

Planning for Early Head Start Program Services

INTRODUCTION

The Early Head Start (EHS) Program is a unique opportunity to provide comprehensive services to low-income expectant parents and families with infants and toddlers. Along with that opportunity, however, comes a great responsibility. Because of their particular vulnerabilities, very young children and their families require services of the highest quality. Programs planning to provide EHS services must be thoughtful in how they design and implement their program.

WHAT IS START-UP PLANNING?

For the purposes of this paper, start-up planning refers to the activities grantees engage in as they prepare to implement their funded grant, through the planning period and during the early stages of service delivery. Planning for program implementation begins during the grant application process and continues from the time of the award to full implementation of services. Each newly awarded grantee must develop a start-up plan with identified timelines. This guide will help in developing the start-up plans and timelines.

Activities completed during the planning process require thorough review of the *Head Start Program Performance Standards* and should include input by parents, policy groups, community members, and staff. The goal is to be fully operational by the target start date.

WHAT ARE THE STEPS ASSOCIATED WITH START-UP PLANNING?

This document describes the four steps associated with start-up planning:

1. Utilizing resources
2. Reviewing and developing management systems and procedures
3. Preparing for program services and activities
4. Implementation

While the steps are described in distinct activities or phases, they are in fact interrelated and many of the tasks must occur simultaneously. This is what makes the start-up process so challenging.

STEP ONE

Utilizing Resources

All newly funded EHS grantees have a variety of resources available to support their start-up efforts including the following:

- **Your Start-Up Planning Team** manages and monitors the start-up planning process as well as early program implementation. The team can determine the status of the management systems and procedures and create timelines for all start-up activities. It is essential to include key members who are able to provide infant and toddler expertise, program management experience, decision-making authority, and knowledge of the community's strengths and needs.
- **Your Federal Program Specialist** helps make funding decisions, approves program changes, arranges for technical assistance, and supports the program to ensure compliance with the *Head Start Program Performance Standards*.
- **A Start-Up Planner** can be helpful in facilitating the start-up process. This consultant can ensure that the program meets the Performance Standards, has developed appropriate policies and procedures, and is ready to be fully operational by the target start date.
- **Neighboring EHS centers and existing Head Start programs** can be excellent resources. Many have found solutions to problems you may be struggling with now.
- **Local Part C early intervention agencies** can support EHS in providing services to infants and toddlers with disabilities. EHS must provide services to at least 10% of enrollment to children with diagnosed disabilities. Programs are required to form relationships and agreements with the local early intervention providers or Part C staff to prevent duplication of services and provide a coordinated approach to services for children with disabilities and their families.
- **Other local community partners and agencies** can serve as valuable resources. EHS alone cannot meet all of the comprehensive and sometimes complex needs of all families. You can learn from

their experience and ask for their assistances when necessary. Members from these agencies are potential candidates for Policy Council representation.

- **The Early Childhood Learning and Knowledge Center (ECLKC)** houses valuable information, policy clarifications, and regulations pertinent to Early Head Start (<http://eclkc.ohs.acf.hhs.gov/hslc>).

STEP TWO

Reviewing and Developing Management Systems and Procedures

New EHS programs bring a variety of experiences to start-up planning. Some are existing EHS programs, others are Head Start preschool grantees, and others are new to both Head Start and to serving very young children. Regardless of your organizational experience or goals for your local EHS program, all EHS grant applications should have key management systems and procedures in place.

Management systems and procedures are necessary to ensure that your program meets the *Head Start Program Performance Standards*. Furthermore, well-functioning, integrated management systems provide the foundation for all program activities and are essential to developing a high-quality program. Key systems, procedures, and data that should drive the program include the following:

- **A current community assessment** that ensures program services are designed to meet the needs of the families in the local community [45 CFR 1305.3 (1) – (6)].
- **Written service plans** for implementing services in each of the program areas [45 CFR 1304.51(a) (1) (iii)].
- **Communication systems** that ensure timely and accurate information are provided to parents, policy groups, staff, and the general community [45 CFR 1304.51 (b)].
- **An organizational structure** that supports the accomplishments of program objectives and addresses the major functions and responsibilities assigned to each staff position [45 CFR 1304.52 (a) (1)].

STEP THREE

Preparing for Program Activities

Putting your program into action involves multiple, simultaneous tasks. Utilizing the Start-Up Planning Team can provide structure and organization to your program planning. Some of the important considerations to implementation activities include the following:

- **Hiring qualified staff members** who have experience with infants, toddlers, and services to pregnant women.
- **Providing a comprehensive staff development plan** including individualized planning, formal trainings, and workshops. Preparing staff to begin working with very young children and families is only the start of a continuous staff development process.
- **Preparing appropriate facilities** such as center-based environments to meet the unique needs of infants, toddlers, and pregnant women.
- **Identify an approach to curriculum** that is responsive to the needs of participating infants, toddlers, and families. The curriculum should include thorough knowledge of infant/toddler development, careful observation of staff and family, and creative strategies for individualizing for each child.
- **Ensuring coordination with community partners** is an ongoing commitment that provides a vital role in the development of a continuum of family-centered services for pregnant women and families with infants and toddlers.
- **Creating a recruitment and enrollment plan.** Recruiting families in an effective manner leads to the largest pool of potentially eligible families. Families are eligible based on income as well as criteria developed by the program.

The attached *Early Head Start Organizational Readiness Chart* provides a tool for the start-up planning process. The content of the chart is based on the experience of EHS programs, Head Start Technical Assistance (TA) providers, and Federal staff.

STEP FOUR

Implementation

As the EHS program begins to operate, systems must be in place to assess the effectiveness of the program. The flexibility to adapt and adjust services as needed is just as critical. This process is a normal and healthy aspect of any dynamic learning organization. Specific systems to address at this time include the development of the following:

- **An effective training plan** that considers a variety of opportunities for staff development such as, group workshops, mentoring relationships, individual and group supervision, formal courses at educational institutions, training conferences, and written and multimedia materials.
- **The program's continuous improvement efforts** ensure that the grantee, their delegates, and contractors are meeting all applicable Federal regulations. Grantees must also assess how effective EHS services are for families. By establishing a continuous improvement process, grantees can demonstrate the impact the EHS program is having, and adjust their services as needed.

SUMMARY

Early Head Start grantees are given a unique and valuable opportunity to develop the highest quality program by fully utilizing a thorough start-up planning process. Successful program implementation involves:

- A thorough understanding of the *Head Start Program Performance Standards* and related regulations.
- Effective communication systems and collaboration with Federal Program Specialist, governing bodies, parents, staff and community partners.
- An integrated management and organizational structure.

EARLY HEAD START ORGANIZATIONAL READINESS CHART

The Organizational Readiness Chart outlines necessary tasks and steps for successful start-up planning. Allowing sufficient time for a thorough start-up planning process ensures that the program will be ready to provide quality services. Considerations for successful implementation include the program's ability to:

- Fully implement the *Head Start Program Performance Standards*.
- Hire, retain, and train qualified Early Head Start (EHS) staff with infant/toddler and Head Start expertise.
- Ensure an integrated and effective management / organizational systems, policies, and procedures.
- Provide a seamless approach to continuous services that reflect the needs of the community and families served.

Program Name: _____

Date of Review: _____

Grant Award Date: _____

Target Start Date: _____

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
START-UP								
Start-up Planning Team	<ul style="list-style-type: none"> Identify team to carry out and monitor start-up plan / early implementation Hire qualified EHS management staff Hire start-up consultant if necessary Identify start-up costs and TA needs 							
Negotiated Award / Budget	<ul style="list-style-type: none"> Ensure budget reflects plans and timelines Develop budget monitoring and reporting tools for start-up and operating budget 	<ul style="list-style-type: none"> Develop / revise written financial and accounting procedures to include EHS 	<ul style="list-style-type: none"> Ensure start-up funds are spent prior to end date of start-up period 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
START-UP								
Facilities	<ul style="list-style-type: none"> Identify facility needs and assure usable space Assure compliance with all health and safety requirements Meet licensing requirements Assure full compliance with 1309 Standards 							
		<ul style="list-style-type: none"> Approve space plans and/or renovations underway; assure Davis/Bacon compliance 						
			<ul style="list-style-type: none"> Complete renovations Secure license 					
Organizational Chart	<ul style="list-style-type: none"> Develop / integrate EHS structure Ensure structure incorporates and supports EHS <ul style="list-style-type: none"> > service model (birth to 5 continuity) > systems (ongoing monitoring, self assessment, training and communications) > procedures 							
Understand EHS	<ul style="list-style-type: none"> Visit at least one EHS program in close proximity Attend EHS event (national or regional) for new programs 							
ORGANIZATIONAL ELEMENTS								
Policy Council (PC) – <i>if new</i>	<ul style="list-style-type: none"> Establish interim PC Develop strategies for shared decision-making process and training 							
		<ul style="list-style-type: none"> Develop written bylaws and procedures for roles and responsibilities Train Board / PC / parents 						
			<ul style="list-style-type: none"> Implement 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
ORGANIZATIONAL ELEMENTS								
Policy Council (PC) – if combining with an existing Head Start PC	<ul style="list-style-type: none"> Define integration of EHS into existing Head Start PC and parent committee structure 							
		<ul style="list-style-type: none"> Revise by-laws to include EHS Monitor EHS start-up progress by PC and Board 						
			<ul style="list-style-type: none"> Approval of by-law revisions by PC and Board Monitor EHS implementation and operating budget Approvals of new / revised program policies and service plans 					
Meeting Community Needs	<ul style="list-style-type: none"> Compare program option(s) and design to community needs 							
		<ul style="list-style-type: none"> Update services based on community needs 						
			<ul style="list-style-type: none"> Update services based on community and enrolled family needs 					
Health Services Advisory Committee	<ul style="list-style-type: none"> Identify composition to ensure EHS and infant / toddler expertise including dental, vision, and mental health 							
		<ul style="list-style-type: none"> Review health-related issues at ongoing meetings 						
Collaborations with Part C	<ul style="list-style-type: none"> EHS and Part C meet 							
		<ul style="list-style-type: none"> Develop preliminary agreement 						
			<ul style="list-style-type: none"> Finalize via written agreement and obtain governing body approval 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
ORGANIZATIONAL ELEMENTS								
Child Care Subsidies – to support full-year, full-day (if not operating directly)	<ul style="list-style-type: none"> Explore feasible options Identify partners to assure full range of services (full day / full year) 							
		<ul style="list-style-type: none"> Develop systems to access funds, if necessary, and to monitor quality Establish ongoing procedures to monitor quality and child care / EHS requirements 						
			<ul style="list-style-type: none"> Complete collaborative agreements / contracts and obtain governing body approval 					
Training / Technical Assistance (TTA)		<ul style="list-style-type: none"> Develop initial plan to support the implementation of services; update as new staff are hired Ensure T/TA on infants, toddlers, and pregnant women topics 						
			<ul style="list-style-type: none"> Implement as designed; update as necessary 					
Job Descriptions	<ul style="list-style-type: none"> Write job descriptions, assure compliance of duties to regulations and obtain governing body approval 							
		<ul style="list-style-type: none"> Review job duties with new staff 						
			<ul style="list-style-type: none"> Review job duties with new staff 					
Personnel Policies		<ul style="list-style-type: none"> Revise to support / integrate EHS staff and obtain governing body approval 						
			<ul style="list-style-type: none"> Ensure complete Human Resources record keeping 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
ORGANIZATIONAL ELEMENTS								
Management Staff	<ul style="list-style-type: none"> Hire qualified EHS Program Director and obtain Policy Council approval and submit to Regional Office 							
		<ul style="list-style-type: none"> Recruit and hire key management staff; verify qualifications and expertise 						
Direct Service Staff	<ul style="list-style-type: none"> Identify qualifications, selection process and recruitment strategy 							
		<ul style="list-style-type: none"> Advertise and recruit staff 						
			<ul style="list-style-type: none"> Hire qualified staff 					
Staff Supervision and Support	<ul style="list-style-type: none"> Verify in organizational chart 							
		<ul style="list-style-type: none"> Train supervisors on supportive supervision and various support tools 						
			<ul style="list-style-type: none"> Implement 					
Equipment and Supplies	<ul style="list-style-type: none"> Identify EHS needs to be purchased with start-up funds (such as buses) Develop purchase plan and timetable 							
		<ul style="list-style-type: none"> Develop and conduct bid process Prepare ongoing materials and supplies list (include diapers) 						
			<ul style="list-style-type: none"> Purchase equipment and supplies 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
ORGANIZATIONAL ELEMENTS								
Recruitment and Enrollment of Children and Families	<ul style="list-style-type: none"> Selection and enrollment criteria developed and approved by governing body 							
		<ul style="list-style-type: none"> Begin recruitment and enrollment process 						
			<ul style="list-style-type: none"> Continue recruitment and enrollment, concurrent with offering services 					
SERVICE ELEMENTS								
Curriculum for Child Development and Services for Pregnant Women	<ul style="list-style-type: none"> Select curriculum and obtain governing body approval 							
		<ul style="list-style-type: none"> Develop curriculum planning process and tools 						
			<ul style="list-style-type: none"> Train staff on implementation (prior to enrollment) 					
Transition Plans for Children and Families	<ul style="list-style-type: none"> Identify partners (I.E. Head Start, child care, preschools, special needs programs, and Part C) 							
		<ul style="list-style-type: none"> Develop written plans, policies and tools, obtain governing body approval 						
			<ul style="list-style-type: none"> Train staff Implement plans and procedures 					
Developmental Screening and Assessment Tools	<ul style="list-style-type: none"> Identify health partners; establish links to develop agreements and service plans Develop or integrate system for obtaining developmental screening, assessment information and referral process 							
		<ul style="list-style-type: none"> Train staff on process and implementation of tools and referrals 						

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
SERVICE ELEMENTS								
Medical Home and Access to Health, Dental, and Mental Health	<ul style="list-style-type: none"> Obtain providers and establish links to develop agreements and service plans 							
		<ul style="list-style-type: none"> Develop systems to identify and track family medical homes Develop / integrate system for post-natal health visits to newborns 						
			<ul style="list-style-type: none"> Hire / contract mental health professional 					
Parent Involvement across Services	<ul style="list-style-type: none"> Involve parents on start-up team 							
		<ul style="list-style-type: none"> Establish / integrate EHS into parent committees 						
			<ul style="list-style-type: none"> Active parent involvement in planning and implementation 					
Family Partnerships	<ul style="list-style-type: none"> Identify strategies for developing family partnership agreements 							
		<ul style="list-style-type: none"> Solidify relationships and services Establish procedures and tools 						
			<ul style="list-style-type: none"> Train staff Implement 					

Area of Focus	Phase 1	Phase 2	Phase 3	Action Steps	Person(s) Responsible	Target Date	TA Support / Comments	Status
MODEL SPECIFIC ELEMENTS								
Home-Based Program Option			<ul style="list-style-type: none"> • Conduct home visits on a weekly basis and for 90 minutes (year round) • Home visits have a child development focus • Socializations offered twice monthly and have a parent-child focus 					
Combination Program Option			<ul style="list-style-type: none"> • Class sessions and home visits are equal to services provided through home-based option or center-based option (year round) 					
Center-Based Program Option			<ul style="list-style-type: none"> • Center-based care (year round) is sufficient in length of hours (part day / full day) as per community assessment (Double sessions not allowable) • Center-based care is high quality • Meets staff ratios and group size requirements • Staff meet qualification requirements 					
Family Child Care (FCC) Program Option			<ul style="list-style-type: none"> • FCC service (year round) is sufficient in length of hours (part day / full day) as per community assessment • FCC service is high quality • Provide adequate and effective management for oversight of FCC homes 					