes important recommendations and decisions regarding program policies and procedures.
- I understand that the home visit is a special time for me, my family and my child. I will be actively engaged with the home visit, sharing information, seeking information, and leading activities with my child in everyday activities and routines.
- In partnership with my home visitor, I will identify strengths and needs that will help us to set goals for myself and my family and work towards them.
- Parent/Guardian/Caretaker and EHS staff will review all responsibilities to ensure clear commitment of both parties.

# Community and Collaborative Partnerships

Community partners and those we collaborate with are important factors in service to and for the families that the WISD Head Start program serves. These partners are willing to help families with whatever need they might have pertaining to the organization's expertise, as well as provide support and information for families via presentations at parent meetings, attendance at orientations at the onset of the school year, being present at family events, while affording families information about health, nutrition, financial stability, education, and a wealth of much needed resources empowering families during the time they spend in Head Start/Early Head Start and beyond. Please review the Head Start Family Resource Guide for more information about partnerships with community agencies and programs.

## School Readiness

It might sound too early to be thinking about preparing babies and toddlers for school, but they are learning and growing every day! School readiness for toddlers is protecting their developing brains and supporting their growth and development every day. As a parent, you do this in the interactions you have with them each day. By spending time with your child, creating a supporting and nurturing environment, learning about their social emotional needs, and understanding their physical and cognitive development, you are getting your baby ready for a life full of growth and learning. Early Head Start is here to help you support your efforts in getting your child ready for a lifetime of learning.

To support your child and family, WISD has developed school readiness for goals for children from infancy through kindergarten entry. The following is a chart of the goals that we have for your child along with the ways that you might observe progress and achievement.

## School Readiness Goals

### Approaches to Learning

1. Children will display initiative and curiosity during work and play. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
2. Children are persistent in tasks and focused during work or play. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
3. Children work cooperatively with other children. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.

### Social Emotional Development

1. Children form healthy and secure relationships with peers and adults. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
2. Children manage their emotions in a positive manner. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
3. Children adjust to transitions between activities. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
4. Children exhibit self confidence in learning and social interactions. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.

### Cognition and General Knowledge

1. Children analyze problems and develop solutions. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
2. Children demonstrate early mathematical skills (including counting, comparing, matching, sorting, measuring and basic pattern and shape recognition). **Measure:** At least 90% of enrolled children assessed within age expectations of the development
3. Children observe, describe, and/or discuss living things & the natural environment. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
4. Children understand family and community roles and differences among people. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.

### Language and Literacy

1. Children demonstrate early literacy skills (including alphabet knowledge, storytelling, letter/sounds, phonemic awareness & book knowledge). **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
2. Children express emotions, ideas, and needs through conversations with peers and adults using an increasingly varied vocabulary. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
3. Children use effective listening skills. **Measure:** At least 90% of enrolled children assessed within age expectations of the development
4. Children convey thoughts and meaning through written shapes, symbols, pictures, letters and simple words. **Measure:** At least 90% of enrolled children assessed within age expectations of the development.

### Physical Well-Being and Motor Development

1. Children's health and wellness are being monitored by health professionals. **Measure:** At least 85% of enrolled children assessed within age expectations of the developmental norm at year's end.
2. Children display basic gross motor skills in a wide range of physical activities. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.
3. Children demonstrate fine motor strength and coordination. **Measure:** At least 90% of enrolled children assessed within age expectations of the developmental norm at year's end.



Parents as Teachers®  
*Curriculum Partner*

## Parents as Teachers - Curriculum

Washtenaw Intermediate School District's Early Head Start program is a Parents as Teachers Curriculum Partner. The nationally recognized Parents as Teachers (PAT) curriculum is used in the implementation of Early Head Start and is fully aligned with the Head Start Early Learning Outcomes Framework (ELOF). Research tells us that the early years are critical in building a foundation for success in school and in life. The most influential person in building this foundation is you, the parent. You are your child's first and most influential teacher! Our goal is to give all parents the information and support needed to give their children the best possible start in life. PAT emphasizes the value of parent child interactions, development centered parenting and family wellbeing.

The Parents as Teachers curriculum builds on family strengths, recognizing that all parents want what is best for their children, that parents are experts on their own children, and that you have the opportunity to shape social networks and community resources are a critical part of the support system.

Implementation of the PAT curriculum will be evaluated at a provider level, and at a program level annually to ensure that fidelity is being maintained.

## Elements of Early Head Start and the Parents as Teachers Curriculum

### Parent-Child Interactions:

The interactions between you and your child in the first three years of development contribute to early literacy skills that prepare children for a life full of learning. Through interacting with your child, you are learning about their personality, temperament and how they respond to new experiences and changes. Children learn most from the people they love. By giving your child your time and attention, you let him or her know you care about what he or she is going.

### Development-Centered Parenting:

As your child grows and develops, his or her needs change. As you observe your child learning and growing, share what you see with your home visitor. They will work with you to connect your child's behaviors and actions what is happening with their development and explore how parenting supports development. Understanding where your child is developmentally is important in your role as a parent.

### Screening:

The first three years are a time very rapid brain development. Because learning is happening so quickly, identifying when a young child may benefit from additional learning support is critical. Every child enrolled in the program will receive screening using the following tools:



### Education Screening:

- **Ages and Stages Questionnaire-3:** This tool is used to screen children's development across developmental domains. This is completed annually.
- **Ages and Stages Questionnaire-Social Emotional:** This tool is used to specifically screen children's social emotional development. This is completed annually.
- **Modified Checklist of Autism in Toddlers (MCHAT):** This tool is used with children older than 18 months of age to identify possible markers for autism. This completed annually for children in the specified age range.

Your home visitor will review the results of the above screeners during your next home visit after the screening takes place. In the event of a delay, you and your home visitor will work together to plan next steps for you and your child. Your home visitor is part of the Washtenaw ISD Early On program, which supports children with developmental delays or disabilities. They may recommend that further evaluation is conducted and will initiate the Early On evaluation process. Together, with a team of additional early intervention providers, your home visitor will complete additional evaluations to determine if your child is eligible for Early On and if an Individualized Family Service Plan is needed to support your child's development.

For each child enrolled in Early Head Start that is eligible for Early On services, a team of early childhood educators and early interventionists are available to help you support your child's developmental needs. Your team will work with you to develop strategies to help your child achieve their outcomes and to have the best start possible.

### Health Screening:

- **Health History:** You will complete this for each enrolled child & pregnant parent at enrollment.
- **Spot Vision Screener:** Each child will receive a vision screening annually.
- **Hearing Screener:** Each child will receive a hearing screening annually.
- **Nutrition Assessment:** Each child will receive a vision screening annually.

Your home visitor will review the results of the above screenings during your next home visit. If there is a concern, your home visitor will recommend that you follow up with your child's pediatrician.

### Ongoing Assessment:

Ongoing assessment is used consistently throughout each program year. Your home visitor will observe your child and discuss development with you during each home visit. This is used to assess your child's developmental growth and will be used to plan home visits. While assessment is ongoing, data is finalized four times each year and shared with you by your home visitor. As a program, we use program-wide assessment data to plan for professional development and to assure program quality. We utilize the Desired Outcomes for Children and Families (DRDP) ongoing assessment tool with all children.

Your home visitor will observe your child's ongoing development informally during home visits and through your regular communications. They may ask you to video record your child doing an activity that they may not have seen them do to make sure that your child's assessment data is complete.

Assessment data will formally be reviewed at four checkpoints during the year. At these checkpoints, your home visitor will finalize all the current assessment information they have collected. They will review this assessment data with you and provide you with a report for your records.

### Family Well-Being:

Parents as Teachers helps families focus on their well-being by using a Strengthening Families approach. Your home visitor will explore the five Strengthening Families Protective Factors. Parental resilience, social connections, concrete

supports in times of need, knowledge of parenting and child development, and social and emotional competence in children are known to build family strengths and create an environment that promotes positive child development. Your home visitor will work with you to identify your strengths, to set goals, and achieve those goals to improve your family well-being.

## Health Services:

Studies have shown that there are specific health conditions that, when unidentified and/or untreated, contribute to poor learning outcomes for children. Early Head Start will work with you to identify a medical provider for your child (if you do not already have one), find a dental provider for your child, obtain medical insurance, conduct screenings, and support you in following Michigan’s EPSDT state standards for preventative care and immunizations. Your home visitor will work with you to ensure that your child is able to access all the necessary health services to support their growth and development.

### Health Screening:

As noted in the previous section, early identification of developmental and/or health needs is critical in ensuring that children are ready to succeed. The following screenings are required for participation in the program:

- **Health History:** You will complete this for each enrolled child & pregnant parent at enrollment.
- **Spot Vision Screener:** Each child will receive a vision screening annually.
- **Hearing Screener:** Each child will receive a hearing screening annually.
- **Nutrition Assessment:** Each child will receive a vision screening annually.

### Preventative Health Care:












The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) service is Medicaid's comprehensive and preventive child health program for individuals under the age of 21. EPSDT has two purposes: to assure health care resources are available and accessible, and to help Medicaid recipients and their caregivers use these resources. Early Head Start will work closely with you make sure that your child is receiving the recommended well child visits, screenings, tests, and immunizations that will keep your child healthy and ready to learn.

### Visits with a Health Care Provider:

|                       |  |
|-----------------------|--|
| Physical Exams        | Following the Well Child Exam Schedule:<br>1 month/2 month/4 month/6 month/9 month/12 month/15 month/<br>18 month/24 month/30 month/36 month |
| Dental Exam           | Starting at 1 year of age & Yearly   |
| Lead Testing          | 12 months & 24 months  |
| Hemoglobin/Hematocrit | Starting at 1 year of age & Yearly   |
| Immunizations         | Ongoing – see below for more information   |

## Immunizations:

The EPSDT standards also recommend that you follow a schedule of immunizations that prevent your child from getting sick. We recommend that all children receive immunizations under the direction of their primary care physician or local health department.

|  Birth |  1 month |  2 months |  4 months |  6 months |  12 months |  15 months |  18 months |  19-23 months |  2-3 years |  4-6 years |
|---|---|--|--|--|---|---|---|--|---|---|
| HepB  | HepB  |  |  | HepB   |   |   |   |  |   |   |
|   |   | RV   | RV   | RV   |   |   |   |  |   |   |
|   |   | DTaP   | DTaP   | DTaP   |   | DTaP  |   |  |   | DTaP  |
|   |   | Hib  | Hib  | Hib  | Hib   |   |   |  |   |   |
|   |   | PCV13  | PCV13  | PCV13  | PCV13   |   |   |  |   |   |
|   |   | IPV  | IPV  | IPV  |   |   |   |  |   | IPV   |
|   |   |  |  | Influenza (Yearly)*  |   |   |   |  |   |   |
|   |   |  |  |  | MMR   |   |   |  |   | MMR   |
|   |   |  |  |  | Varicella   |   |   |  |   | Varicella   |
|   |   |  |  |  | HepA <sup>§</sup>   |   |   |  |   |   |

**Note:** If your child misses a shot, you don't need to start over. Just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

## Footnotes

\*Two doses given at least four weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

<sup>§</sup>Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 months after the first dose. All children and adolescents over 24 months of age who have not been vaccinated should also receive 2 doses of HepA vaccine.

(Chart from the Centers for Disease Control and Prevention; CDC.gov)

# Transition to Preschool

While we are looking forward to working with you and your child for as long as we can, eventually, it will be time for your child to move on from our program and begin school. Starting preschool is an exciting time for you and your child! When it is time, we will work together with you to start planning for child's transition out of home-based Early Head Start and into a center-based preschool program.

Planning for your child's transition from home-based Early Head Start to a Head Start preschool program starts when your child reaches 2 years 6 months of age OR in March for children who will turn three after September 30<sup>th</sup> of the following program year. In order to make that transition as smooth as possible for you and your child, we will support you through enrollment in preschool, making sure that your child is ready for their first day of school.

## Process:

### Step One

Transition planning meeting: This occurs during a regularly scheduled home visit. You will complete a Transition Plan which will document what you would like your child to do after completion of the Early Head Start program.

### Step Two

The next step in the transition process is to complete a preschool interest form at [www.washtenawpreschool.org](http://www.washtenawpreschool.org). Your home visitor will guide you through completion.

### Step Three

Once you have completed the transition planning and submitted a preschool interest form, your home visitor will begin collecting information that is needed to transition into a classroom.

## Collaboration in Transition

During this process, your home visitor will work closely with the family support specialist that works in the center-based program you wish for your child to attend. You will have the opportunity to meet jointly with your home visitor and the family support specialist as you complete the required documentation and prepare for transition. The family support specialist will share any orientation activities that are available for your child prior to starting school. When appropriate, your home visitor may attend activities such as school tours and orientation if support is needed.

## In Closing

WISD's Early Head Start team is looking forward to working with your family! This might feel like a lot of information, but we will be here with you every step of the way. If you have additional questions or concerns, please feel welcome to contact your home visitor or EHS Supervisor Alicia Kruk.