

<b>Performance Standard</b>	Program Operations Education and Child Development	<p style="text-align: center;"><b>Head Start</b> <b>Policies and Procedures</b></p> <p style="text-align: center;"><i>Eastern Panhandle</i> <i>Instructional Cooperative</i></p> <p style="text-align: center;"><b>EPIC</b> <small>Serving the educational needs of the entire community</small></p>
<b>Subpart</b>	§ 1302.30 Purpose	
<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	06/2022	
<b>Reviewed Date</b>	05/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialists, Director	

**Subject:** Education and Child Development Area Purpose

**Policy:** EPIC Head Start will provide high quality early education and child development services, including for children with disabilities, that promote cognitive, social, and emotional growth in preparation for school readiness.

**Procedure:** The Education and Child Development Program Service area will develop, implement, and monitor policies and procedures in developmentally, culturally, and linguistically appropriate learning experiences in language, literacy, mathematics, social and emotional functions, approaches to learning, science, physical skills, and creative arts that support individualization and growth for children and families in the following areas:

1. Research-based curriculum
2. Screenings and assessments
3. Responsive and effective teacher-child interactions
4. Secure parent-child relationships and high-quality early learning experiences
5. Health education services, including physical, dental, social-emotional, nutrition and safety
6. Family engagement opportunities, including home visits, events, parent conferences, activities, and materials
7. Parent education services, including child development and parenting skills training, as well as positive behavior and communication techniques
8. Individualized school readiness goals
9. Transition services

Early Head Start home-based/socialization and Head Start/Pre-Kindergarten collaboration center-based services are provided in Berkeley, Morgan, and Jefferson counties. The population served includes, expectant mothers, families and children, birth to five years of age, from all racial and ethnical backgrounds. 10% of the total funded enrollment is filled by children eligible for services under IDEA. Families served vary in size and composition, including single and two-parent households.

<p><b>Monitoring &amp; Reporting:</b></p> <ol style="list-style-type: none"> <li>1. <b>Dissemination of Policies &amp; Procedures</b> will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.</li> <li>2. <b>Training</b> will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.</li> <li>3. <b>Education Cornerstone</b> comprised of Early Head Start and Head Start Managers and Specialists convenes four times a year to review policies and procedures, analyze data, and suggest process improvements and/or adjustments.</li> <li>4. <b>Education Advisory Council</b> comprised of parents, staff, and community members convenes twice a year to review and discuss current practices.</li> <li>5. <b>Monthly Staff Meetings</b> will be conducted to review Head Start Performance Standards, Policy and Procedures and Licensing Regulations.</li> <li>6. <b>The Data System &amp; Reporting (DSR) team</b> will meet monthly to review and monitor myHeadStart data.</li> </ol>
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<b>Subpart</b>	§ 1302.31 Teaching and the learning environment	
<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	04/2022	
<b>Reviewed Date</b>	04/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialists, Director	

**Subject:** Effective Teaching Practices

**Policy:** EPIC Head Start staff will provide responsive care, effective teaching, and an organized learning environment that promotes healthy development and opportunities for all children's skill growth, aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five, including for children with disabilities.

**Procedure:**

1. Through intentional planned daily schedules, lesson plans and activities, teaching staff will provide and implement high-quality experiences in language, literacy, social and emotional development, math, science, social studies, creative arts, and physical development. Teaching staff will focus on promoting individualized growth in the developmental progressions described in the Head Start Early Learning Outcomes Framework (HSELOF): Ages Birth to Five by aligning with The Creative Curriculum for Preschool.
2. Teaching staff will provide nurturing and responsive practices, interactions, and environments that foster trust and emotional security; are communication and language rich; promote critical thinking and problem solving; social, emotional, behavioral, and language development; provide supportive feedback for learning; motivate continued effort; support children's engagement in learning experiences and activities.
3. Teaching staff will review and analyze each child's data and use it to support the planning of small and large group lessons, as well as individualized school readiness goals. Resources include but are not limited to the following: Early Learning Reporting System (ELRS), School Readiness Individualized Learning Plan, Brigance Development and Social Emotional Screenings, and myHeadStart data.
4. **Dual Language Learners:** EPIC Head Start recognizes bilingualism and biliteracy as strengths and implements research-based teaching practices that support their development.
  - a. Teaching practices will focus on both English language acquisition and the continued development of the home language.
  - b. If staff do not speak the home language of all children in the learning environment, teaching staff will:
    - Learn key vocabulary of child's home language
    - Provide materials in home language such as books, labels, pictures and posters, instruments, clothing, etc.
    - Provide an interpreter when available

**Monitoring & Reporting:**

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2. **Training** will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
5. CD Managers and/or CD Specialist will conduct the Manager Monitor Log to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Weekly lesson plan, newsletter, and anecdotal documentation (submitted on Teaching Strategies and posted in the classroom), Early Learning Reporting System (ELRS), School Readiness Individualized Learning Plan, Brigance Development and Social Emotional screenings, and myHeadStart data.
3. CD Managers and/or CD Specialist will conduct The Fidelity Tool for Administrators to monitor high quality supportive environments and curriculum fidelity.
4. CD Managers and/or CD Specialists will conduct Classroom Assessment Scoring System (CLASS) to monitor teacher-child interactions and record the results in the myHeadStart.
5. CD Managers and/or CD Specialist will conduct the Teaching Pyramid Observation Tool (TPOT) for Preschool Classrooms to assess teacher-child interactions ensuring classroom practices are aligned to Pyramid Model practices.

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<b>Revised Date</b>	06/2022	
<b>Reviewed Date</b>	05/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Learning Environment

**Policy:** EPIC Head Start staff will implement a well-organized learning environment with developmentally appropriate schedules, lesson plans, and indoor and outdoor learning experiences that provide adequate opportunities for choice, play, exploration, and experimentation among a variety of learning, sensory, and motor experiences.

**Procedure:**

1. Teaching staff will include teacher-directed, child-initiated, active, and quiet learning experiences and the following opportunities:
  - a. Individual Work and Individualizations will occur daily for each child.
  - b. Small Group: Intentionally planned lessons to focus on the class study and/or on skills in any of the various developmental learning areas (*refer to: HSELOF*). Staff will introduce new concepts, teach skills, and document focused observations. The size is determined by the children's age and individualized needs and the length of time is between 10-15 minutes. Small groups should NOT consist of worksheets, coloring pages, or teacher directed craft activities.
  - c. Large Group: Lessons and discussions will be based on the children and their interests including, but not limited to Question of the Day, Supplemental Curriculum, Study, etc. Staff will promote child-directed discussions and the length of time will be between 10-15 minutes. A minimum of 3 large groups will be provided and include an Opening Routine, Movement, and Roundup.
  - d. Choice Time: There are 10 interest areas arranged in classroom with materials readily available for children to socialize, explore and experiment. **All interest areas must be available for a minimum of 120 minutes per day.** This can take place in one 120-minute block or two 60-minute blocks of time and cannot include clean up or any transition time. Any schedules deviating from this, must be approved by the CD Specialist.
  - e. Read-Aloud
  - f. Outdoor: **Must be provided for a minimum of 60 minutes per day** unless it is raining, lightning, or storming (high winds). This can take place in one 60-minute block or two 30-minute blocks of time and cannot include clean up or any transition time. If allotted outdoor time cannot be met, staff will provide indoor activities that help develop large and small motor skills.
  - g. Transitions: Must be planned to minimize the number of transitions during the day, when possible. Must be 2 minutes or less and educational including the use of Mighty Minutes.
  - h. Transportation: In order to extend learning time across all environments, transportation staff will review the Speech and Language calendar with children daily during transport.

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3. CD Managers and/or CD Specialist will conduct the **Manager Monitor Log** to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Weekly lesson plan, newsletter, and anecdotal documentation (submitted on Teaching Strategies and posted in the classroom), classroom schedule (approved by CD Specialist and posted in the classroom, including picture schedule for children), and myHeadStart data.
4. CD Managers and/or CD Specialists will conduct **The Fidelity Tool for Administrators** to monitor high quality supportive environments and curriculum fidelity.
5. CD Managers and/or CD Specialists will conduct **Classroom Assessment Scoring System** to monitor teacher child interactions and record the results in myHeadStart.
6. CD Managers and/or CD Specialist will conduct the **Teaching Pyramid Observation Tool (TPOT)** for Preschool Classrooms to assess teacher-child interactions ensuring classroom practices are aligned to Pyramid Model practices.

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<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Materials and Space for Learning

**Policy:** EPIC Head Start staff will provide age-appropriate equipment, materials, supplies, and physical space indoor and outdoor. The equipment, materials, and supplies must include any necessary accommodations and space accessible to children with disabilities.

**Procedure:**

**1. Space for Learning**

- a. Teaching Staff will ensure the setup of indoor and outdoor environments are safe, clean, attractive, comfortable, and well designed to help children engage in the activities and provide a sense of community.
  - Keep indoor and outdoor spaces free of unnecessary clutter and extraneous stimulation.
  - Arrange indoor space to provide clear pathways and no wide-open areas that encourage running.
  - Observe flow of traffic in the classroom carefully, making adaptations in arrangement as needed.
  - Ensure the environment reflects non-stereotyping and cultural diversity, including backgrounds and interests of families/children represented in the classroom through pictures, photographs and materials displayed and used.
  - Display family portraits for each child/family.
  - Display a child friendly picture schedule and job chart with enough jobs for each child.
  - Provide developmentally appropriate equipment, materials, supplies, and space for children with disabilities.
- b. Teaching staff will organize the classroom in 10 interest areas to provide opportunities for children to explore, discover, and grow including Blocks, Dramatic Play and Cooking, Toys & Games, Art, Library, Discovery, Sand/Water, Music and Movement, Technology (*refer to Creative Curriculum Volume 2: Interest Areas*).
  - Maximize use of the space to arrange work and play areas and creatively consider any fixed features or unique room limitations.
  - Clearly define interest areas while allowing children to work individually or together in small or large groups.
  - Provide individual space for each child's belongings.
  - Establish spaces for privacy for 1 or 2 children to play alone without expected interruptions.
  - Separate quiet and active areas (i.e., Library is separated from Blocks).
  - Interest areas will be ideally set up near needed resources. (i.e., Water source accessible for art and water activities).
  - Implement recommendations from CD Managers, CD and Mental Health Specialist regarding layout.
- c. Teaching staff will create a Safe Place area providing a space for children to go to calm down when they are feeling mad, sad, nervous, or experiencing any big emotion.
  - This area should be used as a tool to support the social emotional need of children and will not be used as a time out/isolation space.
  - Place the Safe Place area away from the loudest area of the rooms, but not in a secluded/obscure corner.
  - Design the area with safety and comfort in mind and include durable and easily cleaned items based on the interest of the children (i.e., Emotions/Feelings books, age-appropriate fidgets, calming sensory bottles, pinwheels, stress balls, stuffed animals, motion timers, Emotions/Feelings dolls, pillows/bean bag chair or other soft seating, feelings mirror, visual supports (posters, cards, social stories).
  - Introduce the space at the beginning of the year along with other interest areas to provide a sense of safety, security, and routine. Over the course of several days, model how to use the tools located in the area. Invite the children to touch and feel them. Conduct a lesson on how to use the space, when they may want to go there, what to do while there, how to use the material and how to clean up.
  - Continuously, routinely, and intentionally teach children self-regulating strategies at a time when big emotions are not being displayed.

**2. Materials**

- a. Teaching staff will provide developmentally appropriate materials that support the implementation of the curriculum and that are relevant to children's experiences, cultures, and abilities.
  - Change materials intentionally and periodically to support children's interest. If materials are still of interest, then an extension to the activity must be implemented to promote higher level thinking.
  - Provide an adequate, but not overwhelming number of materials and duplicate materials as needed.
  - Include materials meeting the individualized interest of the children in each interest area.

- Place materials supporting print awareness, language, and literacy (books, puppets, etc.) throughout each interest area, including related books, pencils, paper, and rulers.
  - Display children's work at their eye level throughout the room with name, date, and the dictation. Artwork displayed must have been completed within the past 30 days.
- b. Teaching staff will organize materials to promote accessibility and independent use by children.
- Label all shelving and materials with words and pictures to promote literacy independence.
  - Place materials and equipment on low open shelves.
  - Store materials not intended for free access out of children's reach in closets or cabinets.
  - Check materials regularly to be sure they are in good condition.
  - Encourage children to choose freely from all materials in each area equally, regardless of gender, language, disability, race, or culture.

**Monitoring & Reporting:**

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2. **Training** will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the Manager Monitor Log to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Daily Roster, Student/Visitor Accident/Incident Report, Student Accident/Incident Mapping, Health/Safety postings, Allergy Chart, Sanitizing & Disinfecting Checklist, Outdoor Environment Checklist, First Aid Checklist, Fire Drill Safety Report, Emergency Response Drills, Emergency Plan, Emergency Binder, Medication Binder, and myHeadStart data.
4. CD Managers and/or CD Specialists will conduct the WV Universal Health & Safety Review to ensure compliance with health and safety procedures and submit to the Director.
5. Family Advocates will complete the Health and Safety Checklist.
6. CD Managers and/or CD Specialists will conduct The Fidelity Tool for Administrators to monitor high quality supportive environments and curriculum fidelity.
7. CD Managers and/or CD Specialists will conduct Classroom Assessment Scoring System (CLASS) to monitor teacher child interactions and record the results in myHeadStart.
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<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	06/2022	
<b>Reviewed Date</b>	05/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Promoting Learning through Approaches to Rest, Meals, Routine, and Physical Activity

**Policy:** EPIC Head Start staff will provide an intentional and age-appropriate approach to providing responsive care regarding healthy development that are aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five, including children with disabilities.

**Procedure:**

1. **Rest:** Teaching Staff will ensure a regularly scheduled time consisting of 60 minutes of resting time is provided daily for the child who sleeps, and alternative quiet learning activities for the child who is unable to sleep during this time.
  - a. Turn off the lights and playing relaxation music for a peaceful rest time.
  - b. Provide cots and a sheet, if required, and children may bring a small blanket.
  - c. Children will be encouraged but not forced to rest by rubbing backs, etc.
2. **Meals:** Teaching staff will ensure a regularly scheduled time consisting of 30 minutes for breakfast and 30 minutes for lunch is provided daily. This time is structured and includes learning opportunities to support teaching staff-child interactions and foster communications and conversations that contribute to a child's learning, development, and socialization.
  - a. Family style meals will be implemented.
  - b. Children will be involved in preparation and clean up when possible.
  - c. Children will not be forced to finish their food and food will not be used as a reward or punishment.
  - d. All staff will eat with the children while modeling good table manners.
  - e. Teaching staff will encourage a pleasant, relaxed atmosphere for mealtimes.
  - f. Transition activity prior to meals must be short to ensure that meals are at the appropriate temperature when served.
  - g. When possible, teachers must allow children to leave the table when finished eating and help them to begin the next activity. Eliminate waiting until everyone is finished.
3. **Routines:** Teaching Staff will approach routines, such as hand washing and diapering, and transitions between activities, as opportunities for strengthening and reinforcing development, learning and skill growth.
  - a. Develop specific plans for routines and transitions (i.e., drop-off and pick-up times, active supervision coverage, etc.).
  - b. Give specific instructions that are clear and concise to meet the children's individual needs.
  - c. Review expectations and allow sufficient time.
  - d. Provide a five-minute warning before changing activities.
  - e. Use transition activities as an opportunity to teach (i.e., Mighty Minutes), by practicing cognitive skills such as counting, color and shape recognition and letter or numeral exercises as well as fun chants or rhymes.
  - f. Keep transition activities simple and timed appropriately.
  - g. Eliminate waiting time as much as possible. Transitions should be quick and efficient.
  - h. When possible, move two to three children at a time from one activity to another. Have one staff person at the next area to engage children in the new activity. Do or have something to grab their attention. Motivate them to come.
4. **Physical Experience:** Teaching Staff will recognize physical activity as important to learning and integrate intentional movement into curricular activities and daily routines in ways that support health and learning.
  - a. Allow children to move freely whenever possible and never restrict movement for extended periods of time.
  - b. Incorporate movement into each activity.
  - c. Provide a regularly scheduled time consisting of either one 60-minute block or two 30-minute blocks of outdoor time each day unless it is raining, lightning, or storming (high winds). Children will not be allowed to stay outdoors for long periods of time during extreme heat or cold conditions as indicated by the Child Care Weather Watch posting. If unable to be outdoors for the allotted time, staff will provide indoor activities that help develop large and small motor skills.
  - d. Staff will provide a teacher directed vigorous physical outdoor gross motor activity daily.

**Monitoring & Reporting:**

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2. **Training** will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the Manager Monitor Log to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Weekly lesson plan, newsletter, and anecdotal documentation (submitted on Teaching Strategies and posted in the classroom), Child Care Weather Watch, and meal count.
4. CD Managers and/or CD Specialists will conduct The Fidelity Tool for Administrators to monitor high quality supportive environments and curriculum fidelity.
5. CD Managers and/or CD Specialists will conduct Classroom Assessment Scoring System to monitor teacher child interactions and record the results in myHeadStart.
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<b>Subpart</b>	§ 1302.32 Curricula	
<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	04/2022	
<b>Reviewed Date</b>	04/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialists, Director	

**Subject:** Curricula

**Policy:** EPIC Head Start will implement developmentally appropriate research-based early childhood curricula that is in alignment with the Head Start Early Learning Outcomes Framework: Ages Birth to Five (HSELOF) and West Virginia Early Learning Standards (WVELS).

**Procedure:**

1. Teaching staff will use The Creative Curriculum® for Preschool, Sixth Edition to fidelity in the classroom which provides a comprehensive, research-based curriculum that features exploration and discovery as a way of learning, enabling children to develop confidence, creativity, and lifelong critical-thinking skills. It is designed to help educators at all levels of experience plan and implement a developmentally appropriate, content-rich program for children with diverse backgrounds and skill levels.
2. Curriculum planning: Teaching staff will use individual child and family information when creating their weekly curriculum plan. This information may be obtained from parent, family, and child information, including parent input or suggestions, school readiness goals, anecdotal notes, home visits, and parent conferences, as well as from assessment information.
  - a. Document weekly curriculum plans in "My Teaching Strategies". The weekly plan will provide a balance of child initiated and adult directed activities through individual, small, and large group activities, routines, transitions, music/movement, read aloud and outdoor experiences.
  - b. Incorporate individualization in weekly curriculum plans based on each child's School Readiness Individualized Learning Plan. This plan may also be used to document supports or modifications needed to meet specific needs.
  - c. Provide a weekly newsletter linking classroom learning and home to incorporate family engagement.
  - d. Update emergent changes or additions to the weekly plan based on children's interests and ideas. Emergent changes will be handwritten on the curriculum plan posted in the classroom. These may be carried over into following weeks or incorporated into a class study based on children's continued level of interest.
  - e. Submitted weekly curriculum plans and newsletter to the CD Manager one week prior to the curriculum planning date.
  - f. At the end of the week, place the curriculum plan and newsletter in a binder/folder with all other past plans. The curriculum and individualization plans will be kept for the entire program year.

**Monitoring & Reporting:**

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<b>Subpart</b>	§ 1302.33 Child Screenings and Assessments	
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<b>Reviewed Date</b>	07/2021	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Developmental Screening

**Policy:** Within 45 calendar days after the child first attends the program, EPIC Head Start will conduct a research-based standardized developmental screening in the areas of behavioral, motor, language, social-emotional, and cognitive development in collaboration with each child's parent/guardian.

**Procedure:**

1. Teaching Staff will use the BRIGANCE Head Start Screen III (3-5 years) which includes Core Assessments that cover age-appropriate skills across key early learning domains including physical, language, cognitive and academic development.
  - a. Thoroughly read STEP 1, STEP 2, STEP 3, STEP 4 in the Brigance Head Start Screen III Manual (pages x-xviii).
  - b. Conduct the screening in English and the home language, when possible, if the child speaks a language other than English.
  - c. At the first home visit, administer appropriate screen and materials according to the child's birthdate (Three, Four, or Five Year) (page xi) and record the responses on the screening data sheet. (Refer to example of completed data sheets as needed.)
    - Complete Section A prior to starting the screening and review all Core Assessment items.
    - Complete Sections B by asking the child each question exactly as directed, stopping after the discontinue point as described in the Discontinue column. Circle the item number if correct. Slash through the item number if incorrect. (Refer to page xxvi-xxvii if any accommodations are needed.)
    - Complete Sections C by calculating the score after the screening is complete:
      - i. Record the number correct in the Number Correct column (DO NOT count any correct responses above the discontinue point)
      - ii. Multiply the Number Correct by the assigned Point Value and record in the Child's Score column
      - iii. Calculate the Total Score by adding all the numbers in the Child's Score column.
    - Complete Section D. Notate any significant observations, parent feedback, and the child's primary language if other than English.
    - Complete Section E. Compare the Total Score with the Cutoff Score using Table 2 "Cutoff for Detecting Children Who Are Likely to Have Developmental or Academic Delays" (page xviii) and notate the following:
      - i. "WNL" (within normal limits) or "BNL" (below normal limits)
      - ii. Cutoff Score (i.e., "< 42")
      - iii. Outcome: "Pass" – The child has a score either above or within normal limits. No further evaluation is needed at this time.  
or "Rescreen" – The child has a score below normal limits that is  $\geq 20$  and will be rescreened within in 30 calendar days.  
or "Observation" – The child has a score below normal limits that is  $< 20$  and the CD Manager/CD Specialist will observe and determine to "Rescreen" or "Refer".  
or "Refer" – The child has been rescreened and the rescreen was below normal limits.
2. Teaching staff will document the developmental screening by completing the following.
  - a. Document result on the Developmental Screen Tracking form. Send a copy to your manager when all children have been screened.
  - b. Scan a copy to your manager, place the original in the child's file, and update the Screening Summary.
  - c. Discuss the screening results with the parent/guardian at each Parent Conference or sooner if a referral is needed.
3. Teaching staff will complete rescreen within 30 calendar days of the original screening date. CD Managers will follow their individual county Local Education Agency (LEA) process for developmental referrals, if the rescreen was below normal limits.
4. If teachers and parents continue to have concerns about the child's development, he/she may be referred for further testing to LEA or appropriate agency for a formal evaluation to access the child's eligibility under IDEA as soon as possible.

**Monitoring & Reporting:**

1. Dissemination of Policies & Procedures will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.
2. Training will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the Manager Monitor Log to monitor the implementation of policies and procedures.
4. CD Managers will document and review screening results in the Screening and Disabilities Tracking and myHeadStart to ensure compliance.
5. CD Managers will follow up and document the developmental referral process within 30 days and as needed.

BRIGANCE® Screen III Three-Year-Old Child Data Sheet



A. Child's Name Crystal Moore Date of Screening 2016 9 12 School/Program Hammond School  
 Parent(s)/Caregiver(s) Heather Moore Birth Date 2013 7 7 Teacher Jake Yarmus  
 Address 322 Flagstaff Rd., Apt. C Age 3 2 5 Examiner Sarah Donohue

B. Core Assessments			C. Scoring		
Page	Domain	Directions: Assessments may be administered in any order. For each assessment, start with the first item and proceed in order. Give credit for a skill by <b>circling</b> the item number. ① For a skill not demonstrated (an incorrect response), <b>slash through</b> the item number. /.	Discontinue	Number Correct × Point Value for Each	Child's Score
3	Academic/Cognitive	<b>1A Knows Personal Information</b> Knows: ① First name ② Last name / Age	Administer all items.	2 × 1	2 / 3
4	Language Development	<b>2A Identifies Colors</b> Points to: ① red ② blue ③ green ④ yellow ⑤ orange	Stop after 3 incorrect responses in a row.	5 × 2	10 / 10
5	Language Development	<b>3A Identifies Pictures by Naming</b> Names: ① boat ② scissors / kite ④ wagon / ladder / fish	Stop after 3 incorrect responses in a row.	3 × 2	6 / 12
6	Language Development	<b>4A Knows Uses of Objects</b> Knows use of: ① book ② scissors / stove / pencil	Administer all items.	2 × 3	6 / 12
7	Physical Development	<b>5A Visual Motor Skills</b> Draws: ① a vertical line ② a horizontal line / a circle / plus sign	Stop after 3 skills not demonstrated in a row.	2 × 3	6 / 12
9	Academic/Cognitive	<b>6A Understands Number Concepts</b> Understands: ① two ② three / five	Administer all items.	2 × 3	6 / 9
10	Physical Development	<b>7A Builds Tower with Blocks</b> Builds a tower with: ① six blocks ② seven blocks ③ eight blocks 4. nine blocks 5. ten blocks	Stop after 2 attempts.	3 × 2	6 / 10
11	Physical Development	<b>8A Gross Motor Skills</b> ① Stands on one foot for five seconds ② Stands on other foot for five seconds / Walks forward heel-to-toe four steps.	Administer all items.	2 × 3	6 / 9
13	Language Development	<b>9A Identifies Parts of the Body</b> Points to: ① stomach / neck ③ back ④ knees ⑤ thumbs / 6. fingernails	Stop after 3 incorrect responses in a row.	4 × 1	4 / 6
14	Academic/Cognitive	<b>10A Repeats Sentences</b> Repeats sentence of: ① four syllables ② six syllables / eight syllables	Stop after incorrect responses for both a and b for a single item.	2 × 3	6 / 9
15	Language Development	<b>11A Uses Prepositions and Irregular Plural Nouns</b> Uses: ① prepositions / irregular plural nouns	Administer both items.	1 × 4	4 / 8

Total Score = 62 / 100

D. Notes/Observations: Cooperated and enjoyed talking.

One	Score	Cutoff	Total Score	Outcome
✓	ANL/WNL	<42	-----	Pass – No further evaluation needed
	BNL	_____	>= 20	Rescreen – within 30 calendar days
	BNL	_____	< 20	Observation – Needed to determine Observation date ____/____/____
				Observation outcome: Rescreen w/in 30 cal. days
				Refer for evaluation
	BNL	_____	-----	Refer – for evaluation, rescreen BNL

BRIGANCE® Screen III Four-Year-Old Child Data Sheet

4  
year-old

A. Child's Name Corey Martin Date of Screening 2016 8 15 School/Program Ballard School  
 Parent(s)/Caregiver(s) Alex and Anne Martin Birth Date 2012 2 10 Teacher Emily Chappell  
 Address 982 Haines Street Age 4 6 5 Examiner Bernard Karcher

B. Core Assessments			C. Scoring		
Page	Domain	Directions: Assessments may be administered in any order. For each assessment, start with the first item and proceed in order. Give credit for a skill by <b>circling</b> the item number. ① For a skill not demonstrated (an incorrect response), <b>slash through</b> the item number. /	Discontinue	Number Correct × Point Value for Each	Child's Score
19	Academic/ Cognitive	<b>1B Knows Personal Information</b> Knows: ① First name ② Last name ③ Age / Street address	Stop after 3 incorrect responses in a row.	<u>3</u> × 2.5	<u>7.5</u> /10
20	Language Development	<b>2B Names Colors</b> Names: ① blue ② green / yellow ④ red / orange / pink / black 8. purple 9. white 10. brown	Stop after 3 incorrect responses in a row.	<u>3</u> × 1	<u>3</u> /10
22	Language Development	<b>3B Identifies Pictures by Naming</b> Names: / scissors / duck ③ snake ④ wagon / ladder ⑥ leaf / owl / mail	Stop after 3 incorrect responses in a row.	<u>3</u> × 1	<u>3</u> /8
23	Academic/ Cognitive/ Literacy	<b>4B Visual Discrimination—Forms and Uppercase Letters</b> / ○ ② □ ③ ○ ④ ◊ / > ⑥ O ⑦ I / P / X	Stop after 5 incorrect responses in a row.	<u>5</u> × 1	<u>5</u> /10
24	Physical Development	<b>5B Visual Motor Skills</b> Draws: ① a circle ② a plus sign ③ an X / a square / a rectangle	Stop after 3 skills not demonstrated in a row.	<u>3</u> × 2	<u>6</u> /10
26	Physical Development	<b>6B Gross Motor Skills</b> ① Walks forward heel-to-toe for 10 steps ② Hops five hops on preferred foot ③ Hops five hops on other foot ④ Stands on one foot for ten seconds ⑤ Stands on other foot for ten seconds	Administer all items.	<u>5</u> × 1	<u>5</u> /5
28	Language Development	<b>7B Names Parts of the Body</b> Names: ① stomach / neck ③ back / knees ⑤ thumbs / fingernails	Stop after 3 incorrect responses in a row.	<u>3</u> × 2	<u>6</u> /12
29	Language Development	<b>8B Follows Verbal Directions</b> Follows: ① two-step directions / three-step directions	Stop after 2 incorrect responses for 1 item.	<u>1</u> × 4	<u>4</u> /8
31	Academic/ Cognitive/ Mathematics	<b>9B Counts by Rote</b> Counts to: ① ② ③ ④ ⑤ / 7 8 9 10	Stop after the first error.	<u>5</u> × 0.5	<u>2.5</u> /5
32	Academic/ Cognitive/ Mathematics	<b>10B Recognizes Quantities</b> Recognizes and names quantities of: / three / five 3 eight	Stop after 2 incorrect responses.	<u>0</u> × 4	<u>0</u> /12
33	Language Development	<b>11B Verbal Fluency and Articulation</b> ① Uses sentences of at least three words ② At least 90% of speech is intelligible	Administer both items.	<u>2</u> × 5	<u>10</u> /10

Total Score = 52 /100

D. Notes/Observations: <u>Vision and hearing appear normal.</u>	✓ One	Score	Cutoff	Total Score	Outcome
		ANL/WNL		-----	Pass – No further evaluation needed
	✓	BNL	<69	>= 20	Rescreen – within 30 calendar days
		BNL		< 20	Observation – Needed to determine Observation date _____/_____/_____ Observation outcome: Rescreen w/in 30 cal. days Refer for evaluation

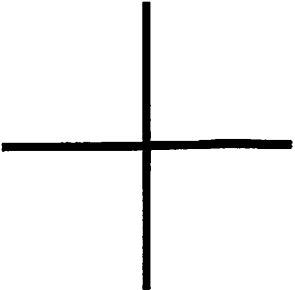
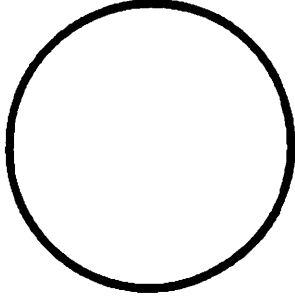


BNL \_\_\_\_\_ ----- Refer – for evaluation, rescreen BNL.

A. Child's Name \_\_\_\_\_ Screening Date \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ School/Program \_\_\_\_\_  
 Parents/Guardian \_\_\_\_\_ Birth Date \_\_\_\_\_ Teacher \_\_\_\_\_  
 Address \_\_\_\_\_ Age \_\_\_\_\_ Examiner \_\_\_\_\_

B. Core Assessments			C. Scoring		
Page	Domain	Directions: Assessments may be administered in any order. For each assessment, start with the first item and proceed in order. Give credit for a skill by circling the item number. ①. For a skill not demonstrated (an incorrect response), slash through the item number. /.	Discontinue	# Correct x Point Value for Each	Child's Score
3	Academic/Cognitive	<b>1A Knows Personal Information</b> Knows: 1. First name 2. Last name 3. Age	Administer all items.	___ x 1	___ / 3
4	Language Development	<b>2A Identifies Colors</b> Points to: 1. red 2. blue 3. green 4. yellow 5. orange	Stop after 3 incorrect responses in a row.	___ x 2	___ / 10
5	Language Development	<b>3A Identifies Pictures by Naming</b> Names: 1. boat 2. scissors 3. kite 4. wagon 5. ladder 6. fish	Stop after 3 incorrect responses in a row.	___ x 1	___ / 12
6	Language Development	<b>4A Knows Uses of Objects</b> Knows use of: 1. book 2. scissors 3. stove 4. pencil	Administer all items.	___ x 3	___ / 12
7	Physical Development	<b>5A Visual Motor Skills</b> Draws: 1. a vertical line 2. a horizontal line 3. a circle 4. a plus sign	Stop after 3 skills not demonstrated in a row.	___ x 3	___ / 12
9	Academic/Cognitive	<b>6A Understands Number Concepts</b> Understands: 1. two 2. three 3. five	Administer all items.	___ x 3	___ / 9
10	Physical Development	<b>7A Builds Tower with Blocks</b> Builds a tower with: 1. six blocks 2. seven blocks 3. eight blocks 4. nine blocks 5. ten blocks	Stop after 2 attempts.	___ x 2	___ / 10
11	Physical Development	<b>8A Gross Motor Skills</b> 1. stands on one foot for five seconds 2. Stands on other foot for five seconds 3. Walks forward heel-to-toe four steps	Administer all items.	___ x 3	___ / 9
13	Language Development	<b>9A Identifies Parts of the Body</b> Points to: 1. stomach 2. neck 3. back 4. knees 5. thumbs 6. fingernails	Stop after 3 incorrect responses in a row	___ x 1	___ / 6
14	Academic/Cognitive	<b>10A Repeats Sentences</b> Repeats sentences of: 1. four syllables 2. six syllables 3. eight syllables	Stop after incorrect responses for both a and b for a single item.	___ x 3	___ / 9
15	Language Development	<b>11A Uses Prepositions and Irregular Plural Nouns</b> Uses: 1. prepositions 2. Irregular plural nouns	Administer both items.	___ x 4	___ / 8

Total Score = \_\_\_ / 100

D. Notes/Observations: _____	E. Next Steps	✓ One	Score	Cutoff	Total Score	Outcome
		<input type="checkbox"/>	ANL/WNL	_____	-----	Pass – No further evaluation needed
<input type="checkbox"/>	BNL	_____	>= 20	Rescreen – within 30 calendar days		
<input type="checkbox"/>	BNL	_____	< 20	Observation – Needed to determine Observation date ____/____/____		
<input type="checkbox"/>	BNL	_____	-----	Observation outcome: <input type="checkbox"/> Rescreen w/in 30 cal. days <input type="checkbox"/> Refer for evaluation		
<input type="checkbox"/>	BNL	_____	-----	Refer – for evaluation, rescreen BNL		

 <p>4.</p>	 <p>3.</p>	 <p>2.</p>	 <p>1.</p>
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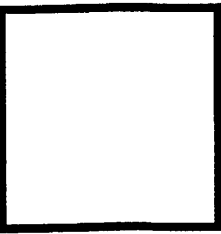
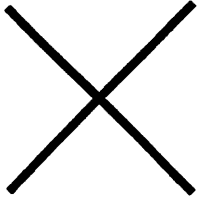
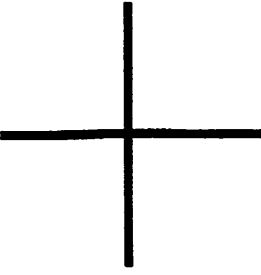
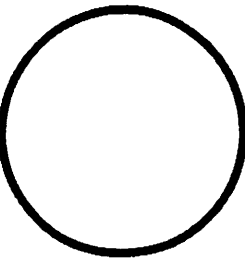
A. Child's Name \_\_\_\_\_ Screening Date \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ School/Program \_\_\_\_\_  
 Parents/Guardian \_\_\_\_\_ Birth Date \_\_\_\_\_ Teacher \_\_\_\_\_  
 Address \_\_\_\_\_ Age \_\_\_\_\_ Examiner \_\_\_\_\_

B. Core Assessments			C. Scoring		
Page	Domain	Directions: Assessments may be administered in any order. For each assessment, start with the first item and proceed in order. Give credit for a skill by circling the item number. ① For a skill not demonstrated (an incorrect response), slash through the item number. /	Discontinue	# Correct x Point Value for Each	Child's Score
19	Academic/Cognitive	<b>1B Knows Personal Information</b> Knows: 1. First name 2. Last name 3. Age 4. Street address	Stop after 3 incorrect responses in a row.	___ x 2.5	___ /10
20	Language Development	<b>2B Names Colors</b> Names: 1. blue 2. green 3. yellow 4. red 5. orange 6. pink 7. black 8. purple 9. white 10. brown	Stop after 3 incorrect responses in a row.	___ x 1	___ /10
22	Language Development	<b>3B Identifies Pictures by Naming</b> Names: 1. scissors 2. duck 3. snake 4. wagon 5. ladder 6. leaf 7. owl 8. nail	Stop after 3 incorrect responses in a row.	___ x 1	___ / 8
23	Academic/Cognitive	<b>4B Visual Discrimination—Forms and Uppercase Letters</b> 1. ○ 2. □ 3. ○ 4. ○ 5. > 6. O 7. I 8. P 9. V 10. X	Stop after 5 incorrect responses in a row	___ x 1	___ /10
24	Physical Development	<b>5B Visual Motor Skills</b> Draws: 1. a circle 2. a plus sign 3. an X 4. a square 5. a rectangle	Stop after 3 skills not demonstrated in a row.	___ x 2	___ /10
26	Physical Development	<b>6B Gross Motor Skills</b> 1. Walks forward heel-to-toe five steps 2. Hops five hops on preferred foot 3. Hops five hops on other foot 4. Stands on one foot for ten seconds 5. Stands on other foot for ten seconds	Administer all items.	___ x 1	___ / 5
28	Language Development	<b>7B Names Parts of the Body</b> Names: 1. stomach 2. neck 3. back 4. knees 5. thumbs 6. fingernails	Stop after 3 incorrect responses in a row	___ x 2	___ /12
29	Language Development	<b>8B Follows Verbal Direction</b> Follows: 1. two-step directions 2. three-step directions	Stop after 2 incorrect responses for 1 item.	___ x 4	___ / 8
31	Academic/Cognitive	<b>9B Counts by Rote</b> Counts to: 1 2 3 4 5 6 7 8 9 10	Stop after first error.	___ x .5	___ / 5
32	Academic/Cognitive	<b>10B Recognizes Quantities</b> Recognizes and names quantities of: 1. three 2. five 3. eight	Stop after 2 incorrect responses.	___ x 4	___ /12
33	Language Development	<b>11B Verbal Fluency and Articulation</b> 1. Uses sentences of at least three words 2. At least 90% of speech is intelligible	Administer both items.	___ x 5	___ /10

Total Score = \_\_\_ /100

D. Notes/Observations: _____	E. Next Steps	✓ One	Score	Cutoff	Total Score	Outcome
		<input type="checkbox"/>	ANL/WNL	_____	_____	_____
<input type="checkbox"/>	BNL	_____	_____	>= 20	Rescreen – within 30 calendar days	
<input type="checkbox"/>	BNL	_____	_____	< 20	Observation – Needed to determine Observation date ____/____/____ Observation outcome: <input type="checkbox"/> Rescreen w/in 30 cal. days <input type="checkbox"/> Refer for evaluation	
<input type="checkbox"/>	BNL	_____	_____	_____	Refer – for evaluation, rescreen BNL	



				
5.	4.	3.	2.	1.

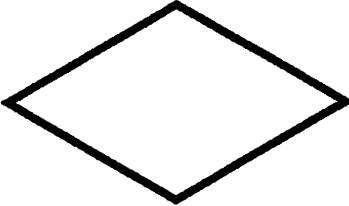
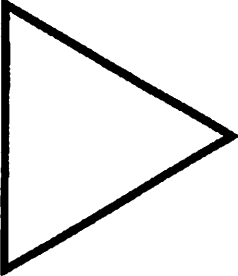
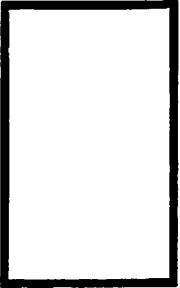
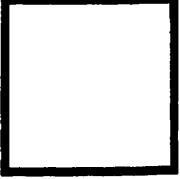
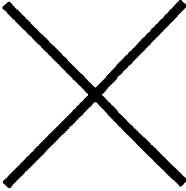
A. Child's Name \_\_\_\_\_ Screening Date \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ School/Program \_\_\_\_\_  
 Parents/Guardian \_\_\_\_\_ Birth Date \_\_\_\_\_ Teacher \_\_\_\_\_  
 Address \_\_\_\_\_ Age \_\_\_\_\_ Examiner \_\_\_\_\_

B. Core Assessments		C. Scoring			
Page	Domain	Directions: Assessments may be administered in any order. For each assessment, start with the first item and proceed in order. Give credit for a skill by <b>circling</b> the item number. (1) For a skill not demonstrated (an incorrect response), <b>slash through</b> the item number. /	Discontinue	# Correct x Point Value for Each	Child's Score
38	Academic/Cognitive	<b>1C Knows Personal Information</b> Knows: 1. first name 2. last name 3. age 4. birthday (month and day) 5. telephone number 6. street address	Stop after 3 incorrect responses in a row.	___ x 1.5	___ /9
40	Language Development	<b>2C Names Parts of the Body</b> Names: 1. thumbs 2. fingernails 3. chin 4. chest 5. elbows 6. shoulders	Stop after 3 incorrect responses in a row.	___ x 1	___ /6
41	Physical Development	<b>3C Gross Motor Skills</b> 1. Stands on 1 foot for 10 seconds 2. Stands on other foot for 10 seconds 3. Stands on 1 foot for 1 second with eyes closed 4. Stands on other foot for 1 second with eyes closed 5. Walks backwards toe-to-heel 4 steps	Stop after 3 skills not demonstrated in a row.	___ x 1	___ /5
43	Physical Development	<b>4C Visual Motor Skills</b> Draws: 1. an X 2. a square 3. a rectangle 4. a triangle 5. a diamond	Stop after 3 skills not demonstrated in a row.	___ x 1.5	___ /7.5
45	Physical Development	<b>5C Prints Personal Information</b> Prints: 1. first name 2. last name	Administer both items.	___ x 3	___ /6
47	Academic/Cognitive: Literacy	<b>6C Recites Alphabet (Count each group of letters recited correctly as one correct.)</b> a b c d e f g h i j k l m n o p q r s t u v w x y z	Stop after the first error.	___ x 1	___ /5
48	Academic/Cognitive: Mathematics	<b>7C Sorts Objects (by Size, Color, Shape)</b> Sorts by: 1. size and color 2. size and shape	Administer both items.	___ x 3	___ /6
49	Academic/Cognitive: Mathematics	<b>8C Counts by Rote (Count each group of ten numbers recited correctly as one correct.)</b> Counts to: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Stop after the first error.	___ x 3	___ /9
50	Academic/Cognitive: Mathematics	<b>9C Matches Quantities with Numerals</b> Matches quantity with numeral for: 1. 2 2. 4 3. 3 4. 8 5. 6	Stop after 2 incorrect responses in a row.	___ x 2	___ /10
51	Academic/Cognitive: Mathematics	<b>10C Determines Total of Two Sets</b> Counts two groups of objects for a sum up to ten: 1. 1 dot + 2 dots = 3 dots 2. 4 dots + 2 dots = 6 dots 3. 5 stars + 5 stars = 10 stars	Administer all items.	___ x 3	___ /9
52	Academic/Cognitive: Literacy	<b>11C Reads Uppercase Letters</b> O A X E B S C Z D L R T M P W K F N H I Y G U V J Q	Give credit for only one assessment - Reads Uppercase Letters OR Reads Lowercase Letters.	Stop after 3 incorrect responses in a row.	___ x 0.5  OR ___ x 0.5
53		<b>11C Alternate - Reads Lowercase Letters</b> o s x c z m p w e a i k y r t v n f u j g l b d q			
54	Academic/ Cognitive: Literacy	<b>12C Experience with Books and Text</b> 1. Knows front and back of a book 2. Understands that text progresses from top to bottom 3. Understands that text progresses from left to right	Administer all items.	___ x 1.5	___ /4.5
56	Language Development	<b>13C Verbal Fluency and Articulation</b> 1. Uses sentences of at least five words 2. At least 90% of speech intelligible	Administer both items.	___ x 5	___ /10

Total Score = \_\_\_ /100

D. Notes/Observations: _____ _____ _____ _____	E. Next Steps	<input checked="" type="checkbox"/> One	Score	Cutoff	Total Score	Outcome
		<input type="checkbox"/>	ANL/WNL	_____	_____	Pass - No further evaluation needed
		<input type="checkbox"/>	BNL	_____	>= 20	Rescreen - within 30 calendar days
		<input type="checkbox"/>	BNL	_____	< 20	Observation - Needed to determine Observation date ____/____/____
		<input type="checkbox"/>	BNL	_____	_____	Observation outcome: <input type="checkbox"/> Rescreen w/in 30 cal. days <input type="checkbox"/> Refer for evaluation
		<input type="checkbox"/>	BNL	_____	_____	Refer - for evaluation, rescreen BNL



 <p>5.</p>	 <p>4.</p>	 <p>3.</p>	 <p>2.</p>	 <p>1.</p>
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Developmental Screen Tracking

Site/classroom \_\_\_\_\_

Staff \_\_\_\_\_

(Put an \* in front of PreK names and place at the bottom of the list)

Child Name	Scale Age	Screen Date	Score	Cut off	Level	Rescreen needed	Observation needed
1.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
2.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
3.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
4.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
5.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
6.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
7.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
8.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
9.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
10.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
11.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
12.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
13.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
14.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
15.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
16.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
17.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
18.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
19.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
20.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>

Notes/observations: \_\_\_\_\_

Developmental Screen Tracking

Site/classroom \_\_\_\_\_

Staff \_\_\_\_\_

(Put an \* in front of PreK names and place at the bottom of the list)

Child Name	Scale Age	Screen Date	Score	Cut off	Level	Rescreen needed	Observation needed
1.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
2.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
3.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
4.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
5.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
6.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
7.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
8.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
9.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
10.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
11.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
12.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
13.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
14.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
15.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
16.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
17.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
18.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
19.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>
20.					<input type="checkbox"/> ANL <input type="checkbox"/> WNL <input type="checkbox"/> BNL	<input type="checkbox"/>	<input type="checkbox"/>

Notes/observations: \_\_\_\_\_

<b>Performance Standard</b>	Program Operations Education and Child Development	<b>Head Start &amp; Early Head Start Policies and Procedures</b> <i>Eastern Panhandle Instructional Cooperative</i> <b>EPIC</b> <small>Serving the educational needs of the entire community</small>
<b>Subpart</b>	§ 1302.33, § 1302.45 Child Screenings and Assessments	
<b>Effective Date</b>	07/2023	
<b>Revised Date</b>	07/2023	
<b>Reviewed Date</b>	05/2024	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Self-Help/Social Emotional Screening

**Policy:** Within 45 Calendar days after the child first attends the program, EPIC Head Start will conduct research-based standardized developmental screening in the areas of behavioral, motor, language, social-emotional, and cognitive development in collaboration with each child's parent/guardian.

**Procedure:**

1. Teaching Staff will use the Brigance Head Start Screen III (3-5 years) which includes Self-help and Social Emotional Scales that cover age-appropriate skills across key early learning domains including behavior, self-help, and social emotional.
    - a. Thoroughly read the Teacher Report and Scoring Form Instructions under the Self-help/Social Emotional Scales tab in the Brigance Head Start Screen III Manual.
    - b. Conduct the screening in English and the home language, when possible, if the child speaks a language other than English.
    - c. **After you have observed the child for at least 15-30 days**, complete the Teacher Report and Scoring Form-Self-help and Social Emotional Scales. (Refer to example of completed report and scoring form as needed.)
      - Complete Top Section prior to starting the screening.
      - Complete the Self-Help (A-C) and Social Emotional (D-G) Scales. Read each item and circle the response that best reflects your opinion of the child's skill level or behavior and enter the response value in the space provided to the right of the item. **If a skill or behavior has not be observed in the classroom, discuss with, and record the parents' response.**
      - Calculate the score after the screening is complete:
        - i. Total points for each skill (A-G) and enter in the corresponding Total area.
        - ii. Total points for all Self-Help skills (A-C) and enter in the Self-Help Total area. Repeat for all Social Emotional Skills (D-G).
      - Compare each Total Score using the "Self-Help Scale" and the "Social Emotional Scale" and notate the following:
        - i. "AA (Above Average) or "A" (Average) or "BA" (Below Average)
        - ii. Outcome: "Pass"-The child has a score either above average or average. No further evaluation is needed at this time.  
or "Rescreen"-The child has a score below average will be rescreened within in 30 calendar days.  
Or "Refer"-The child has been rescreened and the rescreen was below average.
2. Teaching staff will document the self-help and social/emotional screening by completing the following.
  - a. Document results on the **Self-Help/Social Emotional Screen Tracking Form**. Send a copy to your manager when all children have been screened.
  - b. Scan copy to your manager, place the original in the child's file, and update the Screening Summary.

- c. Discuss the screening results with the parent/guardian at each Parent Conference or sooner if a referral is needed.
3. Teaching staff will complete rescreen **within 30 calendar days of the original screening date** and submit a Self-Help/Social emotional Referral to the CD Manager, if the rescreen was below. A Child/Family Support plan will be developed if needed.
4. If teachers and parents continue to have concerns about the child's behavioral or social emotional needs, he/she maybe referred for further testing to Local Education Agency (LEA or appropriate agency for a formal evaluation to access the child's eligibility under IDEA as soon as possible.

#### **Monitoring & Reporting:**

1. **Dissemination of Policies & Procedures** will be made available to all employees through EPIC's website [www.epicresa8.org](http://www.epicresa8.org) . EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.
2. **Training** will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the **Manager Monitor Log** to monitor the implementation of policies and procedures.
4. CD Manager will document and review screening results in the Screening and Disabilities Tracking and Go engage to ensure compliance.
5. CD Manger will follow up and document the social emotional referral process within 30 days and as needed.

# Example of a Completed Teacher Report and Scoring Form— Self-help and Social-Emotional Scales

Child's Name <u>Hanna Sorenson</u> Parents/Caregivers <u>Alice Sorenson</u>	Date of Screening <u>2013</u> <u>9</u> <u>12</u> Birth Date <u>2009</u> <u>7</u> <u>7</u> Age <u>4</u> <u>2</u> <u>5</u>	School/Program <u>Hammond School</u> Teacher <u>Jennifer Woods</u> Examiner <u>Sarah Goodale</u>
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Directions: Read each item and circle the response or description that best reflects the child's behavior or skill level.

SELF-HELP SKILLS			
<b>A. Eating Skills</b>			
1.	Does _____ use a spoon? If yes, does _____ place the spoon in his/her mouth without turning the spoon upside down, with little or no spilling of food?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
2.	Does _____ use the side of the fork for cutting soft food, such as a piece of baked potato or a piece of cake?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
3.	Does _____ hold a fork in his/her fingers, not in his/her fist?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
<b>Total for A. Eating Skills <u>3</u> / 3</b>			
<b>B. Dressing Skills</b>			
4.	Does _____ put on his/her shoes? Criteria: Buckling, tying, or Velcro® fastening is not required for credit.	No = 0	Yes (sometimes on wrong feet) = 1
			Yes (each shoe on correct foot 90% of the time) = 2
			<input checked="" type="radio"/> 1 / 2
5.	Does _____ dress himself/herself unsupervised?	Rarely/No = 0	Sometimes = 0
			<input checked="" type="radio"/> Most of the time, except for help with difficult fasteners = 1
	Yes (completely dresses himself/herself, putting all clothes on correctly and fastening all fasteners) = 2		Yes (completely dresses himself/herself, including tying shoelaces and fastening all fasteners) = 3
			<input checked="" type="radio"/> 1 / 3
6.	Does _____ put on his/her socks?	Rarely/No = 0	Sometimes = 0
			<input checked="" type="radio"/> Most of the time = 1
			<u>1</u> / 1
<b>Total for B. Dressing Skills <u>3</u> / 6</b>			

<b>C. Toileting Skills</b>			
7.	Does _____ get on the toilet or potty by himself/herself (even if he/she needs help with clothing)?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
8.	Does _____ have bowel movements ("poop") in the toilet or potty (no more than one accident a week)?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
9.	Does _____ urinate ("pee") in the toilet or potty (no more than one accident a week)?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
10.	Does _____ attempt to wipe himself/herself after toileting?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	
	OR (Answer only the more appropriate of these two questions.)		
	Does _____ wipe himself/herself independently after toileting?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 2	<u>2</u> / 2
11.	Does _____ take care of his/her toileting needs?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Yes (flushing the toilet most of the time after using it) = 1	<input type="radio"/> Yes (flushing the toilet and washing and drying his/her hands most of the time) = 2
			<u>1</u> / 2
12.	Does _____ go to the bathroom on his/her own without being asked or reminded?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	<u>1</u> / 1
<b>Total for C. Toileting Skills <u>7</u> / 8</b>			
<b>TOTAL FOR SELF-HELP</b> (A. Eating Skills, B. Dressing Skills, C. Toileting Skills)			<b><u>13</u> / 17</b>

# Example of a Completed Teacher Report and Scoring Form— Self-help and Social-Emotional Scales (continued)

SOCIAL AND EMOTIONAL SKILLS			
<b>D. Relationships with Adults</b>			
13.	Does _____ respond with feelings of pride and enthusiasm when he/she earns positive feedback?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
14.	Does _____ look forward to sharing his/her feelings with you when he/she is happy?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
15.	Does _____ enjoy sharing information with you about himself/herself, such as things he/she likes, names of his/her family members or pets, or what he/she did over the weekend?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
16.	Does _____ share his/her thoughts and ideas with you?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
<b>Total for D. Relationships with Adults</b> 2 / 4			
<b>E. Play and Relationships with Peers</b>			
17.	Does _____ have several friends but one who is a special or best friend?	No = 0	Yes = 1
		<input type="radio"/> Yes = 1	1 / 1
18.	Does _____ have a best friend with whom he/she is close and who reciprocates by coming over for play dates or extending an invitation to a party?	No = 0	Yes = 1
		<input type="radio"/> Yes = 1	1 / 1
19.	Does _____ play cooperatively in a large-group game, such as duck-duck-goose, tag, or kickball?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
20.	Does _____ give verbal directions or incorporate verbal directions into play activities?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
<b>Total for E. Play and Relationships with Peers</b> 2 / 4			

<b>F. Motivation and Self-Confidence</b>			
21.	Does _____ maintain interest when engaged in a small-group activity or project?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
22.	Does _____ show that he/she likes to finish what he/she starts, perhaps by dawdling less than at an earlier age?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
23.	Does _____ approach new tasks with confidence and a "can-do" attitude?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
24.	Does _____ remain focused on what he/she has been asked to do even when there are minor distractions, such as a car making noise outside or someone tapping a pencil?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
<b>Total for F. Motivation and Self-Confidence</b> 3 / 4			
<b>G. Prosocial Skills and Behaviors</b>			
25.	If supervised by an adult, does _____ take turns without undue objection?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
26.	Does _____ understand or accept the need to share and take turns, perhaps willingly taking turns even if he/she isn't asked to?	Rarely/No = 0	Sometimes = 0
		<input type="radio"/> Most of the time = 1	0 / 1
27.	Does _____ ask an adult for permission before using things that belong to others or before engaging in an activity that may be restricted, such as going to the bathroom or leaving the classroom?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
28.	Does _____ react to a disappointment or failure in an acceptable manner by being a good sport and refraining from shouting or getting upset?	Rarely/No = 0	Sometimes = 0
		<input checked="" type="radio"/> Most of the time = 1	1 / 1
<b>Total for G. Prosocial Skills and Behaviors</b> 3 / 4			
<b>TOTAL FOR SOCIAL-EMOTIONAL</b>			
(D. Relationships with Adults, E. Play and Relationships with Peers, F. Motivation and Self-Confidence, and G. Prosocial Skills and Behaviors)			
			10 / 16

# Teacher Report and Scoring Form—Self-help and Social-Emotional Scales

	Year	Month	Day	
Child's Name _____	Date of Screening _____	_____	_____	School/Program _____
Parent(s)/Caregiver(s) _____	Birth Date _____	_____	_____	Teacher _____
	Age _____	_____	_____	Examiner _____

**Directions:** Read each item and circle the response or description that best reflects the child's skill level.

SELF-HELP SKILLS			
<b>A. Eating Skills</b>			
1.	Does _____ use a spoon? If yes, does _____ place the spoon in his/her mouth without turning the spoon upside down, with little or no spilling of food?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
2.	Does _____ use the side of the fork for cutting soft food, such as a piece of baked potato or a piece of cake?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
3.	Does _____ hold a fork in his/her fingers, not in his/her fist?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
<b>Total for A. Eating Skills</b> ___ / 3			
<b>B. Dressing Skills</b>			
4.	Does _____ put on his/her shoes? <b>Criteria:</b> Buckling, tying, or Velcro® fastening is not required for credit.	No = 0	Yes (sometimes on wrong feet) = 1
		Yes (each shoe on correct foot 90% of the time) = 2	___ / 2
5.	Does _____ dress himself/herself unsupervised?	Rarely/No = 0	Sometimes = 0
		Most of the time, except for help with difficult fasteners = 1	
	Yes (completely dresses himself/herself, putting all clothes on correctly and fastening all fasteners) = 2	Yes (completely dresses himself/herself, including tying shoelaces and fastening all fasteners) = 3	
			___ / 3
6.	Does _____ put on his/her socks?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
<b>Total for B. Dressing Skills</b> ___ / 6			

<b>C. Toileting Skills</b>			
7.	Does _____ get on the toilet or potty by himself/herself (even if he/she needs help with clothing)?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
8.	Does _____ have bowel movements ("poop") in the toilet or potty (no more than one accident a week)?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
9.	Does _____ urinate ("pee") in the toilet or potty (no more than one accident a week)?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
10.	Does _____ attempt to wipe himself/herself after toileting?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	
	<i>OR (Answer only the more appropriate of these two questions.)</i>		
	Does _____ wipe himself/herself independently after toileting?	Rarely/No = 0	Sometimes = 0
		Most of the time = 2	___ / 2
11.	Does _____ take care of his/her toileting needs?	Rarely/No = 0	Sometimes = 0
		Yes (flushing the toilet most of the time after using it) = 1	Yes (flushing the toilet and washing and drying his/her hands most of the time) = 2
			___ / 2
12.	Does _____ go to the bathroom on his/her own without being asked or reminded?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___ / 1
<b>Total for C. Toileting Skills</b> ___ / 8			
<b>TOTAL FOR SELF-HELP</b>			
(A. Eating Skills, B. Dressing Skills, C. Toileting Skills) ___ / 17			

AA    A    BA



## Self-help and Social-Emotional Scales (continued)

SOCIAL AND EMOTIONAL SKILLS			
<b>D. Relationships with Adults</b>			
13.	Does _____ respond with feelings of pride and enthusiasm when he/she earns positive feedback?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
14.	Does _____ look forward to sharing his/her feelings with you when he/she is happy?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
15.	Does _____ enjoy sharing information with you about himself/herself, such as things he/she likes, names of his/her family members or pets, or what he/she did over the weekend?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
16.	Does _____ share his/her thoughts and ideas with you?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
<b>Total for D. Relationships with Adults</b> ___ / 4			

<b>E. Play and Relationships with Peers</b>			
17.	Does _____ have several friends but one who is a special or best friend?	No = 0	Yes = 1
			___/1
18.	Does _____ have a best friend with whom he/she is close and who reciprocates by coming over for play dates or extending an invitation to a party?	No = 0	Yes = 1
			___/1
19.	Does _____ play cooperatively in a large-group game, such as duck-duck-goose, tag, or kickball?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
20.	Does _____ give verbal directions or incorporate verbal directions into play activities?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
<b>Total for E. Play and Relationships with Peers</b> ___ / 4			

**Next Steps:**

	One	SH Score	SE Score	Outcome
<input type="checkbox"/>	AA or A	AA or A	Pass	No further evaluation needed
<input type="checkbox"/>	BA or BA	Rescreen		both scales within 30 calendar days
<input type="checkbox"/>	BA or BA	Refer		for observation, rescreen was BA

<b>F. Motivation and Self-Confidence</b>			
21.	Does _____ maintain interest when engaged in a small-group activity or project?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
22.	Does _____ show that he/she likes to finish what he/she starts, perhaps by dawdling less than at an earlier age?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
23.	Does _____ approach new tasks with confidence and a "can-do" attitude?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
24.	Does _____ remain focused on what he/she has been asked to do even when there are minor distractions, such as a car making noise outside or someone tapping a pencil?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
<b>Total for F. Motivation and Self-Confidence</b> ___ / 4			

<b>G. Prosocial Skills and Behaviors</b>			
25.	If supervised by an adult, does _____ take turns without undue objection?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
26.	Does _____ understand or accept the need to share and take turns, perhaps willingly taking turns even if he/she isn't asked to?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
27.	Does _____ ask an adult for permission before using things that belong to others or before engaging in an activity that may be restricted, such as going to the bathroom or leaving the classroom?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
28.	Does _____ react to a disappointment or failure in an acceptable manner by being a good sport and refraining from shouting or getting upset?	Rarely/No = 0	Sometimes = 0
		Most of the time = 1	___/1
<b>Total for G. Prosocial Skills and Behaviors</b> ___ / 4			

<b>TOTAL FOR SOCIAL-EMOTIONAL</b>			
(D. Relationships with Adults, E. Play and Relationships with Peers, F. Motivation and Self-Confidence, and G. Prosocial Skills and Behaviors)			
			___ / 16

AA   
  A   
  BA

Self-Help/Social Emotional Screen Tracking

Site/classroom \_\_\_\_\_

Staff \_\_\_\_\_

(Put an \* in front of PreK names and place at the bottom of the list)

Child Name	Scale Age	Screen Date mm.dd.yy	Self-Help Score	SH Level	Social/ Emotional Score	SE Level	Rescreen Needed
1.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
2.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
3.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
4.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
5.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
6.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
7.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
8.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
9.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
10.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
11.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
12.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
13.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
14.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
15.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
16.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
17.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
18.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
19.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>
20.				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA	<input type="checkbox"/>

Notes/observations: \_\_\_\_\_



Self-Help/Social Emotional Referral

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Site/Classroom \_\_\_\_\_ Staff \_\_\_\_\_

Screening History

Screening Attempt	Screen Date mm.dd.yy	Age at Screening	Self-Help Score	SH Level	Social / Emotional Score	SE Level
Initial				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA
Rescreen				<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA		<input type="checkbox"/> AA <input type="checkbox"/> A <input type="checkbox"/> BA

No further documentation necessary. Self-help rescreen score IS NOT below average. Social/Emotional rescreen score IS below average, and MH Services are being provided. Skip question 1-5, sign, date, and submit to CD Manager.

1. What are you experiencing in the classroom? \_\_\_\_\_

2. What are the parents reporting about similar situations at home? \_\_\_\_\_

3. Does the child have any of the following? MH Referral Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
IEP/EP Referral Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Disability \_\_\_\_\_  
None

4. What interventions or accommodations have you implemented and are they working? How long? \_\_\_\_\_

5. What additional supports or resources are needed? \_\_\_\_\_

Please sign, date, and scan this referral form to the CD Manager for review. The CD Manager will determine next steps and document plan on the Child/Family Support Plan.

Staff Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**EPIC Early Head Start / Head Start / Pre-K**

**Child / Family Support Plan**

Child: \_\_\_\_\_

Program: EHS

HS

Pre-K

Date Developed: \_\_\_\_\_

Date Implemented: \_\_\_\_\_

Behavior	Intervention

Comments:

Team Members:

_____	_____
_____	_____
_____	_____

<b>Performance Standard</b>	Program Operations Education and Child Development	<b>Head Start</b> <b>Policies and Procedures</b> <i>Eastern Panhandle</i> <i>Instructional Cooperative</i> <b>EPIC</b> <i>Serving the educational needs</i> <i>of the entire community</i>
<b>Subpart</b>	§ 1302.33 Child Screenings and Assessments	
<b>Effective Date</b>	07/2021	
<b>Revised Date</b>	07/2021	
<b>Reviewed Date</b>	07/2021	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Assessment for Individualization

**Policy:** Within 90 calendar days after the child first attends the program, EPIC Head Start will conduct an assessment in the areas of behavior, motor, language, social-emotional, and cognitive development for all enrolled in collaboration with each child's parent/guardian.

**Procedure:**

1. **Anecdotal Notes:** The teaching staff documents and records children's daily behavior and ongoing progress to plan and implement lessons.
  - a. **Each staff person will collect a minimum of 10 intentional and focused observations weekly, including the following:**
    - Type of the activity (i.e., Small Group (SG), Large Group (LG), Choice Time (CT), etc.)
    - Description, including location and material (i.e., Dramatic Play/baby dolls, Art/scissors, Discovery/microscope etc.)
    - Dictation (i.e., the child's words, if any)
    - Head Start Early Learning Outcomes Framework (HSELOF) Domain, Sub-Domain, Goal (i.e., Literacy/Writing/P-LIT 6 Writes for a variety of purposes, etc.)
    - Evidence (i.e., work samples, language samples, and photos of child's projects and interactions, etc.)
  - b. The teaching staff uses this information to gather and document information on the children's developmental progress.
  - c. The teaching staff summarize notes taken by Domain, Sub-Domain, Goal, etc. to ensure all areas are being documented.
2. **Developmental Assessment:** The WVDE Early Learning Reporting System (ELRS) is the program assessment tool. The teaching staff will review child's anecdotal notes and school readiness goals and input individual developmental progress for each child that has been in the program for at least 2 weeks of the closing of the current reporting window. In addition, the Child Outcomes Summary (COS) will be entered for each child with an active IEP.
  - a. Reporting windows occur three times a year (Fall, Winter, Spring) following the established WVDE Formative Assessment Calendar.
  - b. Enter data in the Mathematics/Science, Social Emotional/Social Studies, Language Arts/Literacy, and Physical Health/Development ELRS domains and in myHeadStart using the Crosswalk mapping for Creative Curriculum objections, ELRS clusters and HSELOF goals.
  - c. At Home Visits and Parent Conferences, review the ELRS Family Report and the School Readiness Individualization Plan to set goals and next steps with family input. Send final reports home prior to the end of the school year.

<p><b>Monitoring &amp; Reporting:</b></p> <ol style="list-style-type: none"> <li>1. <b>Dissemination of Policies &amp; Procedures</b> will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.</li> <li>2. <b>Training</b> will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.</li> <li>3. CD Managers and/or CD Specialist will conduct the <u>Manager Monitor Log</u> to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Weekly lesson plan, newsletter, and anecdotal documentation (submitted on Teaching Strategies and posted in the classroom), Early Learning Reporting System (ELRS), School Readiness Individualized Learning Plan, and myHeadStart data. <b>Section Page 10</b></li> <li>4. Managers and/or CD Specialist will monitor completion of observations, reporting period data entry, developmental assessments in ELRS and myHeadStart.</li> </ol>
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<b>Performance Standard</b>	Program Operations Education and Child Development	<p align="center"><b>Head Start Policies and Procedures</b></p> <p align="center"><i>Eastern Panhandle Instructional Cooperative</i></p> <p align="center"><b>EPIC</b></p> <p align="center"><small>Serving the educational needs of the entire community</small></p>
<b>Subpart</b>	§ 1302.33 Child Screenings and Assessments	
<b>Effective Date</b>	07/2021	
<b>Revised Date</b>	07/2021	
<b>Reviewed Date</b>	07/2021	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** School Readiness Individualized Learning Plan

**Policy:** Within 30 days of enrollment, EPIC Head Start will establish a School Readiness Individualized Learning Plan for each child enrolled in the program. The goals will be directly related to the program's established School Readiness Goals and the Head Start Early Learning Outcomes Framework (HSELOF). They are intended to measure each child progress toward these specific goals throughout the enrollment in the program.

**Procedure:**

1. The Teaching Staff will collaborate with parents in conjunction with each Early Learning Reporting System (ELRS) checkpoint, which will occur three times per year. The teaching staff and parent will sign each time goals are established or updated, at each point of review. The only exception will be for the final review, for which a copy of the plan will be sent home to the parent at the close of the school year.
  - a. Initial School Readiness Plan must be completed within 30 days of enrollment with the parent at the first home visit, if possible.
    - Using the program's School Readiness Goals and the HSELOF, discuss with the parent where they feel their child is currently functioning.
    - "Goals/Developmental Progression" column - For each domain/sub-domain listed, circle one goal the parent selects.
    - "Planned Activities" column - List three activities that will be done at home and in the classroom to help the child work toward achieving this goal.
    - "Progress" column - You will not mark anything in the "Progress" column at this point.
    - "Date Goals Established/Updated" column - Enter the date established. Parent and Staff signatures.
  - b. 1<sup>st</sup>/2<sup>nd</sup> Parent Conference
    - "Progress" column - Review the current School Readiness Plan with the parent, and mark whether the child is emerging, developing, or has achieved the goal. This will determine how you choose goals for the updated School Readiness Plan.
    - "Date Goals Reviewed" - Enter the date reviewed. Parent and Staff signatures.
    - New School Readiness Plan - Develop a new plan (starting with a new blank one) with the parent. The date on the updated plan should match the date on the plan that was reviewed. If the child's progress is emerging or developing for any goal, that goal should remain on the updated plan. If the child has achieved the goal, you should choose a new goal for that Domain/Sub-domain.
  - c. End of Year
    - "Progress" column - Review the current School Readiness Plan with the parent, and mark whether the child is emerging, developing, or has achieved the goal.
    - "Date Goals Reviewed" - Enter the date and sign. Write "copy sent home" in parent signature line. Make a copy to send home to the parents with the ELRS Family Report and file the original.
2. Include the planned activities listed on your lesson plan as individualized for each child and document progression in your anecdotal notes. Parent and Classroom planned activities corresponding with selected goal can be found in Teaching Strategies, Share Activities w/Family, Development and Learning Activities.

<p><b>Monitoring &amp; Reporting:</b></p> <ol style="list-style-type: none"> <li>1. Dissemination of Policies &amp; Procedures will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.</li> <li>2. Training will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.</li> <li>3. CD Managers and/or CD Specialist will conduct the <u>Manager Monitor Log</u> to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Weekly lesson plan, newsletter, and anecdotal documentation (submitted on Teaching Strategies and posted in the classroom), Early Learning Reporting System (ELRS), School Readiness Individualized Learning Plan, and myHeadStart data.</li> <li>4. Managers and/or CD Specialist will monitor completion of observations, reporting period data entry, developmental assessments in ELRS and myHeadStart.</li> </ol>
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School Readiness Individual Learning Plan

Child's Name _____	Site/Classroom _____	Staff _____	
Domain & Sub Domain	Goals/Developmental Progression	Planned Activities	Progress
Approaches to Learning / Social Emotional	<p><u>P-ATL1</u> Child manages emotions with increasing independence.</p> <p><u>P-ATL2</u> Child follows classroom rules and routines with increasing independence.</p> <p><u>P-ATL3</u> Child appropriately handles and takes care of classroom materials.</p> <p><u>P-ATL4</u> Child manages actions, words, and behavior with increasing independence.</p>		<input type="checkbox"/> Emerging <input type="checkbox"/> Developing <input type="checkbox"/> Achieved
Language & Literacy: Communication	<p><u>P-LC3</u> Child varies the amount of information provided to meet the demands of the situation.</p> <p><u>P-LC4</u> Child understands, follows, and uses appropriate social and conversational rules.</p> <p><u>P-LC5</u> Child expresses self in increasingly long, detailed, and sophisticated ways.</p>		<input type="checkbox"/> Emerging <input type="checkbox"/> Developing <input type="checkbox"/> Achieved
Cognition: Math, Scientific Reasoning	<p><u>P-Math8</u> Child understands addition as adding to and understands subtraction as taking away from.</p> <p><u>P-Math7</u> Child understand simple patterns.</p> <p><u>P-SCI4</u> Child asks a question, gathers information, and makes predictions.</p> <p><u>P-SCI5</u> Child plans &amp; conducts investigations &amp; experiments.</p> <p><u>P-SCI6</u> Child analyzes results, draws conclusions, and communicates results.</p>		<input type="checkbox"/> Emerging <input type="checkbox"/> Developing <input type="checkbox"/> Achieved
Perceptual, Motor and Physical Development	<p><u>P-PMP1</u> Child demonstrates control, strength, and coordination of large muscles.</p> <p><u>P-PMP2</u> Child uses perceptual information to guide motions &amp; interactions with objects &amp; other people.</p>		<input type="checkbox"/> Emerging <input type="checkbox"/> Developing <input type="checkbox"/> Achieved
(Optional area of choice)	Goals:		<input type="checkbox"/> Emerging <input type="checkbox"/> Developing <input type="checkbox"/> Achieved

Date Goals Established/Updated \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Goals Reviewed \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Staff Signature \_\_\_\_\_

Staff Signature \_\_\_\_\_

<b>Performance Standard</b>	Program Operations Education and Child Development	<b>Head Start Policies and Procedures</b> <i>Eastern Panhandle Instructional Cooperative</i> <b>EPIC</b> <i>Serving the educational needs of the entire community</i>
<b>Subpart</b>	§ 1302.34 Parent and family engagement in education & child development services	
<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	07/2022	
<b>Reviewed Date</b>	07/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Engaging Parents and Family Members

**Policy:** EPIC Head Start recognizes parents/guardians' roles as children's lifelong educators and will encourage parents to engage in their child's education.

**Procedure:**

1. Written Communication
  - a. Weekly Classroom/Monthly Tri County Newsletters: Including curricula/study, important dates, and information.
  - b. Monthly Speech & Language Calendar: Providing activities and vocabulary words for at home engagement.
  - c. Home Visit/Parent Conferences: Collaboration with parent/guardian to generate form at home visits and parent conferences.
  - d. Parent Board: Each classroom will have a parent board with important information. (i.e.: lesson plans, newsletters, etc.)
  - e. Communication Folder: Will be sent back and forth from class to home daily to promote home/school communication.
  - f. My Teaching Strategies: Resource Sharing and Messaging with parents/guardians.
  - g. Read to me Program: Family Literacy Pledge to read daily to their child for a certain number of minutes. Books are sent back and forth to/from school weekly, along with a journal.
2. Verbal Communication
  - a. Orientation: At the beginning of the year to engage parents in classroom environment and information.
  - b. Face to Face, Video, or Phone Conferences: Regularly address routines, activities, behaviors, attendance, and progress.
  - c. All pertinent information must be documented.
3. Educational Home Visits
  - a. Establish rapport with both the parents and the children, and to foster good home-school communication.
  - b. A minimum of up to two home visits per year for families enrolled is required and as needed.
4. Parent Conferences
  - a. Twice a year, provides opportunities to enhance knowledge and understanding of the developmental progress of children.
  - b. Provides time for parents to share their observations of their children, ask questions, discuss their expectations, or to express concerns.
  - c. Offers opportunities to identify ways to exceed the child's learning, both in the home and the school environment.
5. Parent and/or Advisory Committee
  - a. Family Advocates organize monthly meetings that provide families the opportunity to assist in the development of activities that address their interest and needs, nurture their child's development, and keep them linked to resources in their community.
6. Policy Council
  - a. Families can participate in a formal structure of shared program governance and decision-making process.
7. Volunteering
  - a. Family members are encouraged to participate in the program by volunteering in the classroom, on field trips and for special events.
  - b. Parents who are unable to volunteer in the classroom are encouraged to do activities at home for the staff or school readiness activities.
8. Parent Events
  - a. Family members are encouraged to participate in monthly program events as well as Back to School, Winter Fest, and End of Year Picnic.

**Monitoring & Reporting:**

1. Dissemination of Policies & Procedures will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.
2. Training will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the *Manager Monitor Log* to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Home Visit/Parent Conference, Home Visit/Parent Conference Confirmation, and Home Visit/Parent Conference Tracking forms, Parent Board, Teaching Strategies communications/shared resources.
4. CD Managers and/or CD Specialist will monitor end of month reporting and data input into myHeadStart.
5. CD Managers and/or CD Specialist will ensure Education staff participation at Parent Events, at minimum Back to School, Winter Fest, End of Year Picnic.



<b>Performance Standard</b>	Program Operations Education and Child Development	<p style="text-align: center;"><b>Head Start Policies and Procedures</b></p> <p style="text-align: center;"><i>Eastern Panhandle Instructional Cooperative</i></p> <p style="text-align: center;"><b>EPIC</b></p> <p style="text-align: center;"><small>Serving the educational needs of the entire community</small></p>
<b>Subpart</b>	§ 1302.34 Parent and family engagement in education & child development services	
<b>Effective Date</b>	07/2022	
<b>Revised Date</b>	04/2022	
<b>Reviewed Date</b>	04/2022	
<b>Responsibility</b>	Teaching Staff, CD Managers, CD Specialist, Director	

**Subject:** Home Visits/Parent Conferences

**Policy:** EPIC Head Start teaching staff will offer opportunities for parents and family members to engage in the program's education services and collaborate in the child's learning and development by conducting at least two home visits and two parent conferences per program year.

**Procedure:**

1. **Schedule** a minimum of two Home Visits (1.5 hours HS) and two Parent Conferences (30 minutes) for each child enrolled based on the Tri-County Program calendar time frames. Schedule additional home visits and/or conferences as needed. Staff may coordinate home visits with Family Advocates and/or other program staff. Home visits will be divided between teaching staff. Both teaching staff are responsible for completing home visits. Send your scheduled home visit calendar to your Manager.
  - a. Consider location/time options available to meet individual family's needs. Home Visits may take place at a site or another private location at the parent's request, or if a home visit presents significant safety hazards. Conferences will take place in the classroom.
  - b. Complete the first home visit prior to enrollment, if feasible. Mid-year enrollments should be completed within two weeks.
  - c. A minimum of three attempts will be made to meet with the parent regarding home visits/parent conferences. Notify manager when scheduling the third attempt.
  - d. Allow enough time for duration and travel in between visits and be on time.
2. **Plan** visits and conferences to address educational issues relevant to the child. Discuss progress thoroughly and obtain parent input.
  - a. Read the child's file prior, review any pertinent information, and ask follow-up questions (i.e., Is there a referral/IFSP/other services provided? Current Physical/Dental? Medical/Allergy Needs? Dual Language Learner/Accommodations? Other Follow Up?)
  - b. Build a partnership and reinforce the family as the child's first and primary teacher. The partnership focuses on school readiness.
  - c. Convey an enthusiastic professional, positive, and accepting attitude and attire.
  - d. Remember the conversation is still between you and the family member, even if using an interpreter. Sit near, but not between child/family.
  - e. Leave immediately, if at any time during a home visit you feel uncomfortable or unsafe.
  - f. Gather and review all forms prior and with the family. Discuss with the family how this information is used to support development of curriculum and individualization for their child and the assessment process.
3. **Document** each scheduling attempt, parent confirmation received, home visit and parent conference thoroughly. Leave nothing blank.
  - a. Once scheduled with the parent, send the Home Visit/Parent Conference Confirmation form to the parent to review, sign and return (except for the 1<sup>st</sup> HV, if the program year has not started). Once returned, notate follow-up needed and the date received. Send a reminder the day before the home visit/conference.
  - b. Prepare and review all the information on the Home Visit/Parent Conference form and complete it in its entirety, leaving nothing blank.
    - Notate each scheduling attempt/parent confirmation received on the bottom for tracking purposes.
    - Child's strengths/interests in the classroom may be completed prior, but other information will be added through parent discussion.
    - Document a parent-initiated location change directly on the form.
  - c. Place the completed forms in the appropriate Child Development section in the child's file.
  - d. Track home visits/conferences on the Home Visit/Parent Conference Tracking form and submit to your Manager monthly.

**Monitoring & Reporting:**

1. **Dissemination of Policies & Procedures** will be made available to all employees through the agency's website. EPIC Head Start will educate and train applicable Staff regarding the policy and any conduct that could constitute a violation of the policy.
2. **Training** will be provided to staff annually during pre-service; new staff receive training during orientation. Implementation of training is monitored during classroom observations conducted by Managers and Specialists; retraining is provided on an as needed basis.
3. CD Managers and/or CD Specialist will conduct the **Manager Monitor Log** to monitor the implementation of policies and procedures, including reviewing the following (completed by the teaching staff): Home Visit/Parent Conference, Home Visit/Parent Conference Confirmation, and Home Visit/Parent Conference Tracking forms.

# Home Visit

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Date \_\_\_\_\_

Item's Discussed (Check all that apply)  Beginning of the year paperwork  School Readiness individualized plan  
 Other \_\_\_\_\_

**1st Home visit (The following should be reviewed/completed at the 1st home visit unless noted otherwise)**

<input type="checkbox"/> Emergency Release <input type="checkbox"/> Parent Handbook/Contract <input type="checkbox"/> Internet Safety Permission <input type="checkbox"/> Emergency Relocation <input type="checkbox"/> Pesticide Notification <input type="checkbox"/> Attendance (All) <input type="checkbox"/> Family Advocate Role <input type="checkbox"/> Parent Meeting/Volunteering (All) <input type="checkbox"/> Policy Council Info & Nomination <input type="checkbox"/> Parent Interest Survey <input type="checkbox"/> In-Kind (current month only) (All) <input type="checkbox"/> Confidentiality/social media/photos	<input type="checkbox"/> Schedule/Class Time <input type="checkbox"/> Meals/Nutrition/Rest Time <input type="checkbox"/> Curriculum/Assessment (All) <input type="checkbox"/> ECPBIS (All) <input type="checkbox"/> Proper Dress/Change of Clothes <input type="checkbox"/> Communication (TS/Remind/Newsletters) <input type="checkbox"/> Family Literacy/Read to Me Program <input type="checkbox"/> Speech & Language Calendar <input type="checkbox"/> Disabilities <input type="checkbox"/> Field Trips <input type="checkbox"/> Home Visit (All) <input type="checkbox"/> School Readiness Learning Plan (All)	<input type="checkbox"/> Parent Interviews (1st/2nd HV) <input type="checkbox"/> Brigance Development <input type="checkbox"/> Physical, Dental, Immunizations (All) <input type="checkbox"/> Asthma, Allergy, Medication (All) <input type="checkbox"/> Birth History <input type="checkbox"/> Screening Permission <input type="checkbox"/> Nutrition <input type="checkbox"/> Lead Screening <input type="checkbox"/> Health- Illness, Lice, Medication <input type="checkbox"/> Transportation/Self-Transport <input type="checkbox"/> Inclement Weather
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**Child Activities**

Description of activity (social/emotional)		
<b>HSELOF</b> <input type="checkbox"/> Approaches to Learning <input type="checkbox"/> Social & Emotional <input type="checkbox"/> Language & Literacy <input type="checkbox"/> Cognition <input type="checkbox"/> Perceptual/motor/physical	<b>Child's response</b> <input type="checkbox"/> Participated <input type="checkbox"/> Not Interested <b>Child's Ability</b> <input type="checkbox"/> Independent <input type="checkbox"/> Completed with Guidance	<b>Comments:</b>
Description of activity (math/science)		
<b>HSELOF</b> <input type="checkbox"/> Approaches to Learning <input type="checkbox"/> Social & Emotional <input type="checkbox"/> Language & Literacy <input type="checkbox"/> Cognition <input type="checkbox"/> Perceptual/motor/physical	<b>Child's response</b> <input type="checkbox"/> Participated <input type="checkbox"/> Not Interested <b>Child's Ability</b> <input type="checkbox"/> Independent <input type="checkbox"/> Completed with Guidance	<b>Comments:</b>

Parent/Guardian Signature \_\_\_\_\_

Teacher's Signature \_\_\_\_\_

Parent Contact Tracking	Scheduled Date	Confirmed Date	Complete	Not Complete	Staff Initials
1st attempt	___/___/___	___/___/___	<input type="checkbox"/>	<input type="checkbox"/>	
2nd attempt	___/___/___	___/___/___	<input type="checkbox"/>	<input type="checkbox"/>	
3rd attempt	___/___/___	___/___/___	<input type="checkbox"/>	<input type="checkbox"/>	

**Parent Conference**

Child's name: \_\_\_\_\_ Date: \_\_\_\_\_

Teacher's name: \_\_\_\_\_

Parent/guardian attending:  Mother  Father  Other \_\_\_\_\_

ELRS reviewed  Screening Summary Reviewed  School Readiness Individualized Learning Plan

Heights/Weights  update emergency form  other \_\_\_\_\_

**Child's strengths**

**Individualized goals**

**Follow up or Comments**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Teacher Signature

Parent contact tracking	Scheduled date	Confirmed date	Complete	Not complete	Staff Initials
1 <sup>st</sup> attempt	___/___/___	___/___/___	___/___/___	<input type="checkbox"/>	
2 <sup>nd</sup> attempt	___/___/___	___/___/___	___/___/___	<input type="checkbox"/>	
3 <sup>rd</sup> attempt	___/___/___	___/___/___	___/___/___	<input type="checkbox"/>	



Parent Interview  
Initial

Child's Name \_\_\_\_\_ Site/Classroom \_\_\_\_\_

EPIC Head Start is committed to having parents involved in the education of their children. We would like to know your child's interests and what goals are important to you. Please answer the following questions to help us include your interests and cultural experiences when developing the lesson plans for your child's classroom.

1. Do you have any special interests, hobbies, or cultural activities that you would like to share with the other children in the classroom?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. What skills do you feel are important for your child to develop this year? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What are your child's strengths (skills they do well)? What subjects (animals, cars, cooking, etc.) are of special interest to your child?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Is there anything your child is afraid of or is anxious about? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Is your child's first learned or home language something other than English? If yes, what experiences or activities has your child had in your home language (trips, daily living, church, etc.)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. When your child wants to communicate, does he/she prefer one language over the other? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Is there anything else you would like to share with us about your child? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



Parent Interview  
Final

Child's Name \_\_\_\_\_ Site/Classroom \_\_\_\_\_

EPIC Head Start is committed to having parents involved in the education of their children. As the school year ends, we would like your feedback on your child's progress and your involvement in the classroom. Please answer the following so we can determine areas of strength and opportunities needing additional support and/or resources.

1. Were you able to share any special interests, hobbies, or cultural activities with the other children in the classroom?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Did you see improvement in the skills you identified as important the at the beginning of the school year? What progress did you see on the school readiness goals you chose? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Did we use your child's interests and build on their strengths? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Were you satisfied with your program experience? How can we improve? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Do you feel your cultural background was supported by the program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Is there anything else you would like to share with us about your child's experience in our program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



Home Visit/Parent Conference Tracking  
 Site/Classroom \_\_\_\_\_ Staff \_\_\_\_\_

Month/Year \_\_\_\_\_

(Put an \* in front of PreK names and place at bottom of the list)

Child Name	HV Date mm.dd.yy	Scheduled	Completed	Attended Fem./ Male	PC Date mm.dd.yy	Scheduled	Completed	Attended Fem./ Male
1.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
2.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
3.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
4.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
5.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
6.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
7.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
8.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
9.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
10.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
11.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
12.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
13.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
14.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
15.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
16.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
17.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
18.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
19.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/
20.		<input type="checkbox"/>	<input type="checkbox"/>	/		<input type="checkbox"/>	<input type="checkbox"/>	/