

Service Area: Program Design, Management & Quality Improvement

ANNUAL REPORT

POLICY:

Each summer, the Charlotte County Early Childhood Programs produce an annual report that includes quantitative and qualitative data as well as anecdotal information related to the school year. This completion of this report complies with United States' Office of Head Start and is available to the public, including stakeholders, program participants and decision-makers.

PROCEDURE:

1. The Coordinator of the ECP is responsible for producing the annual report.
2. The annual report will be completed no later than July 31.
3. The annual report is available on the agency web site. Paper copies are sent directly to School Board members, senior members of the district leadership team,

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BUILDING ACCESS POLICY – BAKER

POLICY: The program takes every necessary measure to provide the safest environment for students, their families and EC staff members.

PROCEDURE:

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BUILDING ACCESS POLICY – HOPE

POLICY: The program takes every necessary measure to provide the safest environment for students, their families and EC staff members.

PROCEDURE

Each person entering Baker Center must present his/her ID to our security camera and state a purpose for visiting, prior to entering the building. Once the visitor has gained entrance to the lobby area, the front desk employee needs to check the student's emergency card to make sure the visitor at the desk is permitted to pick-up the child.

Visitors

must show his/her ID badge and must sign-sign in the binder that is in a lower locked

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CLASS OBSERVATIONS

POLICY: Charlotte County Early Childhood Programs conducts CLASS observations twice a year, once in the fall and once in the spring. The first observation will be conducted by an outside agency, and the second by an Education Specialist.

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FAMILY COMMUNICATION

POLICY: The program ensures that effective two-way comprehensive communications between staff and parents is carried out on a regular basis throughout the program year. Communication with parents is carried out in the parents' primary or preferred language or through an interpreter, to the extent feasible.

PROCEDURES

1. Information and materials are provided in the primary or preferred language or through an interpreter to the extent feasible.
2. Program staff are available to share information, (in primary or preferred language), on program activities and to provide opportunities for parents to share and give feedback on their children. Information will flow in a variety of ways:
 - x Orientation and Open House Activities
 - x Telephone, Face-to-Face, Email, ChildPlus or Apps
 - x Family Partnership Agreement
 - x Notes/Correspondence
 - x Meetings/Trainings
 - x IEP Development
 - x Calendars/Newsletters
 - x Home Visits
 - x Parent/Teacher conferences
 - x Ongoing Follow-Up
 - x Surveys/Questionnaires
3. ECP staff create, use and provide procedures and forms to address concerns to parents and community to enable parents to express concerns regarding the program that cannot be resolved through regular channels.
4. ECP staff collaborate with local organizations for assistance and resources in the community.
5. ECP staff utilize other parent staff and community agencies to obtain bilingual staff for interpretation services.
6. ECP staff ensure sensitivity to family culture and heritage.

7. ECP staff r

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COMMUNICATION, GOVERNING BODY AND POLICY COUNCIL

POLICY: The program ensures that all required information is provided regularly and as mandated, to the School Board (Governing Body) and the Policy Council.

PROCEDURES

1. Annually, provide members with an orientation package and training necessary to understand and participate fully in the collective decision-making process to include an overview of the following:

- f* Agency's History
- f* Head Start Performance Standards
- f* Mission Statement
- f* Roles and Responsibilities of the Council
- f* Organizational Structure
- f* Community and Self-Assessment Information
- f* Program and School Readiness Goals

2. Hold regular meetings that facilitate discussion and open exchange of ideas

3. Share required reports, information and updates as indicated by Head Start Standards

4. Prepare and distribute Policy Council packets one week prior to each regularly scheduled meeting.

RELEVANT FORMS:

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STAFF COMMUNICATION

POLICY: The program has mechanisms in place for regular communication among all program staff to facilitate quality outcomes for children and families.

PROCEDURES

1. Establish (through Administration) a supportive environment in which open staff communication is encouraged and appreciated.
2. Provide opportunities for staff to share ideas and concerns to administration, colleagues and supervisors.
3. Schedule regular meetings with staff at all levels of the program, provide an

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COMMUNITY ASSESSMENT

POLICY:

PROCEDURE

RELEVANT FORMS:

nmh

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CONFIDENTIALITY

POLICY: The program has policies in place that protect the privacy of the children and families enrolled.

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GOVERNANCE- ELECTION OF POLICY COUNCIL MEMBERS

POLICY: The program informs parents at the time of their child's enrollment of parent opportunities to become part of the program's policy council, parent committee, health advisory and family services advisory.

PROCEDURE

1. At enrollment Family advocates go over the informational survey for Policy Council, Parent Committees, Health Advisory and Family Services Advisory. At this time, parents start the process to become a Policy Council member.
2. Staff members process all informational surveys for parents who are interested in becoming part of the Policy Council. These names are placed on a Policy Council ballot to complete the election process
3. Program Orientation is held on the first day of school. Interested parents are asked to speak as to why they would like to represent their school at the Policy Council meetings.

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EMERGENCY CARDS

POLICY: The program ensures that children are only released into the care of people who are approved by his or her legal parents/guardians.

PROCEDURE:

1. Emergency cards are filled out at the time of enrollment and are updated as needed.
2. The original copy is kept in the front office, and a copy is kept in the child's classroom. Each time a change is made to a card, it is the responsibility of the staff member overseeing the change to ensure that the teacher gets a copy of the updated card.
3. Teachers will not release a child to any unknown or unauthorized person who is not on the emergency card without checking with the office first. The person will need to come to the office and show identification, and the parent will be contacted.
4. Teachers will not release a child to a person who appears under the influence. Contact the child's Family Service Worker or the Program Director for assistance.
5. Any changes to the emergency card **MUST** be done in person. Phone calls to make changes will not be accepted.
6. Please encourage parents and guardians to list on the emergency card all adults who may have permission to pick up the child.

RELEVANT FORMS

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FAMILY & HEALTH ADVISORY COMMITTEE

POLICY: The program has an established Health Advisory Committee which convenes each Fall to discuss community health and nutritional needs that would impact the program, additional meetings may be called as needed. This advisory committee assists in the development of health policies and procedures and supports Head Start's objective to provide continuous and accessible health care for children and families. Its members are knowledgeable about prevalent community health issues and can respond to questions from Head Start staff about strategies to address them.

PROCEDURE

1. The program's Family & Health Specialist facilitates meetings and the Advisory's membership, as needed and as determined by the program's community and self-assessment.
2. The committee includes Head Start parents and staff, health and human services professionals, and other community volunteers who are representative of the racial and ethnic

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HEALTH & SAFETY SCREENER

POLICY:

PROCEDURE

RELEVANT FORMS:

nmh/nj

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ONBOARDING - NEW HIRE

POLICY: Before a new ECP applicant is hired, a background check is done and references are contacted. The program provides orientation and training for each new person hired. This new employee is required to provide documentation of good health, to review the Standards of Conduct with a person from our leadership team, to provide a signed attestation of good moral character, and to undertake further employee training resulting in completion of a certificate.

PROCEDURE

Required Forms

- x Employees are required to read & sign the Early Childhood Programs Standards of Conduct.
- x A Doctor's note is required, stating that the person being hired is free from communicable diseases and is healthy and able to work with children.
- x Tuberculosis Questionnaire is completed.
- x An Attestation of Good Moral Character is signed.

Training

- x Child Abuse Training
- x Blood Borne Pathogens Training
- x Fire Extinguisher Training
- x New Staff Training and Orientation that includes the mission, philosophy, history of the program, job expectations, operating policies and procedures.

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ONGOING MONITORING

POLICY: The program will monitor required tasks and responsibilities to ensure that they are completed. Ongoing monitoring is facilitated by and is the responsibility of, leadership team members representing each content area. Procedures include a variety of compliance activities and data review. Results of monitoring will be used to demonstrate compliance, areas for ongoing and timely improvement, and to contribute to the Strategic Planning and Goal Setting processes.

PROCEDURE

1. Directors, managers, consultants and other supervisors will develop checklists for staff to use in setting up their environments and processes. These may include:
 1. Checklist for Child Development and Disabilities.
 2. Checklist for Parent Involvement, Family Services and Mental Health.
 3. Checklist in Health and Safety.
 4. Child/Adult Care Food Program.
 5. Nutrition/Mealtimes Checklist.
 6. Bus Inspection.
 7. Van Inspection.
2. Supervisors/Managers will implement procedures and timelines for using said checklists. Staff will use checklists in setting up and maintaining their environments.
3. Regional Managers will use checklists in monitoring sites on a regular basis and will track their visits and feedback.
4. Information about children and families will be tracked in the electronic child and family database system
5. Regular reports will be utilized by all staff both on and off line to ensure timely delivery of services to children and families.
6. Regional Managers will submit monthly reports and meet with Head Start Director monthly to review
 1. Supervision,
 2. Regional budgets,

3. Site monitoring,
 4. Attendance,
 5. Site Enrollment,
 6. Outcomes,
 7. Data tracking information,
 8. Any other information about children and families.
7. Program consultants will meet on a regular basis with Regional Managers and HS/EHS Director. In addition, Program consultants will meet and report to each Regional Manager at least once a year to discuss at a minimum:
1. Results of RM monitoring of their classrooms, using appropriate checklists.
 2. Child Plus documentation and analysis of the information.
 3. Outcomes reports.

RELEVANT FORMS:

nmh

Policy

Procedure

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PARENT SURVEY

Policy: The program values parental/family input and uses information gathered as a means to provide direction during goal setting and program planning.

Procedure:

1. Parents/families are given a parent survey once a year in January
2. Hard copies of surveys are distributed in the envelope in which they should be returned. Pencils are provided. Parents/families have two weeks to complete and return to their child's teacher.
3. Surveys are confidential and are distributed and collected in a way that supports this.
4. A

Service Area:

The Director receives an email from National Accreditation Commission when the 1st and 2nd Annual Report is due.

The process for accreditation can be found in the Accreditation Manual. (pg. 1). If you have questions, call the accreditation office at 1-800-537-1118

RELATED FORMS:

cw/nmh

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SELF ASSESSMENT

POLICY:

PROCEDURE

RELEVANT FORMS:

nmh

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STAFF SURVEY

POLICY: Annually, each staff member is asked to examine and respond to his or her own experience employed within the program. Staff members have an essential role in the implementation of the operating policies and procedures of the program. Important is that they are aware of and understand the standards of the program. The primary goal for staff surveys is to collect and understand staff opinions, perspectives, attitudes and perceptions toward and of the program.

PROCEDURE

1. Provide each member staff survey once a year in October.
2. Make a copy of the Staff Survey for each staff member. Staff have two weeks to complete and return the survey to the Educational Specialist who is overseeing the National Accreditation Commission.
3. Give staff an opportunity to complete the survey in a confidential manner.
4. Collect surveys in a way that allows confidentiality for those who prefer to remain anonymous.
5. Count the total of number returned. At least 75% of the staff counted in the staff-child ratio and onsite supervisory staff must be returned.
6. Only for the school accreditation (National Accreditation Commission): count and record the totals on a blank copy of the Staff Survey (in NAC notebook page 90.)
7. Complete the Parent survey section of the survey verifications (page 100).
8. Submit survey totals and the Survey Verification with the Request for Validation Visit.
9. Store completed surveys at the school in a file folder marked Parent Surveys.

RELATED FORMS:

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SUSPENSION/EXPULSION

POLICY: The program will not expect any child from Head Start, VPK or Early Head Start due to that child's behavior. Temporary suspension of a child for persistent and

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IfPCID1 a temporary suspension is deemed necessary, the program will support the child's return to full services as quickly as possible while ensuring child safety by engaging with parents and the mental health consultant, continuing to utilize community resources, providing home visits and making a determination for referral. A written plan is developed to document action steps and support to promote the child's successful return to full services. In the event that the child continues to present a serious safety threat to the child (or classroom) and all parties determine that the Head Start, VPK and Early Head Start programs are not the appropriate placement, ECP staff comply with IDEA and the Rehabilitation Act, work with appropriate agencies, consultants and the child's family to determine best placement and to facilitate transition, directly, for the child to the most appropriate placement.

RELATED FORMS:

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TRAVEL REIMBURSEMENT POLICY

POLICY: If a staff member is submitting expenses and seeking reimbursement for these expenses for in-county or out-of-county travel, the CCPS

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PROGRAM VOLUNTEERS

POLICY: In order to provide for the security and safety of children, ECPs require that any person defined as a Volunteer, participating in program activities during operational periods, meet certain criteria including background checks, orientation and training. Volunteer opportunities exist primarily in the classroom, with limited opportunities for family service, administrative and operational activities. Volunteers are not allowed to have unsupervised contact with children in the program. *One of the main goals of the Volunteer Program is to "grow" substitutes and ultimately Early Childhood Program employees.*

PROCEDURE

1. Family/community members may express interest in volunteering with the program in a variety of ways, including through interest surveys.
2. Once interest is established, a volunteer training (which includes completing and signing appropriate agreements and forms) is scheduled by the ed

Definitions/Guidelines:

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