DOCUMENT RESUME

ED 270 211 PS 015 836

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TITLE The Head Start Home Visitor Handbook: Building a Home-Based Program.

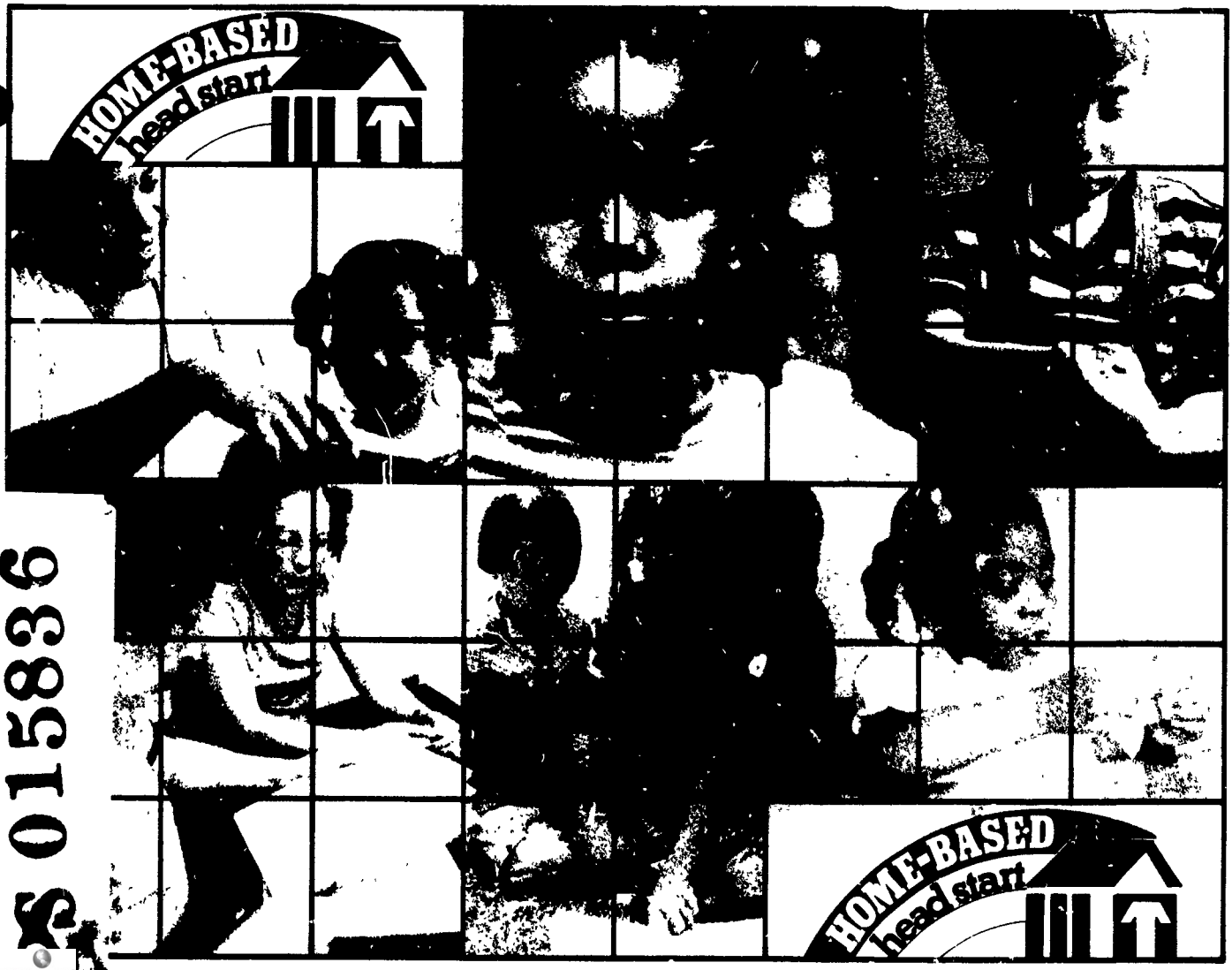
INSTITUTION American Association of Community and Junior Colleges, Washington, DC. Council for Occupational Education.
SPONS AGENCY Administration for Children, Youth, and Families (DHHS), Washington, DC. Head Start Bureau.
PUB DATE Mar 86
NOTE 248p.; Developed by the staff of the Portage Project.
AVAILABLE FROM Cooperative Educational Service Agency #5, Portage Project, Portage, WI 53901 ($10.00, plus shipping).
PUB TYPE Guides - Non-Classroom Use (055)

EDRS PRICE MF01/PC10 Plus Postage.
DESCRIPTORS *Communication Skills; Evaluation Criteria; Family Counseling; *Family Environment; Family Involvement; *Home Programs; *Home Visits; Motivation Techniques; Parent Child Relationship; Preschool Education; *Program Development; Program Evaluation; *Program Implementation; Young Children
IDENTIFIERS Home Based Programs; *Project Head Start

ABSTRACT

Developed to help the home visitor build an effective home-based program for Head Start children and their families, this handbook is intended to serve as a blueprint for parent-focused home visits that assist the child and family to meet their full potential. The first chapter lays a foundation for the program that includes a home-based philosophy statement, a description of three approaches to home visiting, a review of adult education principles, information about family systems, typical attitudes toward families, and hints for forming effective communication skills with families. The framework for the home-based program is built upon this foundation in the second chapter and takes into consideration the recruitment process and the home visitor's role in it. Chapter three gives an in-depth view of the critical components of a home-based program, a description of how to conduct a high quality home visit, samples of record keeping forms, a detailed discussion of how to plan and implement group socialization experiences, ideas for an effective parent involvement program, and an examination of confidentiality and documentation issues. The final chapter provides a list of problems frequently faced by home visitors and suggests possible solutions. Criteria for a successful home-based program, sample home-based curricula, and eight pages of references are appended. (HOD)

The Head Start Home Visitor Handbook



THE HEAD START HOME VISITOR HANDBOOK

Building a Home-Based Program

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This handbook was developed by the staff of the Portage Project, Cooperative Educational Service Agency #5, Portage, Wisconsin, under grant #5001 for Head Start Bureau, Administration for Children, Youth, and Families, Office of Human Development Services, U.S. Department of Health and Human Services. The suggested practices described herein are not necessarily endorsed by ACYF as official policy.

Acknowledgments

The editors wish to express their gratitude to a number of groups and individuals who greatly assisted in the development of this handbook. Ideas for content were suggested by staff members of the Home Start Training Centers (HSTCs) in Russellville, Arkansas; Oakland, California; Gering, Nebraska; Logan, Utah; Parkersburg, West Virginia; Tazewell, Tennessee; and Portage, Wisconsin. The HSTCs are to be commended for their invaluable contributions to the Head Start home-based effort not only as evidenced in this manual, but also throughout the past ten years since their inception.

Each Home Start Training Center recommended Head Start home-based programs which they felt exemplified current best practices in home visiting. These programs were contacted and descriptions of their procedures were documented. The reader will find their accounts throughout this handbook. The programs which are to be acknowledged for their excellence and contributions are:

ARVAC, Inc.,
P.O. Box 2110
Russellville, AR 72801

Hasta County Head Start Child Development Inc.
2151 Kenyon Dr.
Redding, CA 96001

Southern Iowa Economic Development Assn.
Box 658
Ottumwa, IA 52501

Wabash Area Development Inc.
P.O. Box 89
Mill Shoals, IL 62862

Northeast Kentucky Head Start
P.O. Box U
Olive Hill, KY 41164

PACT Head Start
P.O. Box 8
Timewell, IL 62375

KCMC Child Development Corp.
1800 E. Truman Road
Kansas City, MO 64127

Towner Child Development & Family Services
P.O. Box 150
Towner, ND 58788

Nebraska Panhandle CAA
1840 Seventh
P.O. Box 340
Gering, NE 69341

Cayuga County CAP
87 North Street
Alburn, NY 13021

Green County CAP
40 Woodlawn Avenue
Catskills, NY 12414

Schoharie County CAP Head Start
P.O. Box 464
Cobleskill, NY 12043

Clay-Wilkin Opportunity Council
2700 12th Avenue, South
Moorhead, MN 56560

Miami Valley Child Development Centers, Inc.
1034 Superior Avenue
Dayton, OH 45407

Cambria County Head Start
P.O. Box 1104
Johnstown, PA 15907

Northwest Tennessee Head Start
526 W. Walnut
McKenzie, TN 38201

Clinch-Powell Educational Cooperative
P.O. Box 279
Tazewell, TN 37879

Gulf Coast Community Services Association
2212 Texas Avenue
Houston, TX 77003

Community Progress Council, Inc.
Child Development York
226 E. College Avenue
York, PA 17403

Palo Pinto Community Service, Inc.
P.O. Box 1348
Mineral Wells, TX 76067

Bear River Head Start
P.O. Box 281
Logan, UT 84321

Champlain Valley O.E.O. Head Start
138 Church Street
Burlington, VT 05401

Southwest CAP - Head Start
Governor Dodge School
Route 3
Mineral Point, WI 53565

West Central, W. Virginia Community Action Assoc., Inc.
804 Ann Street, P.O. Box 227
Parkersburg, WV 26101

We are grateful to Jordana Zeger who drafted plans for this project and initiated communication with the HSTCs and ACYF. We are also indebted to Pam Coughlin from the Administration for Children, Youth and Families for her support in the development of the manual, from its inception through its completion. Thanks are additionally due to other staff members from ACYF who reviewed the manual, including Martella Pollard and Dolly Wolverton. Their input and recommendations were appreciated.

Several individuals greatly facilitated the preparation of the manuscript. Karen Kratky has a bulging file drawer and several computer discs as evidence of her patience and diligence in typing, retyping, coding, recoding, correcting and recorrecting the many revisions that this manual underwent. Special thanks are also due to Pat Nichols who gave us assistance in editing, reminding us of what was important, and cautioning us to be concise. Our gratitude also to Pam Jesien Tobey who made numerous constructive changes to syntax and vocabulary and assisted in making the handbook more readable; and Margaret Stine who assisted with graphics and did the final paste-up.

Finally, special thanks must be extended to the many families who over the years have welcomed us into their homes to take photographs. Their cooperation and friendliness is yet another reminder of their positive feelings toward Head Start.

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Introduction

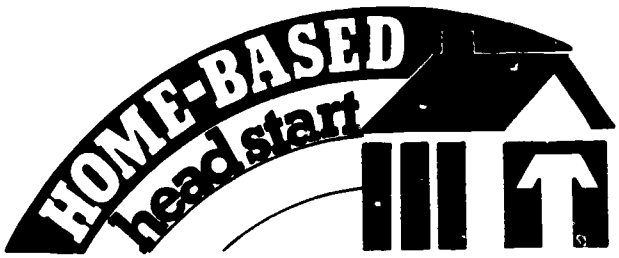
Home visitors are to be envied. Serving children and families within the home environment can be one of the most rewarding professional experiences you'll ever encounter. Where else can you become better acquainted with the family, work with them in a relaxed setting and provide an individualized program that meets their particular needs? Watching the family grow because of your efforts is very reinforcing, but the frosting on the cake is an enthusiastic greeting from the parent and a little nose pressed to the window in anticipation of your visit.

This handbook was developed to help you, the home visitor, build an effective home-based program for Head Start children and their families. It is intended to serve as a blueprint for parent-focused home visits that assist the child and family to meet their full potential. The information in the handbook reflects seventy years of combined experience from the seven HSTCs, and countless years accumulated by the many contributing Head Start home-based programs. While it was developed by the Portage Project staff who espouse a particular approach to home visits, every effort was made to combine the best ideas from numerous sources in order to offer a representative view of home-based best practices.

Chapter One lays a foundation for the home-based program. Included are a home-based philosophy statement; a description of three approaches to home visiting; a review of adult education principles; information about family systems; a discussion of typical attitudes toward families; hints for forming a partnership with challenging families; and a review of effective communication skills. These building blocks create the foundation of a solid home-based program.

The framework for the home-based program is built upon the foundation and is outlined in Chapter Two. You will find here a detailed discussion of the recruitment process and your role in it; a review of three types of evaluation (screening, developmental assessment, and family assessment) necessary to insure appropriate service delivery; and information on assisting families to identify and secure community services. These elements provide the necessary supports for your home-based program. Without them, the structure would surely crumble.

In Chapter Three the home-based program is further constructed and formed. This chapter gives an in-depth view of the critical components of your program. There is a description of how to conduct a high quality home visit; samples of record keeping forms; a detailed discussion of how to plan and implement group socialization experiences; ideas for an effective parent involvement program; an examination of confidentiality and documentation issues; and steps to help create smooth transitions from home to classroom.



The final chapter fills in the finishing touches of your home-based structure. It includes a potpourri of questions frequently asked by home visitors with solutions derived from years of home-based experience. You will find a discussion of such diverse topics as how to start the year on the right foot, how to motivate parents, what to do about child abuse or neglect, how to work with handicapped children, how to deal with misbehavior, and necessary insurance coverage, among many others.

Finally, the appendices contain information necessary for operating a quality home-based program. In Appendix A you will find suggested criteria for a successful home-based program. Appendix B has samples of the home-based curricula developed by the HSTCs. A wide variety of the best available resources for operating a home-based program is offered in Appendix C.

We recognize that each home-based program and situation is unique. Therefore, in writing this manual we have attempted to include many ideas that have been proven effective. It is up to you to choose those that may work for you. It is our basic belief, however, that high quality home visits, socialization experiences, and parent activities all must have some structure. It is not enough just to show up on a consistent basis. You must have goals and objectives clearly defined, a plan for meeting them, and a system to evaluate and account for what you've accomplished. The chapters in this manual address these issues. Once you have established a structure you can be as creative as you wish as long as your activities are based on the needs of the children and families you serve.

Evaluation results have indicated that home-based programs are effective for both parents and children. In fact, home-based programs evidenced essentially the same success as did the more traditional center-based Head Start program. We believe you will find, if you have not already, that there are many distinct advantages to a home-based program that are simply not available in the center-based option. You should recognize these advantages and capitalize upon the strengths home-based programming can offer. Among these advantages are the following:

1. **Individualized Instruction** — Serving each child and family at home enhances the individualization possibilities. Not only in terms of the goals and objectives set for the child and family, but also in terms of the one-to-one attention that is given during home visits. The home visitor and parent use their knowledge of the child to plan activities appropriate for him/her.
2. **Learning Occurs in the Natural Environment** — The home offers an appropriate setting for learning basic skills such as dressing, feeding, and communicating. This is the environment where the child's basic needs must be met. Therefore, a program which emphasizes the parent's role as the teacher assists the parent to meet these needs and use all aspects of the home environment for the child's benefit.
3. **Opportunities to Observe Parent-Child Interaction** — Working with the child and parent at home makes it possible to observe and enhance the parent-child interaction. The home visitor is in a good position to help the parents become effective teachers and managers of their child's behavior.
4. **Parents Can Generalize Learned Skills** — Teaching and child management techniques parents learn to use with the enrolled child can also be applied to other children in the family.

5. **Direct Parent Involvement** — The above strengths of the home-based option will work only if the parents are directly involved in the program for the child. Many programs mistakenly have home visitors go into the home and work directly with the child while the parents observe. This is called a "home tutoring model." This model has limited effectiveness since intervention is limited to the weekly 1-1/2 hour period when the visitor is in the home. But in programs with a parent focus, the parent learns to teach the child whenever and wherever the opportunity arises. Demonstrating teaching skills and activities to the parent for use in daily activities and interactions makes more sense.
6. **Family Involvement** — Home-based programs have the advantage of total family involvement. Parents, siblings, and other household members can all be involved in the program. Providing family members with successful, growth-enhancing experiences can create a healthier emotional climate for the whole family.
7. **Developing Home-Center Linkages** — Parents who have learned to teach their child successfully at home are much more likely to continue working with their child once she/he enters the center program. Skills taught in the center can be reinforced and expanded upon by parents in the home. Also, parents who are confident as teachers of their own children will be more likely to volunteer time in the center. Home-based service is a good way to give parents confidence in their teaching and parenting ability.

In summary, home-based programs can benefit the entire family. This handbook will help you plan and operate a home-based program that makes a difference. Although there are no "miracles" which ensure that every home visit will go smoothly or that parents and children will always cooperate, the suggestions described have been effective with many children and families. We hope this handbook will help you build solid Head Start home-based services.

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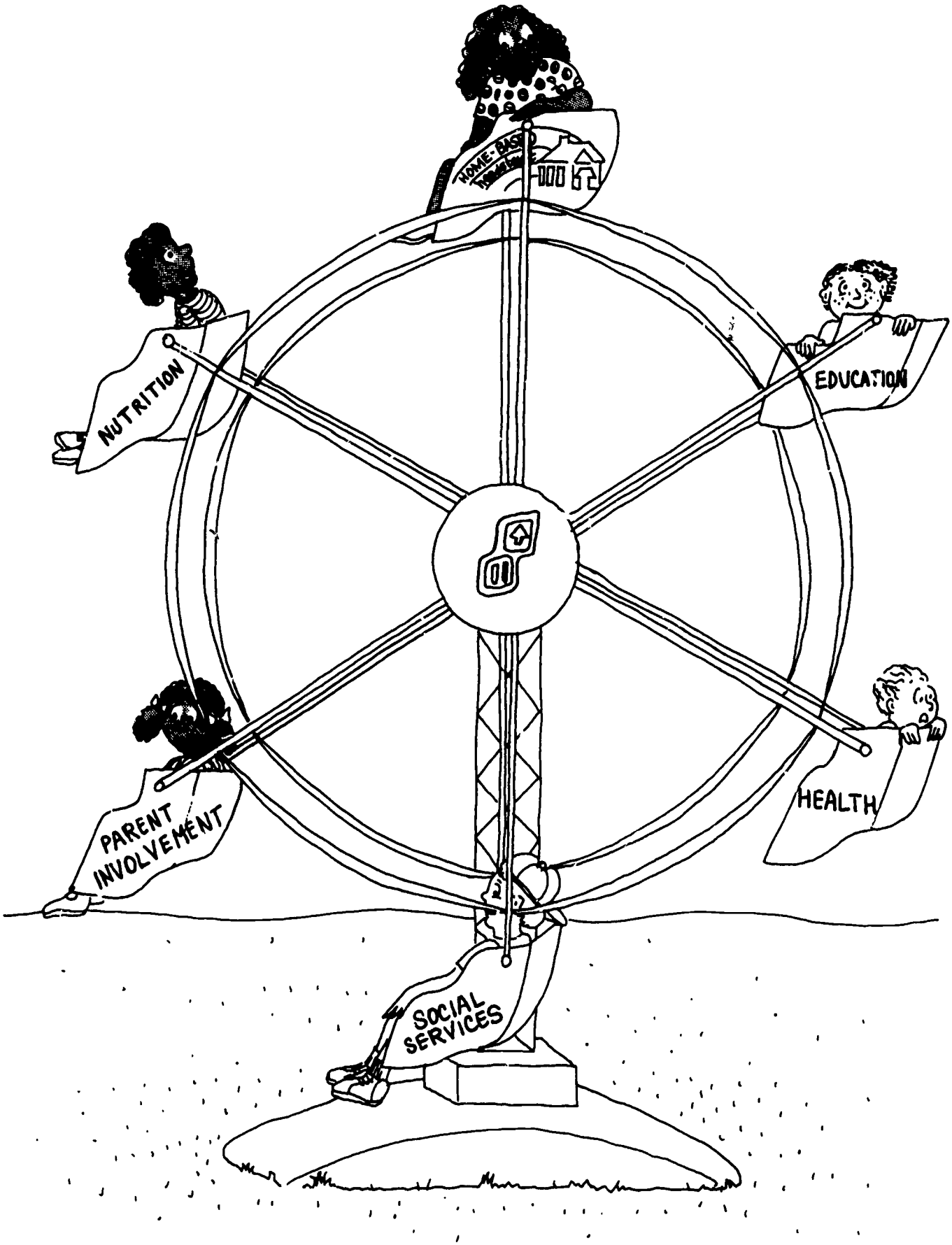


1

Foundation for the Home-Based Program

Objectives

As a result of reading this chapter, the home visitor will be able to:

- list various approaches to home visiting and discuss the benefits and drawbacks of each one;
- list a dozen strategies to enhance the adult learning process
- discuss four critical elements that form the foundation of a successful family partnership.

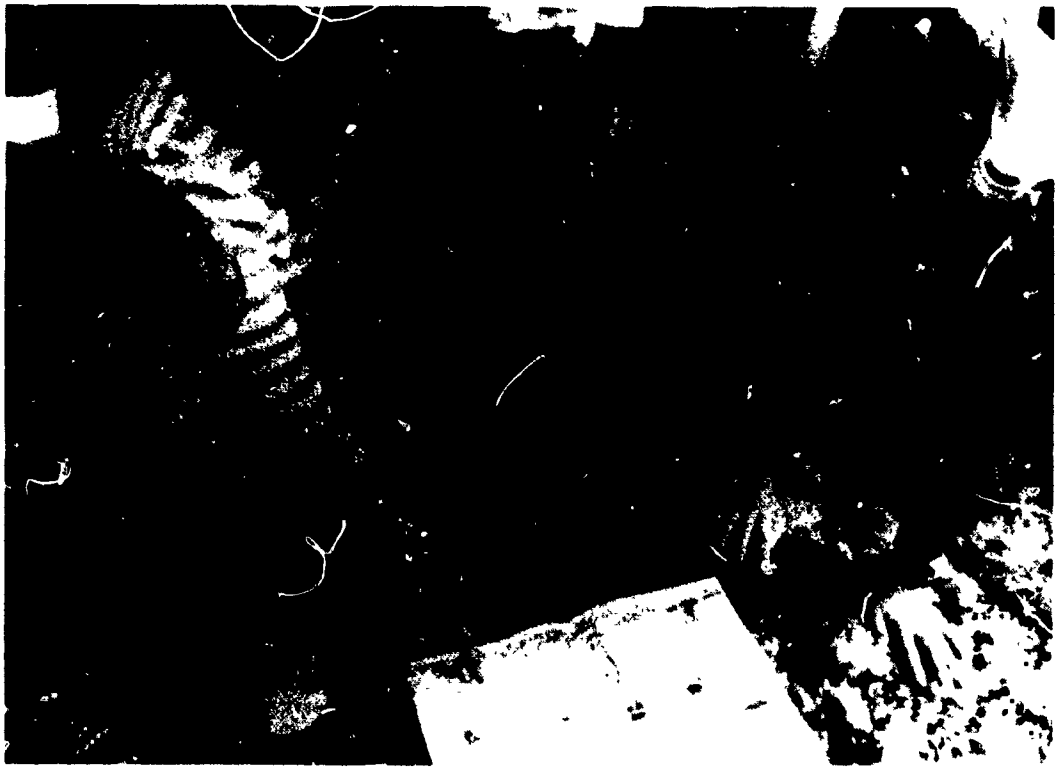
During the past decade, American society has experienced rapid and dramatic shifts in economic stability and social values and structures. The American family has adapted with its own creative shifts in family norms and composition, role definitions, and mobility. With unemployment and financial stress, geographical distancing from extended families, divorce, and dual-parent employment, families have been challenged and have been successful in their use of adaptive, versatile, and inventive means for raising, nurturing, and educating their children.

Head Start has played a vital role in addressing the changing needs of children and their families since 1965. Head Start believes gains made by the child in Head Start must be understood and built upon by the family and community involvement. The Head Start home-based program provides family and community involvement by offering many opportunities for a richer appreciation of the young child's needs and means to satisfy these needs within the child's primary environment—home.

Home-Based Philosophy

Many benefits of Head Start are rooted in *change*. These changes must take place in the family, in the community, and in the attitudes of people and institutions that have an impact on both. The attitude of viewing parents as partners is intrinsic in a parent-focused home-based program. Research has clearly demonstrated that the success of home-based programs in bringing about substantial changes demands the fullest involvement of the parental substitutes, and families.

Home-based Head Start provides parents an opportunity to influence and make further contributions to one of their most time-consuming and absorbing tasks--promoting the education and development of their children. The advantages of home-based programming are: 1) greater continuity in children's educational experience thus, enhancing the likelihood that children will grow to their maximum potential physically,



mentally, emotionally, and socially; 2) greater family involvement in the child's development; and 3) the opportunity for families to learn about techniques and resources to maximize their potential as a functioning unit. The parents' primary role is as facilitator of their child's development and the home is the primary environment within which this development occurs.

There are three basic elements upon which an effective home-based program depends:

- Whole-hearted commitment to the philosophy of parent participation, *parents as partners*, by the staff;
- Effective information exchange; and
- Interpersonal relationships.

The three elements are enmeshed into a whole. The open sharing of ideas and opinions allows parents and Head Start staff to see one another as strong allies. For this partnership to occur, strong bridges of communication and understanding must be built. Positive interpersonal relations and effective information exchange develop trust and provide for open communication without fear of misunderstandings.

Parents have primary responsibility for their children; as legal guardians, they are required to care for and supervise them, and they have the roles of primary advocate and educator. Parents have the right to accept or reject any services offered to their child, their family, or themselves. Only in cases of child abuse and neglect can others intervene to assure that a child receives adequate care and services. Thus, Head Start staff assume a secondary role in the life and education of children. They accept the responsibility delegated to them by the children's parents and are accountable to parents for carrying out those responsibilities.

The secondary nature of the home visitor's role in children's education does not diminish their need to assume a primary role in the motivation and encouragement of parental participation. The healthiest role for a home visitor is that of a facilitator of learning rather than that of a transmitter of knowledge. In a traditional educational setting, communication usually flows in one direction only—from the teacher to the student. In contrast, a home visitor who facilitates learning establishes a multi-directional communication system. The home visitor communicates with the parent and the child and encourages each of them to communicate with the home visitor. Most importantly, the home visitor encourages the parent and child to interact with each other in a positive way. Thus, the home visitor enhances the development of the parents' teaching, interaction, and problem-solving skills, leading to greater self-confidence and ultimately improved self-esteem.

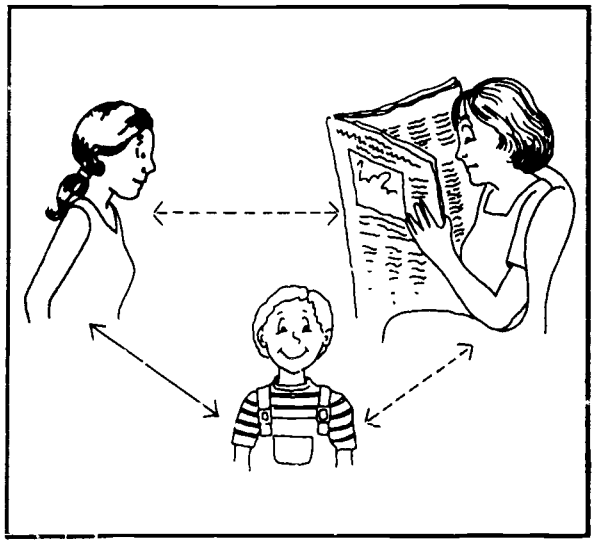
As a facilitator of learning, a home visitor has one primary function: to guide parents toward answers for their questions, utilizing their own knowledge, skill, and experience base. Home visitors have much to share with parents. The effective home visitor will have not only a thorough understanding of child development and early childhood education but also an understanding of communication, motivational skills, and family systems. In addition, he or she must have knowledge of community resources and the skills to link the family with the appropriate agencies and services.

A home-based philosophy that regards parents as partners provides the best opportunity for education to be an exciting experience for children, parents, and home visitors. When learning experiences are challenging, fun and meaningful, and occur within a supportive home environment, children and parents will grow and develop with an eagerness to make learning a lifelong process.

Approaches to Home Visiting

If you are truly going to carry out the *parents as partners* philosophy, it is imperative to recognize that you are not a child educator—but rather an adult educator. Your role as home visitor is to work with the child **through** the parent. You may consider yourself as the parenting consultant, child behavior advisor, and resource person. The children will be present and need attention; they will be excited when you arrive and may come running to meet you. That's great! Give them a hug, ask how they are, but remember your job is to work with par ents to help improve their abilities. If you teach the child to the exclusion of the parents, benefits of the program are drastically reduced. Focus on the parents, and have them focus on the child. To explain the parent-focused and other potential approaches to home visiting in more detail, consider the following pictures and descriptions.

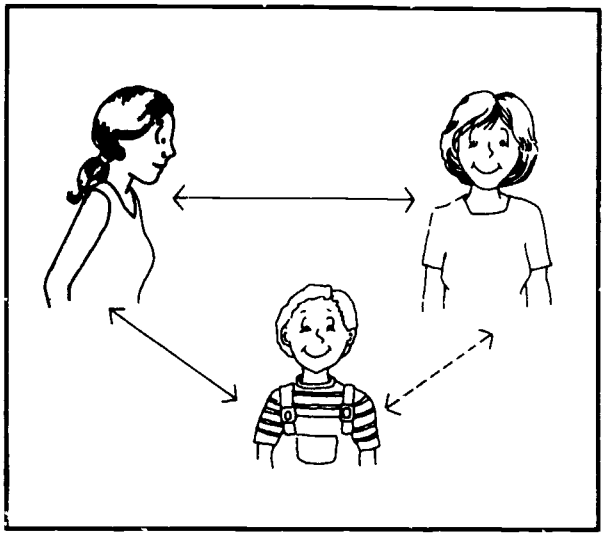
Figure 1



Child-Focused Approach

In this model the responsibility for planning, evaluating, and teaching falls on the home visitor. The parent becomes an aide who carries out the instructions given to her by the teacher. Thus, the parent does not acquire new teaching or interacting skills that would facilitate her involvement with the child when the home visitor isn't around. In Figure 1 the primary interaction is between home visitor and child. Work between the parent and home visitor and parent and child is unplanned and secondary. This focus results in the child working better with the home visitor than with his own parent. It also means that the parent may decide you're a babysitter and go visit a neighbor. It certainly results in limited growth for the parent.

Figure 2



Passive Parent Approach

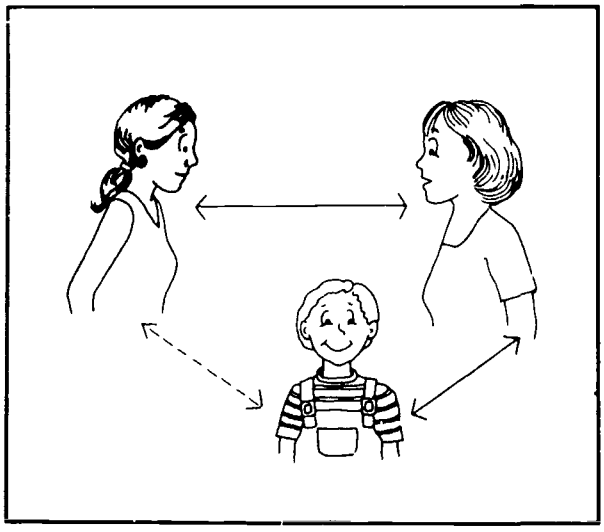
Many home visitors, realizing the drawbacks of the child-focused approach, adopt a passive parent approach to home visiting. This variation recognizes the importance of attending to the parent and of providing her with information and instruction. The home visitor, therefore, works directly not only with the child but also with the parent as in Figure 2. The limitation of this approach is that the home visitor is the center of attention and does not encourage or facilitate interaction between the parent and child. Therefore, teaching is likely to occur only when the home visitor is making her weekly 1-1/2 hour visit! Even if the parent does follow through on the activities during the week, she is merely carrying out specific instructions—not learning how to plan and teach new skills during the normal course of the day. Although this approach at least pays lip service to the importance of parents, it clearly falls short of treating parents as equal partners.

Parent-Focused Approach

Figure 3 represents a model in which the emphasis of the visit is reaching the child THROUGH the parent. Home-based programs relying on this model have far greater success passing new teaching and interactional skills on to parents. While the home visitor works with the child for demonstration purposes, the focal point of the visit is providing information to the parent on what and how to teach the child. Ultimately, the parent learns to teach on her own, and as she becomes more skillful with the new techniques, she learns to generalize the skills to teach in novel settings with a variety of materials without the home visitor's aid. An added benefit is that the parent can use the newly acquired teaching and interactional skills with her other children, thus broadening the effects of the program.

The responsibility for planning and instructing gradually passes from the home visitor to the parent when this model is

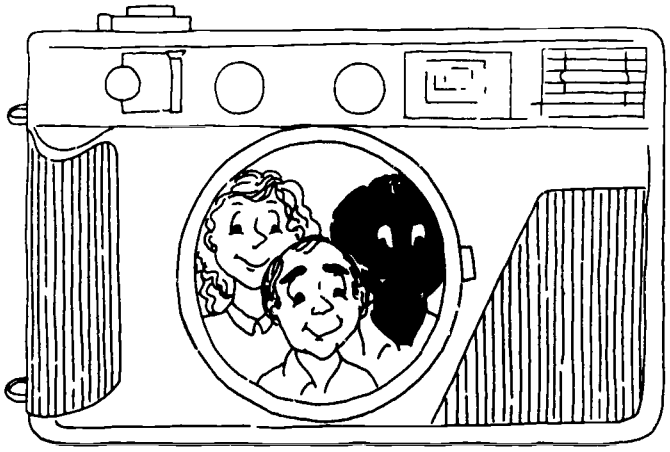
Figure 3



employed. The transfer of this responsibility can be made based on the individual ability of the parent. A positive and rewarding rapport is established between the home visitor and the parent. The home visitor really is an adult educator; and, more importantly, the parent's role as the primary educator of his/her own children is strengthened.

Now that you've reviewed what a parent-focused approach is and is not, take the following quiz to find out. . .

are YOUR home visits parent-focused?



Are YOUR Home Visits Parent-Focused?

- Do you involve the parents in the assessment of the child? Yes No
- Do you provide the parent with a copy of the checklist for their own use? Yes No
- When you arrive for the weekly home visit, do you direct your attention and greeting toward the parent? Yes No
- Do you discuss the previous week's visit and follow up on the weekly activities with the parent? Yes No
- Does the parent co-plan the activities for the home visit? Yes No
- Do you make sure that the child is sitting beside the parent? Yes No
- Does the parent demonstrate EACH new activity? Yes No
- Do you review each activity with the parent before presenting it? Yes No
- Do you hand all materials to the parent? Yes No
- Do you identify and reinforce the parent's teaching strengths? Yes No
- When the parent has difficulty, do you intervene with the parent rather than the child? Yes No
- Do you let the parent be the primary reinforcing agent? Yes No
- Do you help the parent problem solve when problems do arrive instead of jumping to the rescue? Yes No
- Do you work on activities the parent feels are important? Yes No
- Do you ask the parent to provide as many materials as possible? Yes No
- Do you give the parent the lead, when appropriate? Yes No
- Do you incorporate the parent's ideas into each activity? Yes No
- Do you let the parent present new and exciting experiences? Yes No
- Do you individualize parent education activities for each parent? Yes No
- Do you accept the parent's values? Yes No
- Do you involve the parent in evaluation of the home visit? Yes No

If you answered all of the questions above **yes**, then you deserve a hearty pat on the back. You are truly treating parents as partners by making them the focus of your efforts.

Adult Education

To adopt a parent-focused philosophy, you need to know about the special nature of adult learning. Adults are not overgrown children; therefore, principles of teaching that apply to children cannot be directly applied to adults. In fact, the nature of adult education is so specialized that it has its own term—**andragogy**—which means literally, ***the art and science of helping adults learn.*** This term evolved when it was determined pedagogy, or *the art and science of teaching children* did not fit adults. Pedagogy implies a transmission of knowledge; that is, a teacher teaching something to a learner. Traditionally in our work with children, teachers have taken responsibility for planning what to teach, how to teach, and when to teach. This process has proven insufficient when adults are the learners.

Andragogy shifts the emphasis from transmitting to **facilitating.** Adult educators pave the way for learning and, therefore, must be very attuned to the ways adults learn best.

Adult Learning Strategies

☆ **Adults learn best when they are comfortable.** Working in the home helps ensure that this aspect of adult learning is taken into account. Here are ways to provide additional comfort for the parent:

- Be sure that the child(ren) is (are) occupied while you are teaching the parent. It is nearly impossible for the parent to attend to your discussion when a child is climbing all over her.
- Let the parent choose where the home visit will take place.
- Encourage the parents to do those things that make them most comfortable.
- Dress casually.
- Offer genuine compliments; be observant of strengths upon which you can build.
- Let parents know that you make mistakes too; share lessons you've learned *the hard way.*

☆ **Adults learn best when they feel their abilities are recognized.** The parent may already have many valuable skills that directly relate to the information that is presented. The home visitor will more effectively get her message across if she refers to the parent's related strengths or life experiences. To do so tells the parent that he/she is important and that the activity's purpose is to share information rather than to instruct.

☆ **Adults learn better when their needs, questions, and concerns are attended to.** Frequently home visitors provide educational activities to the parents without individualizing for the specific person. Encourage the parents to ask questions or share their ideas on the information you present. Don't just answer the question, but incorporate their comments into the discussion.

☆ **Adults learn best when they have trust and confidence in their instructor.** There is no better argument for preparation. This does not mean, however, that you should try to convince the parent that you are an expert on all subjects, nor that you can answer every question asked. Confidence and trust are based more on honesty and frankness. If you do not know the answer to a question or concern that a parent may have, admit you do not know, promise to look further into the matter, and report back later.

☆ **Adults learn best when they can apply what they've gained to their immediate situation.** Relate information to the family's particular situation. Individualize the content of each home visit to fit strengths and needs that were determined by the child and family assessment.

☆ **Adults learn best when they are active participants.** Make home visits fun and interesting. Encourage parents to share *their* ideas and to become involved in each activity. Co-plan your home visit activities and goals with parents.

☆ **Adults learn best when they can discover for themselves.** Don't be afraid to let parents take the lead and plan activities. Encourage *jumping in with both feet* and provide instructive feedback with questions to help summarize what was learned.

☆ **Adults learn best when all of their senses are activated.** Adults tire quickly of lectures and incessant talking on one person's part. So plan activities that allow use of **taste, smell, touch, sight, and sound.**

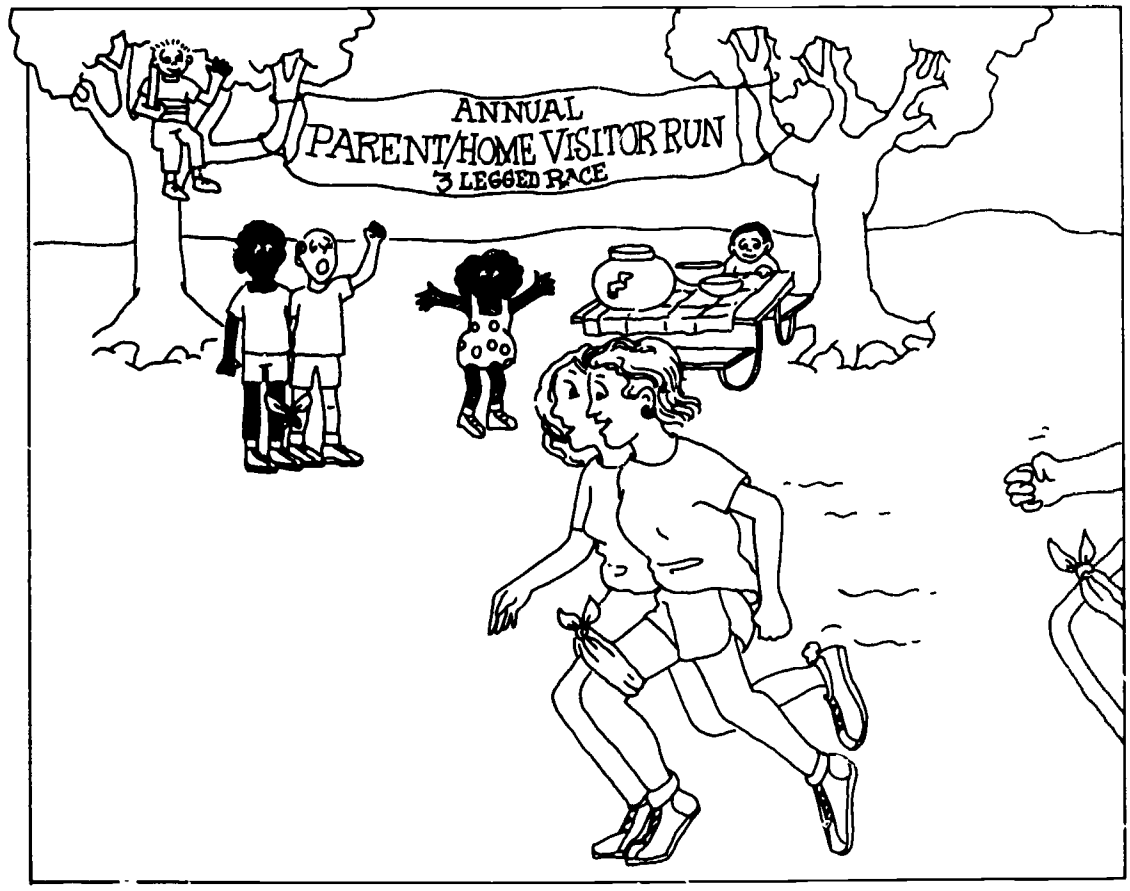
☆ **Adults learn best when they receive feedback.** All of us like to know how we are doing. This includes what we are doing well **and** what may require improvement. Don't hesitate to offer constructive feedback that reinforces and corrects.

☆ **Adult learning is enhanced by problem solving.** Good problem solving abilities are the key to parental independence. Resist the temptation to dispense answers and information, and engage families in brainstorming, questioning, role playing, and problem analysis instead.

☆ **Adults learn to the degree that they feel the need to learn and perceive achievement of personal goals.** Provide opportunities for parents to recognize their needs and interests. Encourage them to set goals and devise a plan for achievement of goals.

☆ **Finally, adults learn best with people they admire and who show respect for them.** We are privileged **guests** in the homes in which we work. We must never forget this nor abuse our welcome.

The success of the home-based approach lies in the parents-as-partners philosophy. In the parent-focused home visit, the home visitor concentrates on her role as an adult educator as she facilitates parental growth and development. With knowledge of adult education, the home visitor transfers the responsibility for planning and instructing to the parent as her confidence and status grow. Consequently, the seeds of a partnership are planted. But adult education principles are just some of the nutrients you will need for your parent-focused garden to grow and bloom. The next section will help ensure a bumper crop of successful parent-focused home visits.



Developing Partnerships

Your role as a home visitor is greater than *teacher.* You are a *facilitator* of learning. You help parents grow in parenting skills, problem solving, coping skills, knowledge of child development, and advocacy skills for their child and themselves. To really help, you must develop a partnership with the families with whom you work.

You may ask yourself, *"How do I begin to develop a partnership with parents?"* Beginning is always difficult. Some understanding of the *basics* of this type of relationship will get you on your way. This section will be devoted to the foundations of a partnership. This foundation will be built with:

- awareness of family systems,
- awareness of personal attitudes,
- development of mutual understanding, and
- effective communication skills.

Awareness of Family Systems

Recent census figures tell us that families have changed dramatically in the past ten years. Single parent families have doubled. The number of births to unmarried mothers has tripled. Sixty percent of female-headed households with children under six live below the poverty line. Currently, twenty percent of children are living in abusive/neglectful environments. Nationally, one in ten adults has a problem controlling the alcohol he or she consumes. Families have changed in a large part due to increased stress, unemployment, lack of medical coverage, mobility, and lack of extended family and friends for support. All these changes effect a home visitor. With fewer resources, the home visitor needs skills to assess family priorities and match family priorities to child needs.

The traditional Ozzie and Harriet two parent family has become the exception rather than the rule. The most common family today consists of a mother and one or more children. Some families are larger, embracing extended family members (grandmother, aunt, uncle, cousins). Another type of family can include mother, friend, and children. In other cases, children participate in the lives of two families or two parents. Today's definition of family goes beyond blood relations to groups of people who live together and share resources.

Families come in different forms with a variety of needs. A successful home visitor respects a family's value system without passing judgment. To build trusting relationships, home visitors must understand family dynamics and structures (see Figure 4).

Family structure refers to the family's size, the culture, and belief system. A family's structure determines how that family meets their needs and fulfills their functions (economic, physical, socialization, recreational, etc.). In addition, each family's needs and functions change as they pass through family stages (adulthood, birth of children, departure of children). It's easy to see that families are complicated systems. Any time we try to change one part of the system (child's skills, mother's function), the rest of the family will also be affected.

Figure 4

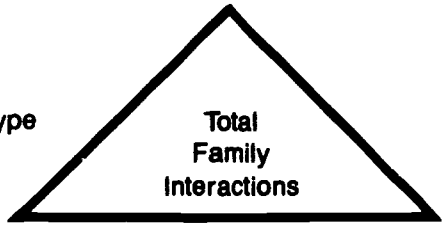
FAMILY SYSTEMS INTERACTIONS

FAMILY FUNCTIONS
(Needs for All Families)

1. Economic
2. Physical care
3. Rest and Recreation
4. Socialization
5. Self-Esteem
6. Emotions-affection
7. Guidance
8. Education
9. Work-vocation

FAMILY STRUCTURE
(Who Belongs)

1. Differences in size of family and type of family.
2. Cultural differences
3. Differences in beliefs



FAMILY STAGES
(Over Time)

1. Single adult
2. Marriage
3. Birth of children
4. Children go to school
5. Children become adolescents
6. Children leave home
7. Retirement
8. Death

Adapted from: Skrtic, Thomas, Summers, Jean Ann, Brotherson, Mary Jane, Turnbull, A.P.; Severely Handicapped Children and Their Brothers and Sisters. In Blancher, Jane (Ed.) *Severely Handicapped Young Children and Their Families,* Academic Press, 1984.

Awareness of Personal Attitudes

Families are as individual as are the children with whom you work. To develop effective relationships with families you must be aware of your personal values and attitudes. Attitudes are rooted in your up-bringing, education, and life experiences. Most attitudes help build partnerships with families; however, some attitudes interfere. Consider your opinions about the following statements.

- Parents are not accurate observers/ reporters of their child's behavior.
- Parents are unrealistic goal setters.
- Parents do not know what their child needs.
- Parents do not know how to teach.
- Parents need us.

These statements reflect only a few judgments many hold about parents. Ignoring such attitudes may inhibit you. Acknowledging your opinions and feelings will assist you in not allowing them to interfere with building family partnerships. Building an effective partnership with a family requires a home visitor to accept the following.

- ☆ Families want to do what is best for their children.
- ☆ Families are the most long-term, concerned advocates for their children.
- ☆ Families are interrelated units. Working with one parent or child also affects the rest of the family.
- ☆ All families have needs in the following areas: financial, social, recreational, educational, vocational, emotional, guidance, and physical. Families' needs vary and change over time.
- ☆ Families have taught their children most of what they know and are capable of teaching new skills and using new methods.
- ☆ Families have solved their own problems without outside help. Some of their solutions are creative. (Vincent, Lisbeth, Family Support Conference, June 6, 1984.)
- ☆ Head Start families must assist in directing and evaluating the program (Transmittal Notice 70.2).
- ☆ Home visitors have access to techniques and resources which can help families.
- ☆ Home visitors want what is best for the family based on the family's assessment of needs and strengths.
- ☆ Home visitors want family participation.

When all ten assumptions are put into action in your home- based program, family/home visitor partnerships are well on their way. Successful partnerships result in parents talking openly, listening to home visitor's suggestions, identifying needs and a means of meeting needs, and understanding the importance of spending time with their child to extend his/her learning opportunities.

Development of Mutual Understanding

Partnerships fail unless responsibilities of the family and home visitor are specified. As a home visitor, you have a secondary role in the life and education of the children with whom you work. Let families know that you will support them, not replace them. Individualizing your support to families is the art of building healthy, self-confident families who learn to utilize community resources and to responsively interact with their child.

You may find building rapport and understanding with some families difficult. Frequently these families are socially isolated, have low self-identity, misperceive their child, and have difficulty trusting others. Some families may be withdrawn; you must be persistent in letting these families know you will hang in there because you care about their child and them. Here are some tips for working with these hard-to-reach families:

- Identify family members' strengths and reinforce them.
- Help the family set concrete, easily attainable goals to show family members they can succeed.
- Make program activities predictable by explaining what will happen and what is expected ahead of time.
- Be consistent!
- Show parents your interest by actively advocating for needed services.
- Include a time in each visit to discuss present concerns.
- Help parents to know they are worthwhile to their child and the program.
- Help parents assess their own attitudes about teachers, education, and their role in their child's education.

(Adapted from: Rundall, D. and Smith, S. *Working With Difficult Parents*, BYU Press, November, 1981.)

Effective Communication

A final building block in the foundation of your partnership with parents is communication skills. Communication is a basic human process. It is a process of exchange through which we attempt to meet needs. These may be personal needs, ours or the other person's, or they may be needs arising from work to be done. Needs may include safety, security, love, food, shelter, affiliation, learning, guidance, and so on. We communicate with the intention of meeting these needs.

Communication, defined broadly, is everything we say and do that affects other people and everything they say and do that affects us. The quality of communication depends upon the quality of two basic kinds of behavior—sending messages and receiving messages.

Receiving Messages or Listening

Being quiet when someone talks is not listening. Real listening is based on the intention to do one of four things: understand someone, enjoy someone, learn something, or give help or solace. Listening is a primary means of facilitating a feeling of acceptance and value in another person. There are two parts to real listening: the first is paying careful attention to what is said, noting facial expressions, posture, and tone of voice as well as the words spoken. At this stage you form a picture. The second part is hearing: interpreting what is said and trying to understand it. It includes filling in the picture and evaluating the relevance and reliability of the message. Accurate interpretation of the messages you receive is imperative to the on-going, decision-making process in which you and the family will be engaged.

To truly listen, you must assume the following attitudes:

- a conscious decision to listen,
- a suspension of judgment, and
- a resistance to external and internal distractions.

Becoming a good listener is an on-going process. It requires the continual development and reinforcement of these attitudes.

As with any other art, the art of listening requires a range of skills. Because listening is not a passive process but is, in fact, a very active process, the range of skills necessary is wide—and varied. Listening skills must always take into consideration cultural differences and the nature of the relationship between the individuals. You will likely need to vary your communication style from one family to another.

Let's take a look at some nonverbal skills that contribute to good listening. These silent skills can help communicate interest and concern and will build trust and respect.

► **Eye contact:** Look at parents when they speak. Eye contact communicates caring and thus, should be responsive and frequent. Cultural differences must be considered.

► **Body language:** Maintain a natural relaxed open posture that indicates your interest. Rigid, formal posture may convey avoidance, disinterest, or even disapproval.

► **Interpersonal distance:** The distance between you and the parent(s) can indicate the degree of your availability. The parent may feel invaded if you move in too close; if you're too far back, he or she may feel detachment, rejection, or dislike. Be aware of cultural differences and the meanings assigned to positions in space. Find the distance most comfortable for the parent. According to Rogers, there are four zones

- intimate: up to 1-1/2 feet
- personal: up to 3 feet
- social: 3 to 5 feet
- public: 5 feet

Verbal listening skills are spoken responses to the messages you are receiving, and they are crucial to effective listening. They develop, however, only with practice and patience. The verbal responses you will need for your listening repertoire are:

► **Non-verbal acknowledgment:** Brief expressions that communicate understanding, acceptance, and empathy, such as:

- *Oh*
- *I see*
- *Interesting*
- *Really*
- *Mm-hmm*
- *I get it*

► **Door openers:** Invitations to expand or continue the expressions of thoughts and feelings. Again, the listener is showing interest and involvement. Examples:
- *Tell me about it.*
- *I'd like to hear your thinking.*
- *Would you like to talk about it?*
- *Let's discuss it.*
- *Sounds like you've got some feelings about this.*
- *I'd be interested in what you've got to say.*

► **Content paraphrase:** Putting the factual portion of the message into your own words and sending it back to check your accuracy in understanding. Examples are:
- *Then the problem as you see it is. . .*
- *Do you mean, for example, that. . .*
- *In other words. . .*
- *What I hear you saying is. . .*

► **Active listening:** Helping the sender to understand both the thoughts and feelings of his/her communication. The listener does this by non-judgmental reflecting or mirroring of what he has heard. You must concentrate on what is said, how it is said, and then check your interpretation for accuracy. Examples are:
- *You sound upset when he doesn't mind you.*
- *You are not pleased with the way. . .*
- *You're stumped about what to do next.*
- *If I understand you correctly, you feel. . .*
- *You would like me to. . .*
- *You sound like you want. . .*

► **Open-ended questioning:** Use open-ended questions to encourage the other person to continue talking or to elaborate what he/she is thinking or feeling. For example, some typical questions might be:
- *How did you feel about that?*
- *Is there anything else that's bothering you?*
- *How important do you think this is?*
- *How would you like things to change?*
- *Where do you think we disagree?*
- *Can you say more about this?*

► **Non-verbal observation:** A sensitive observation of an individual's behavior to understand feelings that are not expressed verbally. Examples:
- *You look sad.*
- *You seem anxious and upset.*
- *I think you're getting nervous about the late hour (after noting clock gazing).*

You can see how each of these listening responses facilitates, rather than impedes, communication by providing the speaker an "open door." Adeptness with listening communicates respect and fosters an atmosphere of openness.

Sending Messages

In most communications the sending and receiving of messages is reciprocal and simultaneous. Most of the time communication is not just a series of exchanges; it is an on-going process in which a pattern develops. Communication effectiveness will always be dependent upon the sender's ability to communicate exactly what is intended and the receiver's ability to hear and understand the message as sent.

Sending messages involves three steps. **First,** you must determine the purpose for the message. **Next,** deliver the message as clearly and completely as possible. **Finally,** seek a response to the message, acknowledge, and evaluate it. The effectiveness of the communication will depend upon your flexibility in delivery, the relevance of the message to the receiver, the trust you've developed over time, and the clarity of the message. Consider the following tips for sending messages effectively.

- ★ Get clear on your purpose, and decide how important it is.
- ★ Choose your timing, place, and volume.
- ★ Plan your message and medium. Is it more effective to deliver it in person, on the phone, in writing?
- ★ When you deliver your introductory signal, watch and listen to see if you are "plugged in" with the other person. If the circuit has not been established, change your approach, timing, or volume—or reschedule.
- ★ Lead with what is important to you, the other person, and tell why. Acknowledge their needs as well as yours.
- ★ Be as clear as you can about what you want (I want your opinion, attention, understanding, ideas. . .).
- ★ Signal what is important with whatever props are necessary (hand gestures, increased volume, written material, etc.).
- ★ Give examples.
- ★ Be appropriately complete in providing information relevant to the topic. Do not confuse the message with irrelevant chit-chat.
- ★ Distinguish among your opinions, facts, hunches, wishes, suspicions, etc.
- ★ Watch his/her signals, both verbal (is he/she inviting you to continue?) and non-verbal (is he/she looking at the clock?). Check out understanding by asking questions.
- ★ Leave enough time for the other person to respond—that means you have to stop sending messages at some point.
- ★ Beware deluding yourself by "hearing what you want to hear" and ignoring the other person's signals.
- ★ If you are not sure of the other person's response, ask him/her!
- ★ Acknowledge his/her response by restating what you think it is: "Sounds like. . .," "You agree that something needs to happen. . .," "So you think. . .," "I hear you say. . ."
- ★ Let the other person know your intentions regarding his/her response. "I will have the coordinator talk to you. . .," "Let's talk about this next week after you've had a chance to think this over," "This week you will. . ."
- ★ Thank him/her in some way for his/her time and attention, even if you did not get exactly what you wanted.

As a home visitor you have a unique opportunity to build a relationship with parents that will assist the child and the entire family to grow. Thoughtful attention to the building blocks discussed in this chapter will form a solid foundation for your home-based program and for a partnership with parents.

Some thoughts on the home-based option by satisfied partners . . .

. . .The best thing home-based did for me was get me in touch with some other kids and parents and help me see that my kid wasn't the monster I thought he was.

Home-Based Parent

. . .I've got to admit that when I first heard about them coming into my home to help me with Head Start-kinds of activities . . .I was. . .well, I was skeptical about it. When Jo first started her visits, I did not really trust her and—though it sounds funny to say now—I just wouldn't have anything to do with her. I guess I thought she was just coming to help the kids, and when she tried to help me I was confused. But a little later she got me to play with the kids, and I realized that it was fun. She was always right there in case I ever needed any encouragement or instructions about what to do next. A feeling of love and security started to grow—as soon as I began gaining confidence in myself—as a mother and as a person. I learned more about myself, and I also learned that I was a teacher to my own children—a really <u>good</u> teacher. I think that for years to come, all of us in our family are going to be benefiting from that boost we got.

Home-Based Parent

. . .My son will be 5 in November. He is a very difficult child in the fact that he doesn't want to cooperate with anyone, including me. So when our visitor came last year, I don't know whether I forewarned her or not, I don't remember but he never cooperated with her very well. He didn't want to write any of his numbers. He didn't know how but he didn't want to learn the basics. She worked with me and I worked with him and eventually it all came together. Now this year, of course we had a different home visitor so we sorta had to start over again, but he gets along real well. Last year he wouldn't even talk to anyone except family. Now, he will give back answers, he'll respond. I feel that we have a better relationship because the home visitor helped me to communicate with my own son.

Home-Based Parent

. . .I am a better person, I am becoming a better mother. I listen to what he has to say and I give him answers. I used to not take time out to listen and now I help him and his father helps him too. It has helped us both to relate to him.

Home-Based Parent

. . .When our home visitor first came, I wondered what I was supposed to do, just sit there or go into another room or what? My son was really shy at first but then he got involved and made me excited about it. Louise came in and didn't act like she was better than me. She sat and told me a little bit about

. . .I feel the Head Start home-based program helped my family as a whole to grow together in expressing and feeling more love and understanding than what we thought we had. And with the support of the Home Visitor, our family has been able to communicate our feelings better, express our needs better with different agencies, and really made us feel good about who we are and our culture. In my opinion, the Mexican people really need support to say to them to feel proud of who and what you are, and I feel very very strongly that the Head Start home-based program does this and more.

Home-Based Parent

. . .I feel pretty good when my home visitor comes. Also, my children enjoy having her come to our house. I have changed in the ways I work with my children—like in discipline. I get down to their eye level and have eye contact when I talk with them. The importance of immunization, personal hygiene, dental check-ups, eating the basic 4, and eating good nutritional food. I feel Home-Based and Head Start has really helped my girls—they were more prepared when they started in the public school. I also feel a lot of it has to do with the parent's interest and involvement with the children in school by being supportive and taking time with each one.

Home-Based Parent

. . .When they (Head Start) first started coming, I didn't feel too comfortable with them. Then I realized that it was important to be with your kids and play with them and spend time with them. Before that I didn't think it was that important. My grandmother didn't ever play with me, just left me to myself. She used to tell me stories, more like fairy tales, from the beginning of Indian time in the Sioux language. I've started to tell my kids the stories my grandmother told me. In discipline I'm a lot more at ease with them nowadays. I'm patient with them. It helped me realize that they're just kids and that they have to learn in their own way.

Home-Based Parent

. . .Home-Based helped me do things different from the way I was brought up. I didn't want to whip my kids like they did me. I learned a lot about discipline. Instead of spanking them, I don't let them watch cartoons or I have them sit in a corner. When Elsa was born, Desiree was acting up. They told me to read to Desiree and to spend a few minutes just with her. I tried it and it helped a lot. She really settled down. When Elsa got a little older I would read to her too and she liked it too.

Home-Based Parent

. . .My home visitor helped me to see that there are no magic recipes for raising my child, and that I didn't need a lot of money to do right by him. She showed me that being loving and consistent was the best gift I had.

Home-Based Parent

. . .My home visitor believed in me and after a while I began to believe in me, and in my kids too.

Home-Based Parent

herself and she would tell me things that happened at her house and I would tell her things that happened at my house. She made me feel like she was coming to be my friend not just because it was her job.

Home-Based Parent

. . .When I first started, Mary was there and she came in and explained Head Start. She likes your opinion and takes it. and we talk it over. She is open. She said she likes parents involvement more than herself being involved and she was always open to suggestions. She teaches you to teach your child in a constructive way not a demanding way.

Home-Based Parent

. . .You have to be interested in what the child is doing in order to help teach during the week and along the way. The home visit to me is a wonderful thing because it gives the child and parent a chance to sit down and work on a common project. It motivates the parent to take an interest in it and when a child sees that his parent is interested in what he's doing, motivation becomes even more greater for the child. It is a rewarding experience for me and my wife both.

Home-Based Parent

. . .It has helped me as a single parent to not only discipline my daughter but to praise her when she is doing something right. The praise has helped her the most, I think.

Home-Based Parent

. . .With the home visits, I got a chance to participate with small children and see what made them tick. It was a play time for all of us. We enjoyed it. Once people get a taste of a home visit, I would say only the biggest fool will criticize it or turn it down.

Home-Based Parent

. . .I was looking forward to meeting the home visitor when I first go into the program last year. I never get company so I was looking forward to talking to an adult to come in to visit and teach me to work with my children. I needed to be taught that because I grew up too fast. I had seven kids and now I am learning that you do have to work with your kids. I thank God for the program and that somebody came along and helped me as a mother to become a better parent. So I look forward to the visitor and the parent groups and play groups and all that. My home visitor is very understanding. There's times when she will come to my house and I am under so much stress and we talk and by the time she leaves, I am feeling better. We are friends. She will never invade my privacy.

Home-Based Parent

. . .Home-based helped me to see that I had some choices and the power to change things I didn't like.

Home-Based Parent

Follow-up Activities

1. Read your program's statement of philosophy. Does it reflect the current research? your beliefs? What would you add to or delete from it?
2. Characterize the impact on a home visitor's behavior of the belief that parents are partners. What is your belief and opinion? How do or how will your beliefs influence your behavior as a home visitor? List concrete examples.
3. With colleagues, role play a debate between theorists who emphasize a child-centered approach to home visiting and those who stress the importance of a parent-focused approach.
4. Thoughtfully complete the quiz in the Approaches to Home Visiting portion of this chapter. Congratulations if you could answer "yes" to all of the questions! If you answered "no" to some of the questions, develop a plan of action to turn them into "yes!" Include resources, time lines, steps, and goals.
5. Recall a recent home visit and review it in light of the twelve adult learning strategies found in the Adult Education portion of this chapter. What strategies did you neglect to use? How can you integrate them into your next home visit?
6. Gather your colleagues. Divide them into small groups (2-3 persons) and assign each group one of the twelve adult learning strategies. Ask them to brainstorm as many concrete ideas that they can think of to implement the strategy. Share each group's work with the entire group, and continue with this process until all strategies have been examined.
7. Most attitudes you hold are helpful in building partnerships with families, but some may inhibit your ability to build helping relationships. Write down your feelings and opinions about parents, especially as educatiors of their children and as partners with you. Develop this list over a period of time, being aware of your feelings as you work with families. Assess these feelings and determine whether they help or hinder building partnerships. Next, review the ten assumptions underlying a healthy partnership in the section called Awareness of Personal Attitudes. Use this list to help you refine your belief system.
8. Enlist the aid of a colleague. Ask him or her to think of an experience he or she has had, perhaps recently, that you don't know about. Ask closed questions and open questions as the experience is related. Discuss with your colleagues the comparative effectiveness of the two types of questions.
9. Ask a family member, friend, or colleague to help you practice the skill of paraphrasing. Paraphrasing usually involves selecting facts that seem most important and restating them briefly in a neutral way. Ask your volunteer to discuss a problem with you or use one of these conversation leads:
   - *I don't look forward to* _____ *because* _____.
   - *I hope that I will* _____ *when I am 85 years old.*
   - *Whenever I think about the weekend, I* _____.
   - *I really hope I never* _____.

   Practice paraphrasing the content. If possible, tape record the conversation(s) so you can critique your skills.
10. Investigate workshops and seminars given by university extension programs, mental health clinics, vocational schools, etc. pertaining to the development of communication skills. Sign up for one of them and offer to share the information at a staff meeting.

2

Framework for the Home-Based Program

Objectives

As a result of reading this chapter, the home visitor will:

- outline the steps necessary for a successful recruitment effort and discuss his or her role in that effort;
- list three different types of evaluations conducted in order to plan services for the child and family;
- discuss their role in increasing a family's ability to independently secure services from the community.

The following chapter will look at some of the foundations of a good, solid home-based program. Community needs assessment, recruitment, screening and assessment, and linking community resources with family needs are all essential supports to the well functioning program.

Community Needs Assessment

Assessing the needs of the community is an essential beginning for all Head Start programs. When determining a need for the home-based option, answer the following questions based on numerical data, interviews with parents and staff, and survey of community resources:

- Has there been a thorough assessment of needs that has established a clear community interest in having home-based services?
- Are there enough families definitely interested in and eligible for participating in a program which emphasizes home visits and the role of parents?
- Does existing staff already have the skills and interests needed to work effectively with parents in their own homes? If not, does the program have, or can it obtain the considerable training necessary to prepare the staff for their new roles? Is the staff willing and interested in receiving such training? Is the staff culturally and linguistically compatible with families to be served?
- Can transportation needs be met? Although public transportation may be efficient, experience has shown that home visitors need car transportation to get around quickly, to transport materials, to take parents and children to local special service agencies.
- What will be the impact on the number of people involved? How many people are in the families? How many will be directly served by a home-based program?
- Which Head Start program option will provide for more individualization in meeting the needs of children and families?
- How can the home-based program obtain full and continual involvement of parents?
- By focusing the home-based program on total families, will a home-based approach be more effective?
- Can some attempt be made to involve children in group activities as well as home visits, so that they can derive the benefits of group interaction?

Recruitment

Finding families is what recruitment is all about. Without families and their participation, there is no program. During the recruitment process parents and the community get their first impression of Head Start; it is essential to make it a good one. Making a positive first impression requires planning, training, ingenuity, patience, and some luck.

Recruiting families for the home-based program takes considerable thought and planning. This is particularly true in an area where the home-based concept is new. Be sure to allow adequate time for this process to evolve.

To ensure a successful recruitment effort, the following need thorough attention:

- definition of home-based service area,
- evaluation of any previous recruitment efforts,
- planning,
- implementation,
- staff training, and
- application processing,

Definition of Home-Based Service Area

An enrollment priority policy must be determined before recruitment begins. This is particularly true if the Head Start program is offering home-based and center-based options. In this case preference to the home-based option could be given to:

- families whose needs assessment indicates a need for home-based services;
- families who are spread out geographically;
- families who are unwilling or unable to transport their child regularly to the center; and
- families with younger children (3 years of age) who can then move into the center-based option at the age of 4.

One policy that is NOT RECOMMENDED is using the home-based option as a "holding pattern" for children not able to get into the center-based option.

Evaluation

Before moving forward with recruitment, evaluate your program's previous recruitment efforts. Generally evaluation is thought to be the final phase of any effort. In the case of recruitment, it is, however, a very important beginning.

Assessment of each aspect of previous recruitment strategies will provide valuable information in planning this year's efforts. Useful questions to ask include the following:

- ☆ How well was the overall recruitment effort coordinated?
- ☆ Were any aspects less organized or coordinated?
- ☆ Was there enough time for all recruitment activities? What caused the major delays, if any?
- ☆ Which media methods (T.V., radio, brochures, newspaper announcements, etc.) were most effective? What additional methods could have been used?
- ☆ What recruitment activities were most successful? Is there any fine tuning of activities needed to make them more successful?
- ☆ How well did recruitment staff do? Did they have the necessary time, training, and materials?
- ☆ How successful was the total recruitment effort? How was it received by parents and the community at large?

Planning

The recruitment plan clarifies which activities take place at what time. A yearly plan is vital to the success of recruitment efforts. Families' needs change, community resources change, the socio-economic status of families changes, and your program itself changes; the recruitment plan needs to reflect these changes.

Coordination

One person, generally the Social Service Coordinator, should be responsible for coordinating recruitment activities. Responsibilities of the recruitment coordinator include:

- developing a recruitment plan,
- obtaining lists of potentially eligible families from home visitors,
- developing and distributing pamphlets, posters, newspaper articles,
- initiating contact with other agencies including agencies serving handicapped children and local schools, and
- assigning responsibility for contacting families who are potentially eligible. These contacts may be made by home visitors, aides, handicap coordinators, social service coordinators, etc.

Recruitment Plan

The first responsibility of the coordinator is the development of a recruitment plan. The plan should take into consideration all the information gathered during the evaluation process. A well-designed plan will greatly facilitate recruitment efforts.

Before putting a plan on paper, ask the following questions.

- What activities are to be completed?
- Who will be responsible for each activity?
- When should each activity be initiated and terminated?
- How can you tell if the activities were successful?
- When, how, and by whom will recruiters be trained?
- What community agencies will be contacted?
- When will potentially eligible families be visited?
- What forms will be completed on the initial home visit?

A sample page of a recruitment plan is presented in Figure 1. The activities, personnel responsibilities, time lines, and evaluation or completion indicators may vary considerably based on past experience and the specific needs of the community.

Though the items may be quite different, the process of planning and assigning responsibilities has been consistently helpful.

Implementation

Implementation is **doing** those activities you have planned. An outreach effort to individuals and agencies that work directly with children and families is a good beginning. These individuals and agencies need to understand the goals and services of the home-based program if they are to make appropriate referrals. Establish a communication line by taking the time to make an appointment with them. Outreach should be an ongoing effort.

RECRUITMENT PLAN

ACTIVITY	WHO IS RESPONSIBLE	WHEN	EVALUATION COMPLETION INDICATORS
Request lists of names from home visitor of potentially eligible children	Social Service Coordinator	April–May	Number of lists recorded
Inform public through: newspaper announcements posters parent meetings school newsletters	Social Service Coordinator Home Visitor	May–August	Number of referrals received from each Number of announcements
Attend early childhood and local kindergarten screenings	Handicap Coordinator Home Visitor Social Service Coordinator	Spring–varies by school district	Number of referrals received from each Number of screenings attended
Distribute pamphlets in Public Assistance mailings	Social Service Coordinator	May and August	Number of referrals received
Contact agencies serving children: handicapped and non-handicapped	Social Service Coordinator Handicap Coordinator	May–August	Number of referrals received from each resource for coordinating services established
Divide referrals by geographic area and make initial contact	Home Visitor	May and August	Total number of referrals in each geographic area Number of applications completed Forms completed

Figure 1

Starting a home-based program in an area where the center-based model has prevailed may pose some problems. The entrance of the "new approach" may cause anxieties, rumors, and/or conflict. Much of this can be eliminated by providing adequate information, discussion, and time for a successful entry. Informative presentations and discussions with local groups and, particularly, with local Head Start community members are extremely important.

There are many effective methods for reaching out into the community to find families. The more varied the methods, the greater the chance of finding the families most in need of the program. The Outreach Recruitment Activities Chart (Figure 2) describes several types of recruitment activities, the information to include, and places to distribute the information. Make sure every activity emphasizes parent participation as illustrated in Figures 3 and 4.

Staff Training

Staff must have a thorough understanding of the program and the recruitment process so they can effectively inform the parents and respond appropriately to questions. For a home-based program to work as well in practice as in theory, parents must understand how it works, what are their responsibilities and what their children and family can gain from their involvement. Staff recruiters with poor knowledge of the program and poor interpersonal communication skills will not only contribute to a lower number of families recruited but also to poor public relations.

Figure 2

OUTREACH RECRUITMENT ACTIVITIES

ACTIVITY	INFORMATION TO INCLUDE	DISTRIBUTION
Newspaper Announcement	• Identify program (name, address, phone) • List component areas • Who is eligible • Indicate availability to handicapped • Mention program options: home-based, center-based, combination (see Figure 3)	Local papers
Poster	• "Catchy" phrase • Picture with children • Who is eligible • Availability to handicapped • List services available through program • Tear-off card to be returned to program for more information	Public Health Department Local Post Office Human Service Office
Pamphlet	• Pictures • Short paragraph describing Head Start • Who is eligible • Explanation of services • Identifying information	Welcome Wagon Public Assistance Mailings Food Stamp Offices Neighborhood Groceries Parent Meetings Doctors' Offices Laundromats
Radio Announcement	• Eligibility • Brief program description • Telephone number to contact	As many stations as possible in the area

Figure 2 continued

ACTIVITY	INFORMATION TO INCLUDE	DISTRIBUTION
Public School Newsletter	• Who is eligible • Who to contact	All elementary schools in the district
Contact Agencies Serving Children: Handicapped and Non-Handicapped	• Initial Letter: (see Figure 4) – Description of Head Start program services – Program options: Center-based Home-based Combination • Personal Visit: – Discuss coordinating services – Share program and curriculum information – Plan referral procedure	All in the area
Public School Preschool Screening	• Set up information table: pamphlets posters and pictures applications • Head Start representative available	All schools in the district
Television Interview on Local Program	• Describe program and services • Invite interested families to visit the program • Show pictures from home visit	Local station
Television Spot	• Pictures • Brief description of program • Telephone number to contact	Local station
Speak at Local Organizations	• Answer questions about program • Show slides or pictures • Distribute pamphlets	Civic organizations Parent/Teacher Association Church groups
Letter or "Stuffers" to be added to mailings	• Brief program description • Eligibility criteria • Contact person	Social Services Agencies Community Health Agencies

Figure 3

NEWSPAPER ANNOUNCEMENT

Parents!! You and your children may be eligible for the _____Head Start Program. This is an opportunity to participate in an educational program that also provides medical-dental-nutritional and social services to the family.

Center-based and home-based programs are offered. Children with special needs or handicaps are eligible to participate.

For more information contact:

_____Head Start
444 South 10th
Hometown, USA
Phone ( )

Figure 4

LETTER TO COMMUNITY

Dear

Head Start programs serve children between the ages of three to five. The purpose of this letter is to inform your agency of the Head Start program and to request your cooperation in offering the program to children and families served by your agency.

Children between the ages of three to five from low income families are eligible for Head Start. Ten percent of the slots in the program are available to families above the income guidelines; ten percent are also reserved for children with handicapping conditions. An individualized plan in the component areas of education, health, social services, and parent involvement is developed and implemented for each child.

Two types of service delivery systems are available: home-based and center-based. In the home-based program, a home visitor makes weekly visits to the home and teaches the parent to do daily activities with the child. Children in the center attend four days a week for half a day. Services in health, social services, and parent involvement are the same for both types of programs. The child's needs determine the type of program.

As coordinator, I would like to further discuss the Head Start program with you. If there are children and families served by your agency who could benefit from Head Start, please provide their name, address, and telephone number.

I look forward to meeting you and coordinating services between our agencies.

Sincerely,
Coordinator

The Recruitment Visit or Initial Home Visit

The utmost care must be taken with the first family contact. There are some important questions to consider when preparing.

Who from your program will make the initial home visit?

The suggested person is the potential home visitor. The home visitor is familiar with the unique aspects of a home-based program and can best describe these to the family.

What is the purpose of the initial visit?

The purpose of the visit is to provide more information about the program, determine eligibility, and complete application and other forms as necessary. The PACT program in Camp Point, Illinois developed a recruitment activity form which is very helpful (Figure 5). This form documents contact with the family and records useful information for future recruitment.

What can you, the home visitor, do before the contact to ensure success?

You should, if possible, call in advance to make an appointment. Dress casually, comfortably, and neatly. You should be organized. Take a recruitment packet and be prepared to explain the purpose of your visit. Take something along such as a book or paper and crayons that will entertain children.

What information should be provided on this visit?

You should identify yourself, giving name and title, and introduce anyone helping with recruitment—a parent or other staff. Sometimes a form of identification is helpful (maybe a button or name tag).

Explain briefly but clearly what the program is, what it offers, whom it serves, and how the family will be involved. Do not overwhelm the parent—be selective with information. A bright clear brochure will be helpful in explaining the program. Leave one with the parent at the conclusion of the visit.

Ask open-ended questions to check understanding (i.e., *How do you feel?* or *What are some ways. . .?*). Stay away from questions that require just a yes or no response.

Inform parents that only the application is being taken at this point, and explain the approval procedure. Discuss enrollment guidelines—most local programs will have these in writing.

Explain how forms will be used, why the information is needed, and who will have access to them. Remember all information taken is confidential. You may wish to leave medical and dental forms.

Let the family know when the next contact will be made. Leave your name and number if they wish more information. Leave a brochure for the family to read and discuss.

The recruitment visit or initial home visit should be a positive experience for the family. As a recruiter you are selling a product to a consumer—a Head Start home-based program to families. Through this contact your goal is to communicate the intent, quality, and spirit of the program. The following concepts and information need to be communicated during the crucial initial contact.

- The home visitor and parents form a PARTNERSHIP and work closely together to help the parents respond to their own concerns and expand their skills as parents.

Figure 5

PACT Program
Camp Point, Illinois

HOME VISITOR REPORT FORM
Recruitment Activities

TIME CONTACTED _____ NAME _____

DATE _____

Family Name _____ Child's Name _____

Finding Address _____ Telephone No. _____

_____ Referred by _____

_____ Length of Visit _____

_____ Family discussed the program and applied for enrollment

_____ Family discussed the program, but was not willing to apply for enrollment because _____

_____

_____ Family not willing to discuss the program. Reason given _____

_____

_____ Family does not have children of eligible age. List the preschoolers who are not yet three years of age.

NAMES	BIRTHDATES
_____	_____
_____	_____

_____ Family would like more information about _____

_____

_____ Family is not eligible because income is slightly too high

_____ Family is not eligible due to too high income

_____ Family was not home. Will return _____

_____ Family cannot be located

Follow up needed: _____

Other comments: _____

_____

- The home-based model, like the center-based model, is one of a number of ways that Head Start delivers services.
- Parents are the most important and effective teachers of their children.
- The home-based model offers parents skills in how to work with their child(ren) by utilizing the many learning opportunities in their home and in their daily routines.
- The home-based model also provides for regular parent/child get-togethers for fun and learning.
- Home visits can be scheduled at the parent's convenience, but the parent must be willing to meet regularly with the home visitor.
- Everything that happens in the home is treated as confidential information.

Application Processing

With successful planning and implementation, families are recruited and applications begin to come in. These must be processed. All the planning and recruitment efforts in the world will mean nothing if there is not an effective way for receiving and processing applications.

The following questions should be addressed to ensure quick, accurate, and thorough processing of applications.

- Who will coordinate the processing of applications?
- What is the timeline?
- What strategies will be used for receiving and processing applications?
- What forms will be used for documentation?
- What procedures will be used for contacting and obtaining additional information?
- What forms will be used to collect information and document special needs or conditions?

Summary

Recruitment is an ongoing process. As a home visitor, you should be constantly aware of prospective families for the program. Though methods for locating families for a home-based program will vary from agency to agency, an effective recruitment effort will set the stage for a successful program year.

To evaluate your recruitment effectiveness in the coming year, an Evaluation Form, Results of Recruitment, has been included (see Figure 6). This form will facilitate the yearly planning efforts by providing you with valuable recruitment information. This information will also be useful in your overall program planning.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Recruitment ideas from exemplary programs.

One program recruits in the spring and does the screening on all children (Denver), then uses the results as part of their eligibility to get into the program.

Our best recruiters are our parents; it's word of mouth.

One day in June, everybody from Head Start plus the parents hit the streets and recruit.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Figure 6

EVALUATION FORM
RESULTS OF RECRUITMENT

1. Number of children recruited ..... _____

2. Source of Referral — Number of Children Recruited

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

3. Rank of three top recruitment strategies responsible for enrollment of children.

1. _____

2. _____

3. _____

4. Total number of children enrolled in Head Start program ..... _____

5. Total number of children professionally diagnosed as hand capped upon enrollment ..... _____

Taken from: *Guide to Recruitment: A Manual for Head Start Personnel in Recruiting Handicapped Children,* David Hodskins et al. Chapel Hill, NC: Chapel Hill Training Outreach Project.

Screening and Assessment

Another essential aspect of a quality home-based program is the screening and assessment process. This process enables your program tc determine the needs of the children and families served.

In Head Start home-based programs the home visitor delivers services to the entire family. A thorough evaluation of the needs of the focal child(ren) and the rest of the family is necessary to insure appropriate service delivery. Three types of evaluations are needed, and each requires different instruments and methods. The type of evaluations conducted with all Head Start children and their families are: 1) family assessment, 2) screening, and 3) developmental assessment. An additional evaluation, diagnostic assessment, is carried out with children whose screening and assessment results indicate that they may have a handicapping condition. These children are referred to appropriate professionals such as psychologists, audiologists, and doctors who gather and provide diagnostic data. Each type of evaluation provides you with valuable information to develop a meaningful and individualized plan of action for children and families.

It is essential that parents are involved as equal partners in each type of evaluation. The following suggestions are given to insure that this partnership between the parents and you develops.

- Discuss with parents the reasons why information is gathered and emphasize that the information will be used to plan activities based upon the specific needs of each family.
- Review and emphasize that all the information obtained is confidential.
- Stress co-planning, and allow parents to develop their own program to meet their needs.

Family Assessment

The first type of evaluation conducted by home visitors is the family assessment. This assessment concentrates on the expressed needs of the family in the areas of nutrition, health, social services and education. This evaluation is necessary because Head Start is a comprehensive program designed to meet the needs of the total family. It is not your role as a home visitor to tell a family what services or assistance they need. Instead, the family assessment process represents an organized method of assisting families to identify their own strengths and needs, set goals to meet these needs, and carry out activities that lead to attainment of these goals. Head Start's goal in this support process is for the family to increase their skills and independence in meeting their own needs.

As with child assessment, family assessment is ongoing throughout the program year. The objectives of the family assessment process are:

- to assist the family to determine their strengths and needs,
- to assist the family to resolve their immediate problems,
- to encourage and assist the family to set short and long term goals, and
- to build an awareness of alternative approaches through problem-solving techniques.

Family assessment is designed to be accomplished in three steps:

1) to identify strengths and needs,
2) to set and prioritize goals, and
3) to plan ways to meet the goals.

Step 1: Identification of Strengths and Needs

The first phase of the family assessment process increases the family's awareness of their interests, strengths, and current status; available community and program resources; and family needs or desired services. The Child and Family Development Program in Scottsbluff, Nebraska initiates the family assessment process by asking parents to complete "Our Family's Strengths and Goals" (Figure 7). This form is given to families on the first home visit and completed by the third visit. The process is continued on subsequent home visits by discussing community resource directories and highlighting various agencies and the services they provide. Additionally, programs have found that parent questionnaires, interview guides, and family profiles provide specific information on the family's current status or interests and increase the family's ability to assess their own strengths and needs. Generally these are completed during the home visit by the family and home visitor. Some programs have established a team approach that includes the home visitor and at least one other person on the assessment team. In other programs, component coordinators do the family assessment. Samples of instruments used to determine strengths and needs are on the following pages (Figures 8a, 8b, and 9).

A word of caution! The family assessment process doesn't stop here. Determining strengths and needs gives the home visitor and family some basic information on areas to target for work, but it does not increase the family's ability to problem solve and extend their capacity to meet their future needs. Completing the remaining two steps in the process is essential in maximizing lasting impact on families.

Step 2: Set and Prioritize Goals

After interests, strengths, and needs have been identified, parents will set goals which lead toward meeting their needs and expanding the experiences. Goals are written in measurable terms, stating exactly what will be done and and how to determine accomplishment. Once goals are written, priority should be determined.

At times leading the parents to select the interests/needs with immediate results of their efforts can be helpful. As these interests are satisfied, other goals can be added. When a trusting relationship is established, the areas of interest and need are sometimes of a more serious nature, such as child abuse or alcoholism, than those initially identified.

Goals may be recorded on a log sheet or plan (Figure 10). This log sheet provides a running record of goals set throughout the program year. Additionally the form may contain dates when action was initiated to reach a goal, estimated time required to accomplish goal, names of providers of service or information, and dates of achievement for each goal.

Figure 7

PANHANDLE CHILD DEVELOPMENT PROGRAMS
OUR FAMILY'S STRENGTHS AND GOALS

WE FEEL GOOD ABOUT OUR FAMILY BECAUSE:

1.

2.

3.

4.

WE WOULD LIKE OUR FAMILY TO:

1.

2.

3.

4.

DURING THE NEXT THREE MONTHS WE WOULD LIKE TO:

1.

2.

3.

4.

WE WOULD LIKE OUR FAMILY TO BE ABLE TO: (LONGER THAN THREE MONTHS)

1.

2.

3.

4.

OUR FAMILY IS HAVING TROUBLE WITH:

1.

2.

3.

4.

Child & Family Development Program
Panhandle Community Services
4502 Avenue 1
Scottsbluff, Nebraska 69361

Figure 8a

Child & Family Development Programs
Panhandle Community Services
4502 Ave. I
Scottsbluff, NE 69361

FAMILY ASSESSMENT
Information Sheet
Interview Guide

LIFE SUPPORT SYSTEMS

1. IDENTITY (Personality & Role in Family — How they feel about themselves)
2. HOSPITALITY
3. FRIENDSHIP (Within and outside of family)
4. EXTENDED FAMILY (Relationships, Rights & Obligations)
5. LEISURE TIME ACTIVITIES
6. CELEBRATIONS (Holidays, Birthdays, & Ceremonies)
7. QUALITY CONTROL (Attitudes about Quality)
8. TEAMWORK (How family works together)
9. FOOD
10. CLOTHING
11. SLEEP
12. SHELTER (Home/Area)
13. HOME MANAGEMENT (Housekeeping/Outdoor Area)
14. BUDGETING AND MONEY MANAGEMENT
15. TRANSPORTATION
16. EMPLOYMENT
17. ILLNESS BEHAVIOR (Attitudes about illness)
18. PERSONAL APPEARANCE & HYGIENE
19. PREVENTION OF ILLNESS, ACCIDENT OR INJURY
20. CHILD REARING (Interaction between family members, Discipline, Child Development, etc.)
21. COPING WITH PROBLEMS IN LIVING
22. BODY AWARENESS & SEXUALITY
23. SUPPORT (Within family, by agencies, etc.)
24. COMMUNICATION & RELATIONS WITH THE COMMUNITY
25. EDUCATION
26. LEGAL SITUATIONS

Figure 8b

Child & Family Development Programs
Panhandle Community Services
4502 Avenue I
Scottsbluff, Nebraska 69361

GUIDANCE PAPER

for use with INFORMATION SHEET

GUIDANCE IN ASSESSING ACTION SYSTEMS:

1. IDENTITY

What do you feel are your good points? —what do you like about yourself?
———— weak points? — dislike?
What things make you feel good? feel bad?
Is there anyone who makes you feel "special"? How?
Does anyone (in the family) seem to be or indicate a feeling of being "picked on" or left out? How?
How do children feel about themselves — each other — the parents?

2. HOSPITALITY

Is family comfortable having program staff member(s) in the home?
Are friends and neighbors invited into the home to visit?

3. FRIENDSHIP

a. In the Family:
What behavior changes would you like to see in your spouse or your relationship?
What do you think are the good points about your family? weaknesses?
Would you like your family to be different? How?
b. Friends outside the family:
Do you and your spouse have the same friends or different ones?
(Asking a child: Does your parent(s) have a special friend?
Does he or she get to see the friend often?

4. EXTENDED FAMILY

Problems and concerns of persons important to the children but living outside the household
Are there relatives in the area? Do you visit them or they visit your family?
Others living in the home and their influence and role

5. LEISURE TIME ACTIVITIES

What kinds of things do family members do together?
What would you like to do together?
Does family feel that there are enough opportunities for recreation for all family members?
How much TV do you watch? Children?
How is leisure time spent? By Father? By Mother? By children?

Figure 8b continued

6. CELEBRATIONS

Does your family celebrate (1) birthdays, (2) anniversaries, (3) special occasions? How?

7. QUALITY CONTROL

Attitudes of each spouse about quality

Where do you shop for furniture, groceries, clothes?

What care is taken of material goods?

8. TEAMWORK

How does your spouse back you in your decisions or help you carry them cut? — especially in area of money management? child rearing?

How do you support your spouse's decisions?

What things do you like to do together best?

Does total family share responsibilities? Have assigned tasks and follow through?

Do siblings play/work together

what sibling relationships exist?

9. FOOD

Does family feel it eats well and has a balanced diet?

Do financial problems create lack of food?

Does family receive (or want to receive) food stamps now?

Does family want to learn more about: Nutrition? Food preparation?

Does family eat at least one meal together?

10. CLOTHING

How are clothing needs being met?

Include care of clothing — laundry and repair

Do you have a washing machine or go to laundromat?

Are family members interested in information on selection and/or construction of clothing?

Is there adequate storage for clothing?

When the children need clothing, where do you buy them?

How do you plan for clothing expenses?

11. SLEEPING

Sleeping arrangements: How many beds do you have? Crib? Who sleeps where?

Sleeping patterns: Number of hours, regularity

12. SHELTER

Adequacy for size of family

Condition

Figure 8b continued

Condition of neighborhood

Need for repairs

Need for furniture

Play area for children — availability and safety at home in nearby area/park

13. HOME MANAGEMENT

Housekeeping: Attitudes and skills

Outdoor Area: Cleanliness, safety and upkeep

14. ADMINISTRATION OF FUNDS

Family attitudes about money

Spending patterns (credit, cash, installment buying)

Who controls family funds?

Is saving important?

Children and money management?

15. TRANSPORTATION

Is there a problem — if so, what?

What means of transportation is (are) used?

What is available in emergencies?

How do children get to school? Activities?

16. EMPLOYMENT

Are working family members satisfied with employment?

Are non-working family members interested in employment?

Employment patterns: Length of time employed. Reasons for leaving

Interest in employment training — new opportunities

17. ILLNESS BEHAVIOR

Family attitudes about illness of themselves or other family members (pathological - psychosomatic)

Fears of illness or treatment

Handicapping conditions

Problems related to drugs including alcohol

(Note: Health information and data is obtained separately — recorded on health information forms.)

18. PERSONAL APPEARANCE AND HYGIENE

(Space is allowed for observations or comments about individual family members)

How often are family members expected to bathe?

Do children have and use toothbrushes?

Figure 8b continued

19. PREVENTION OF ILLNESS, ACCIDENT OR INJURY

Physical safety of home and surroundings, i.e.: fire hazards, does family have fire plan? have precautions been taken to make home safe such as plastic bags out of children's reach?

Does family see need of visiting medical professional when well? (physical exam, pap smear, dental checks, immunizations?)

Illness prevention: clothing, diet, sleep, heating, etc appropriate for season, etc

20. CHILD REARING

Parenting skills and knowledge?

Does family have problems finding satisfactory child care? (including before and after school)

What are the relationships of each parent with each child?

How do parents feel they are getting along with each child?

Discipline problems? What measures of discipline are used?

Is there time set aside when the children have parents or extended family member's undivided attention to play, read stories, talk, etc.? How much time?

Do parents take "Executive responsibility" or do children control family?

21. COPING WITH PROBLEMS IN LIVING

Loving or caring relationships within the home

How does family react to stress?

How does family go about problem solving?

To whom do family members go to share serious problems — to talk about activities, problems, kids, work, neighborhood?

22. BODY AWARENESS AND SEXUALITY

How is sex education handled in family?

Religious and cultural attitudes influencing.

Does either spouse perceive a problem? What is perceived as the problem?

23. SUPPORT WITHIN FAMILY

Who do family members go to when in need or hurting?

Do they know of resources to meet needs?

Are family members in agreement about sources of support?

24. COMMUNICATIONS WITH OUTSIDE

How aware is family of what is happening in the community? the world?

Is family involved outside of immediate family? — Social groups, etc

Figure 8b continued

What access to outside world does family have? — TV, radio, newspapers, etc With schools, churches, law enforcement, local government, employer or emoloyee groups?

25. EDUCATION

What education or training do family members have? desire?

What is area of interest?

In what area lies the highest potential?

What is parent's perception of school-age child and his education?

Do parents attend conferences/school programs?

Do parents communicate their concerns with the school?

Information about child? Special needs?

How does child feel about school?

26. LEGAL SITUATIONS

Do you have legal concerns? (i.e related to divorce, alimony, child support, adoption, social security benefits, etc.)

Financial problems, fines, arrests, rental problems?

Legal contracts?

Figure 9

Parent and Child Education Program
Mill Shoals, IL

FAMILY NEEDS ASSESSMENT

Child's Name _____ Program Location _____

Parent Name _____ Date _____

A. Ways parents would like to participate in P.A.C.E.:

- __ Volunteer in the classroom/socialization day
- __ Assist on field trips
- __ Attend monthly parent meetings
- __ Prepare educational materials at home
- __ Plan activities, field trips, parties
- __ Participate in fund raising projects
- __ Babysit for other parents (take turns)
- __ Telephone other parents
- __ Write notes and meeting notices to give parents
- __ Provide ride for other parents to child's medical appointments (must have license and insurance)

B. Would like to learn more about the following areas:

- __ Child development, incl. handicapping cond.
- __ Child behavior management
- __ Nutrition, gardening, canning
- __ Family planning, birth control
- __ Weight control, grooming, dress
- __ First aid, home safety
- __ Budgeting, wise shopping habits
- __ Sewing
- __ Self protection for women
- __ Singles groups
- __ Marriage, family counseling
- __ Home repairs, maintenance, decorating
- __ Simple auto mechanics
- __ Arts, crafts, hobbies
- __ Alcohol, drug abuse
- __ Other

The above may be provided at parent groups, special groups or individual information made available through referrals. Does parent have skills in any of the above areas? Detail:

C. Employment Skills:

If employed: Employer _____ Job _____
Full time/Part time

Is parent interested in:

- __ Employment counseling
- __ Job skill improvement
- __ ABE/GED
- __ Vocational or college training
- __ Obtaining driver's license
- __ Assistance with day care

D. Health:

- __ Parent has special needs because of handicapped child. Explain: _____
- __ Parent needs assistance to complete follow-up identified by medical exam. Explain: _____
- __ Parent needs assistance to complete dental exam. Explain: _____
- __ Parent needs assistance to complete dental follow-up. Explain: _____
- __ Parent needs health and sanitation information.

__Y/N__ Is mother pregnant?

- __ Needs medical care related to pregnancy.
- __ Needs information related to pregnancy.

Parent and Child Education Programs
Mill Shoals, IL

FAMILY NEEDS ASSESSMENT, Page 2

Child's Name _____

E. Housing:

Family owns/rents: 1-house 2-mobile home 3-public housing 4-apartment

Rooms __ Is size and condition adequate? Y/N Explain no: _____

House needs: 1-insulation 2-storm windows 3-indoor plumbing 4-hot water

Is heating adequate? Y/N If no, explain: _____

_____

Are there excessive unpaid fuel bills? Y/N

F. Community Social Services:

Is family enrolled in:

	Yes	No	Interested
DPA	☐	☐	☐
Food Stamps	☐	☐	☐
W.I.C.	☐	☐	☐
Family Planning	☐	☐	☐
Weatherization	☐	☐	☐
Emergency Energy	☐	☐	☐
I.H.E.A.P.	☐	☐	☐
D.C.F.S.	☐	☐	☐
Mental Health	☐	☐	☐

G. Community Needs:

What concerns does family have about their county/area?

__ High cost of rent
__ High cost of food
__ High cost of utilities
__ Inadequate transportation
__ Inadequate jobs in their skill area
__ Public schools
__ Lack of affordable day care
__ Lack of sewer, garbage pickup
__ Crime, safety
__ Other Explain: _____

_____

Parent and Child Education Programs
Mill Shoals, IL

FAMILY ACTION PLAN - PART II

(SERVICES TO BE PROVIDED)

Child's Name _____ Parent(s) Name _____ Program Location _____

Goals listed by priority.

GOAL#	GOAL	DATE INITIATED	ESTIMATED DURATION	PROVIDER	DATE ACHIEVED

Figure 10

Step 3: Plan Ways to Meet Goals

The Action Plan (Figure 11) is used to outline steps to meet the stated goal. The parents and you share major responsibility for designing, carrying out, and evaluating this action plan. Remember the home visitor is a member of the Head Start team. Component coordinators will play a vital role in the needs assessment process. Health, social services, and parent involvement coordinators have information, resources, and expertise which will support families in meeting their identified needs. Begin developing the plan of action by discussing the first priority goal. Next break down the goal into small, easily attainable steps. The number of steps needed to achieve an objective will vary depending on the individual family, the present related resources, and the nature of the goal. You will then state who will be responsible for carrying out each step and note the date that these steps begin. Assist the parents to identify the resources and strengths they presently have that relate to accomplishing the step. The home visitor may offer Head Start resources which directly relate to the goal and action steps. If the parents appear to need the help of an outside community agency in accomplishing the step, help them identify the most appropriate agency and list the pertinent information on the plan.

The plan of action will be completed for each goal in order of priority. Refer to Parent Activities in Chapter 3 of this handbook for discussion of incorporating activities from the action plan into each home visit. As goals are accomplished, action steps will be developed and initiated to meet subsequent goals. A sample of a completed family assessment tool depicting how goals and action steps might be recorded is included in Figure 12.

In summary, the goal of the on-going family assessment process is to develop family independence. The action taken in this development is rooted in the parents, guided by the home visitor, and manifested in the increased capability of the family to meet its own needs. Each of the three steps described is necessary to meet this goal; eliminating any step can result in decreased skill acquisition for parents.

Although home visitors are not generally trained to counsel or advise families, they are in a unique position to facilitate parents in resolving problems. Home visitors also provide the direct link to support services and resources of the Head Start program. The home visitor's role in family assessment is summarized in the following steps, all of which are done in partnership with parents:

- to identify interests, strengths, and needs;
- to establish realistic goals to meet needs;
- to establish priority for goals;
- to develop a plan of action which utilizes family resources and/or strengths;
- to identify available community resources; and
- to follow up on progress and goal attainment.

☐ Center Based Head Start

☐ Home Based Head Start

ACTION PLAN

Child & Family Development Programs
Panhandle Community Services
4502 Avenue I
Scottsbluff, Nebraska 69361

Family Name _____

Date of Plan _____

Home Visitor _____

STRENGTHS OR CONCERNS	STEPS TO MEET GOAL	PERSON(S) RESPONSIBLE	TIME TABLE	PROGRESS DATE

ASSESSMENT TEAM:

Signed _____

Figure 11

Figure 12

FAMILY ASSESSMENT TOOL LOG SHEET

Families Expressed Needs	Area	Priority	Objective	I date	C date
Jim has had ear aches	Health	1	Mom will take Jim to Dr. Jesien by 9/20/85		
Molly (9 months) is on a diet of milk only	Nutrition	2	Molly will eat recommended portions of the basic 4 daily by 6/1/86		
Mother wants day care services for children 3 mornings a week while she works	Social Services	3	Mother will visit centers and select a daycare by 10/3/85		
Father would like for building a chair for Jim (he is physically handicapped)	Health	4	Father will receive plans for building the chair by 12/5/85		

FAMILY ASSESSMENT TOOL WORK SHEET

Area Nutrition Objective Molly will eat recommended portions of the basic 4 daily.

Family Resources:

family lives on a farm - they have a large garden which provides vegetables. They also have access to an orchard. Mrs. Jones has a blender.

Steps	Who	Outcomes
1. What are the basic 4 food groups	Mom and Home Teacher	Mom sorts foods into groups.
2. Mother will record the number of foods and their group served at each meal for two weeks	Mom	Variety of foods increased
3. Meet with nutritionist to plan diet	Mom and Home Teacher	Mom planned diet
4. Meet with County Extension Agent on preparation techniques	Mom	
5. Record Molly's diet daily	Mom	follow-up monthly

Agencies Involved

Name	Agency	Address	Phone
Dr. Olsen	Crestown Medical Clinic	216 Long Ave.	835-2213
Fran Smith	Rock County Extension	85 Brown St.	835-7742

Screening

Screening is a fast and efficient process that helps to determine which children should be referred for further evaluation. In Head Start there are two different types of screening: health and developmental. Health screening is given to all children and must be completed within 90 days of program entrance. The health screening battery includes a growth assessment, vision testing, hearing testing, urinalysis, hematocrit/ hemoglobin determination, tuberculin testing, other community-appropriate screenings, assessment of current immunization status, and a speech evaluation. Health screenings are most often conducted by trained professionals. In most programs dental and physical exams will be done at clinics, health departments, or by private physicians. Vision and hearing screenings are done by trained individuals such as audiologists, speech therapists, or registered nurses.

Home-based children are typically taken to a clinic, health department, or in small groups to the Head Start center and tested individually. Vision and hearing screenings can also be done in the home by using portable equipment that you can be taught to operate. You may do some activities with children to prepare them for vision and hearing screenings. These activities include showing the child symbols used for the vision screening and teaching the child to raise his/her hand when a sound is heard. Generally your role in the health screening process is to help prepare the child and family and to help arrange schedules.

Developmental screening must also be conducted within 90 days of program entrance. This screening can be done either at the Head Start center or in the home. The developmental screening generally covers the areas of language, cognition, motor, self-help, and social-emotional development. Developmental screening instruments, as health screening instruments, are used to provide an overview of the child's skills and give guidelines that determine if a child should be referred for a more in-depth evaluation. The in-depth evaluation will determine whether or not the child has a

handicapping condition and will specify necessary special services and program recommendations.

Developmental screening instruments are standardized, norm-referenced tests. These formal screening instruments have been given to a large sample of individuals who accurately reflect the population for which the test was designed. Data collected from this sample provides the "norm" or "standard" for comparison of the child tested. **One word of caution** is necessary here. Remember that no score is exact. A child's performance can vary depending on a number of circumstances such as how he/she feels at the time, how comfortable he/she is with you, etc. Therefore, be careful about interpreting any score too rigidly; always take into account the possibility of error.

A screening's first and most important benefit is the speed and ease with which it provides a specific and accurate approximation of the child's present functioning level. The outcome of the process should provide a profile identifying a child's areas of strengths and needs. This profile supplies a base from which you can begin developing weekly activities. A screening will also help you identify those children who may have a learning delay or problem. If a child's screening results indicate a delay, you can refer the child to the appropriate professional for evaluation. This further testing will help insure that you will receive the information and assistance needed to plan appropriate learning experiences for the child.

Parents should always be involved in the screening. Asking questions of the parents, requesting the parents to participate in some of the tasks, relying on information that they provide, and reinforcing the parents during the screening will increase the chance that parents will be active participants in home visits right from the start. The way you interact and involve parents in the screening will set the tone for later interactions.

Administering a Screening Instrument

When administering a standardized test, you need to achieve an informal yet productive atmosphere. Remember the tool is standardized and specific directions must be followed to ensure accurate results. Use the following suggestions to create a successful experience and to obtain the most accurate results.

- FAMILIARIZE YOURSELF WITH THE INSTRUMENT. Practice administering the instrument a few times. Compile a kit that includes all the materials you will require for the session, score sheets, and a manual. Decide before you arrive at the home how you will begin.

- ORGANIZE THE MATERIALS YOU WILL NEED to do the screening. Know what you will need to evaluate each item.

- EXPLAIN WHAT IS THE PURPOSE of the screening tool and how the information will be used. Tell the parent the process will help to identify the child's strengths and needs, will help you get to know the child, and will help the parent and you, as a team, to plan activities. Explain that you will be asking the child to do a series of activities. Some are skills that the child has been able to do for a long time; the child may not do others for some time to come, but this range provides clues as to where teaching should start.

- ENCOURAGE THE PARENTS' PARTICIPATION. Tell the parents that they know their child better than you ever will and that you will need their input regarding what the child can or cannot do. You might say, "Is this what you would normally expect her to do?" or "How does he usually do this for you?"

- BE POSITIVE WITH THE PARENT. Help the parent feel good about what has already been accomplished with the child. Point out a couple of current skills, and discuss them with the parent.

- BE POSITIVE WITH THE CHILD. Try to make the situation fun. You might even say, "We're going to play some games now." Encourage the child as much as possible, especially if the skills are difficult. Making the time exciting will ensure his/her attention throughout the screening. If the child is comfortable and enjoying the activities, the responses will more accurately reflect his/her ability.

- AVOID TESTING THE PARENT. It's best to try every item with the child. If you need to ask the parent if the child can perform a specific task, ask after the child has attempted it. When interviewing the parent on any of the items, ask open ended questions—questions that require descriptions rather than yes/no answers.

- SEVERAL CAUTIONS should be noted when administering any screening device.
  - Cues should not be given. You are interested in learning what the child can do without help (unless specified in the directions). It's natural to look at the item or picture you've asked the child to point to or to pull your hand away when the child has given you a correct number of blocks. Avoid giving these clues by looking at the child instead of at the materials.
  - Corrections should be avoided. Avoid letting the child know if he/she has responded incorrectly. This will help keep the child motivated. This is not a time for teaching but a time for determining what the child can and cannot do.
  - Reinforcement should be minimal. You will want to encourage the child to keep working. However, if you reinforce the child's correct responses and then do not acknowledge the incorrect responses, the child will sense the difference. Instead of reinforcing specific responses, comment on the manner in which the child is completing the task. "You're really working hard," or "I like the way you're trying."
  - Give the child enough trials. As you present each task, give the child enough tries to assure an accurate measure of what the child can do. Avoid guessing.
  - Be aware of environmental factors. Are there an unusual number of distractions? What time of the day is the screening device administered? Is it the child's normal nap time? What is the length of the session? Does the child become fatigued? Try to choose an optimum time to conduct the screening.

- Finally, REMEMBER THAT PRACTICE MAKES PERFECT! As you administer the instrument with more children, you will become more comfortable using it.

Following these few suggestions will help to ensure a successful and productive session and will provide you with a large amount of information about the child. The ideal screening tool is reliable and valid, standardized, easily administered in terms of staff time, and is capable of providing a profile of developmental areas and identifying children with potential handicapping conditions.

Developmental Assessment

The third evaluation conducted with children in Head Start programs is a developmental assessment. This evaluation provides additional information about the child which will help in planning a curriculum to meet the child's individual needs. Developmental assessments are conducted on program entry as well as on an on-going basis. Assessment tools or behavioral checklists may encompass such areas as receptive language, expressive languages, visual perception, visual memory, auditory perception, auditory memory, reading readiness, premathematics, academic, cognitive, gross motor, self-help, socialization, and adaptive behavior skills. At minimum the child should be assessed in the general areas of language, cognition, gross and fine motor, self-help, and social skills. Unlike screening instruments, assessments are usually criterion referenced. Rather than being compared to a hypothetical "norm," the child is compared only to himself/herself as s/he is assessed on his/her mastery of each skill. The sequence of skills contained in developmental assessment instruments is generally based on a normal progression of skills learned by children.

A behavioral checklist provides a guide for observing the child perform tasks across several developmental areas. Completion of the checklist:

- determines what skills the child can and cannot do,
- reveals what skills are emerging or will naturally be learned next, and
- helps to determine what skills the child should begin working on.

A behavioral checklist will not include all the skills a child has developed or may need to develop. It may or may not include crucial kindergarten survival skills or cooperative play skills. Skills such as these should be noted and incorporated into teaching activities.

Behavioral checklists should not be substituted for individualized programming. Checklists are only a guide to help evaluate the child's needs and track his performance over time. Remember the items on the checklist serve as a guide but should not be considered the only necessary or worthwhile teaching objectives.

Checklist Cautions

There exist some potential dangers in using a behavioral checklist. Some of the most frequently encountered are described below:

Completing the Checklist Incorrectly

A home visitor, by correctly completing a checklist, can obtain an excellent picture of a child's skills. However, in completing a checklist, one can often make mistakes. Frequently the home visitor doesn't observe the child exhibiting the skill but assumes that he has acquired it. The home visitor might say "I can't think of a specific time when I saw Tom working alone at one thing for 20-30 minutes, but I'm sure he could if he tried," and then checks that item as an entry behavior on the checklist. This results in an inflated assessment of the child's skills and leads to faulty curriculum planning.

A related problem occurs when two or more people are completing a checklist, and the criteria for determining mastery of a skill are not jointly determined. If a home visitor and parent are completing a behavioral checklist together, the home visitor might ask the parent, "Can Mike take off and put on his coat without help?" The parent might answer *yes*, thinking that this skill does not include buttoning, while the teacher assumes it does and marks that skill as accomplished. This problem can be alleviated by direct observation. Also, it is not as likely to occur if the items on the checklist are written in behavioral terms. Unfortunately this is not the case with many checklists, leaving the criteria for mastery of the items open to many interpretations.

Still another misuse of a behavioral checklist is viewing the tool as a "test" rather than as a baseline on the child's present skill levels. The home visitor or parent wants the child to "look good" and, therefore, gives the child the benefit of the doubt. If there is any question about a particular item, just the opposite should occur; the parent and the home visitor should carefully observe the child to see if the skill has been mastered.

These mistakes can be avoided if the home visitor views the checklist as a tool in planning curriculum, uses a consistent definition of the expected behavior, and relies on direct observation of the child.

Teaching to Suggested Materials and Activities

Many behavioral checklists also include suggested teaching materials and activities. While it may seem most efficient to use those materials and activities, they may or may not be appropriate. Once a skill is targeted for the child to learn, the home visitor and the parent should assess the child's learning style and his interest in various materials and then determine what will provide meaningful reinforcement. Only then can the most appropriate teaching activity and materials be chosen.

Often the suggested materials may be appropriate for some children but completely inappropriate for others. For example, one behavioral checklist has the item "carries breakable objects," and the materials suggested to teach the skill are "small breakable ashtrays" and "pop bottles." For some children and families these materials are accessible and appropriate, but many parents do not want to encourage their preschool children to carry these objects around.

There are other ways materials may be misused. A home visitor may choose a colorful, commercially available toy and then consult a checklist to see what she can teach the child. The process should be the other way around. Or a home visitor may utilize a suggested method to teach shapes that works with one of her children and then automatically use the same with the rest of the children. In both examples the home visitor has failed to take into account the individual child.

Many times the activities and materials on the checklists are very appropriate. However, the home visitor's and the parents' knowledge, creativity, and considerations for individual children should go into planning every activity.

Following the Behavior Checklist Too Rigidly

Once the child's initial curriculum assessment is completed, the home visitor and parent are ready to select skills to teach the child. These need not be the first items on the checklist that the child was unable to do. There is a range of behaviors developmentally appropriate for the child; there are practical reasons that govern the choice of behaviors within that range. For example, in the autumn a child's entry behavior shows that he is ready to pull off his socks, to take off his pants when unfastened, and to put a hat on his head. The home visitor might choose the skill, "puts hat on head," to teach first. This behavior will be both developmentally and functionally appropriate because the child is ready to learn the skill and can incorporate it into his daily activities throughout the winter.

Using behavioral checklists for planning is not like following a recipe. Each child is unique and learns at his own rate. Thus, items on a checklist may need to be broken down into smaller, teachable steps. Failure to do this can result in frustration for the child and the home visitor.

The concept of flexibility in using a checklist was probably best stated by Bluma, Shearer, Frohman, and Hilliard (1976). *The behaviors listed on the checklist are based on normal growth and developmental patterns; yet no child, normal or handicapped, is likely to follow these sequences exactly. Children may skip some behaviors completely, may learn behaviors out of sequence, or may need additional subgoals in order to achieve a behavior on the checklist. Each instructor's ingenuity, creativity, and flexibility plus a knowledge of the child and his past development pattern, will be needed to help plan appropriate goals so that he will learn new skills.*

Targeting Only Areas of Need

Most authors of behavioral checklists group behaviors into classes, usually called developmental areas. For example, a common grouping in early childhood is socialization, language (often subdivided into expressive and receptive), self-help, cognitive, and motor (subdivided into fine and gross).

One goal of preschool intervention is to eliminate any developmental deficits, but it is possible to spend an inordinate amount of time targeting in those deficit areas and to forget that an educational program should stimulate growth across all developmental areas. A child with a skill deficit area(s) still has needs in other areas. In many cases a home visitor can plan a multi-purpose activity that incorporates more than one developmental area. For example, if a child has a deficit in the language area, activities such as doing a fingerplay or following directions through an obstacle course will not only address the expressive and receptive language area but also will help the child's fine and gross motor development. If this incorporation is not done, a child may inadvertently develop deficits in other areas simply because they are not addressed.

Continuously focusing on the problem area can also result in frustration for the child. Success does not come as easily, and the child is made to feel less competent than if his strengths, as well as his weaknesses, were taken into consideration.

A related potential problem is avoiding areas of weakness and planning only activities in which the child easily achieves success. When a home visitor or parent and a child work together and succeed, they reinforce each other. Because success and rapid progress are more likely to occur in non-deficit areas, the home visitor and parent may continue to target and teach only in those areas.

It is impossible to overemphasize the importance of providing instruction for the whole child in all developmental areas, taking that child's unique abilities and needs into account.

Limiting Targeted Behaviors to Skills the Home Visitor is Comfortable Teaching

Home visitors' training and experience provide them with teaching skills that vary somewhat across developmental areas. There may be many skills in the checklist that a home visitor either has not had the opportunity to teach or has not had much success with. For example, if the home visitor's only attempt at toilet training was with a child who continued to have accidents even after an intensive program, the home visitor is not likely to readily implement a toileting program with another "difficult" child.

This imbalance also occurs when a home visitor with training in a specific area, such as speech and language, unintentionally puts undue emphasis on speech and language activities while shying away from teaching self-help skills such as self-feeding and dressing, especially if that home visitor has never taught them before.

These problems can be avoided by cooperative planning with input from coordinators and various specialists. These "staffings" help to assure that the child's needs in all areas of development are considered. A careful assessment of needs can be undertaken, and inservices can be planned in areas where the home visitor has weaknesses.

Assessing and Sequencing Skills Correctly But Teaching Splinter Skills

If the home visitor does not refer back to the behavioral checklist following the acquisition of a targeted objective, she may allow the curriculum plan to spin off on a tangent and thus end up teaching splinter skills.

This can happen in two ways—horizontally or vertically. A horizontal splinter skill occurs when a home visitor appropriately targets an objective for the child but elaborates on that skill beyond the point where the skill is functional. For example, a home visitor may target "names three colors on request" and successfully teach that skill to criterion, but then may proceed beyond the basic colors to teach violet, mauve, tangerine, chartreuse, magenta, etc. This can be very reinforcing to the home visitor and/or parent because the child can answer correctly a large number of questions in a very specific area and appear "smart." Teaching these behaviors wastes valuable teaching time and does very little to enhance the child's overall development.

A vertical splinter skill is probably a more common error. It occurs when a home visitor initially targets a developmentally appropriate behavior but takes that behavior to higher and higher levels of functioning. For example, a home visitor may teach a child to "count to three in imitation" and then go on to teach "counts to ten objects in imitation," which is at the four to five age level. The next goal may be "counts by rote one to 20" at the four to five year level and finally "counts up to 20 items and tells how many" at the five to six year level. If the child in this example is three years old, the home visitor is teaching skills far above the child's developmental level even though the sequencing of these skills is correct. This not only results in an expenditure of time and energy that could be utilized more effectively but also necessitates breaking the targeted tasks into smaller and smaller steps (creating, in reality, another behavioral checklist or task analysis). Additionally, because of the increasing complexity of the tasks beyond the child's developmental level, the probability of successful learning is diminished.

Putting Unjustified Emphasis on Skills Commonly Classified as "Kindergarten Readiness"

Pressure to teach kindergarten readiness skills is a perpetual problem. The perception that these skills constitute "schooling" or "education" is pervasive. For example, when parents are asked what they would like to work on with their child, many choose skills such as having the child write his name, count, or say the alphabet even though developmentally the child is not ready to master these skills. The problem may be further compounded by some schools that send around "lists" of skills that the child is expected to have learned before entering kindergarten. In extreme cases the pressure may take the form of the kindergarten teachers saying such things as. "I wonder what the Head Start teachers are doing? Many of their children can't even write their names when they come to school."

A review of 809 individual lesson plans from a preschool program revealed that 30 percent of the stated behavioral objectives were: drawing shapes (cross, circle, square, triangle, line); naming shapes (circle, square, triangle); naming, matching and pointing to colors; naming numerals; matching numerals to objects; and rote counting. While these objectives are appropriate for some children, one must ask if the home visitors looked at all areas of development so that the most appropriate programming could be developed for each child.

Failing to Plan for Generalization and Maintenance

No behavioral checklist encompasses all the skills preschool children need to learn—at best a checklist is a sequential developmental listing. These behavioral checklists often include behaviors that appear extremely restricted but which, in fact, represent only a single example of a whole class of behaviors. For example, "puts four rings on peg" is one behavior on a checklist which represents a group of behaviors requiring a similar degree of eye-hand coordination and problem solving ability. The behavior on the checklist is made specific for observational reliability and ease in establishing criteria. If a home visitor only targets and teaches "puts four rings on peg" and does not plan for generalization and maintenance of the behavior, the child will: 1) only be able to put four rings on a peg, which does not do anybody much good, or 2) forget how to put four rings on a peg, which is even worse. As Harbin states (1977), "Children go through two stages in developing skills: acquisition and generalization. Criterion-referenced devices tend to measure only acquisition."

A child will not automatically generalize and maintain a specific skill. Preschool children, particularly those who have special needs, need to be taught generalization by practicing a skill in more than one situation. A child who learns to name a block as "blue" needs to practice using "blue" as a descriptor of many other objects and in many situations. That same skill will most likely be maintained if it is reinforced in the child's daily routine, e.g., by having the child name blue objects in a grocery store or choose blue clothing to wear. Thus, the child learns that "blue" is an integral part of his environment and not just the color of a block that his teacher showed him.

Parent Involvement

Administration of a checklist is a wonderful opportunity to further involve parents in the home-based program right from the beginning. Involving them in the assessment process, sends a very clear and direct message, *"I need you to evaluate and plan appropriate activities for your child."* If parents get this message early in the year, they are much more likely to get further involved as the year progresses. Since this is one of your principal goals, remember to do everything you can to encourage and nurture your parents' participation.

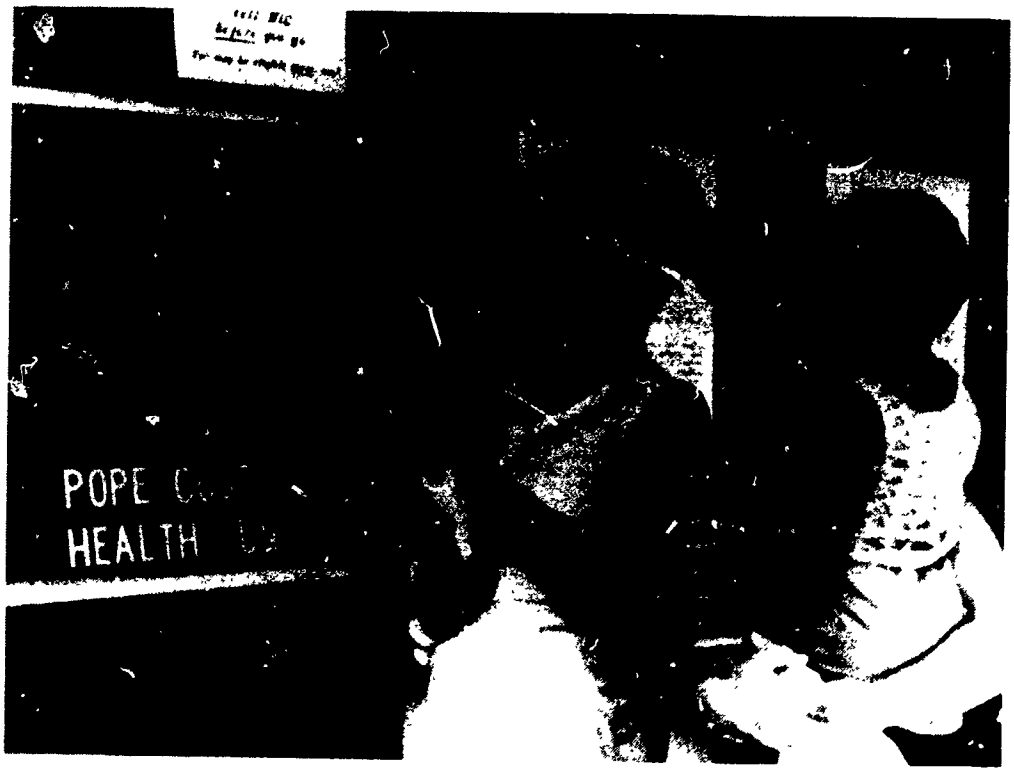
Hints for Increasing Parent Involvement During Assessment

- ☆ Explain the checklist and assessment process.
- ☆ Involve parents in activities by asking direct questions.
- ☆ Encourage elaboration on short answers.
- ☆ Ask for particular examples of skills.
- ☆ Give the parent a copy of the checklist.
- ☆ Reinforce the parent for skills the child has already learned.
- ☆ Help the parent choose specific skills to work on during the following week.
- ☆ Ask parents to share the checklist with the rest of the family.
- ☆ Build rapport by relying on information provided by the parent.
- ☆ On later visits, refer to comments made by parents during assessment.

Community Resources

Resources and services provided by various community agencies are important supports for all Head Start agencies. The most common agencies working with Head Start provide services in the areas of health, mental health, and social services. The public schools are also a support providing therapies and other individualized services to children with handicapping conditions. Each Head Start program is responsible for providing families with a directory of community resources. This directory includes: names and locations of agencies, services provided, eligibility requirements, cost for services, and referral procedures or contact person. Home visitors and/or Social Service Coordinators routinely share this directory with parents. When the family assessment process reveals a specific need which requires services or information from another agency, the home visitor assists the parent in using the directory to locate appropriate agencies. The home visitor provides the parent the support needed to contact the agency and secure services/ information. The home visitor's role in assisting parents to secure services is discussed in more detail in Chapter 3 of this handbook.

The Head Start programs develop agreements for exchange of services with several community agencies. These agreements are developed on the administrative level and generally are with agencies providing services required in the Head Start Performance Standards. For example, the program may develop an agreement to receive health screenings including vision and hearing from a local or county health department. The Parents in Community Action (PICA) Head Start program in Minneapolis, Minnesota compiled an excellent resource entitled *Head Start Linkages: Establishing Collaborative Agreements.* This book suggests successful techniques for developing agreements and provides sample agreements.



Some aspects of the home visitor's role in working with community agencies vary from program to program. For example, in some programs if a family identifies a need and requests a referral, the home visitor relays this information to the coordinator who then makes the referral. In other programs home visitors make referrals themselves. Home visitors may be responsible for establishing relationships with agencies; this is particularly common when a family has a less common need and new agencies need to be tapped.

One aspect of the home visitor's role that does not vary is the responsibility for increasing parents' abilities to independently secure services. Although many aspects of the home-based program occur in the home, there are many opportunities to expand the family's knowledge of the community. For example, discuss a new agency each month, take field trips during home visits, use speakers from outside agencies at parent meetings, include articles in the newsletters, and take part in a community resource fair.

In addition to knowledge of the community resources, parents need skills in contacting the agency and requesting services. Often when parents contact service agencies or professionals, they are bombarded with questions and unfamiliar terms. Their first reaction may be to decide they don't need the service. Home visitors can help increase parents' self-confidence through role playing. Parents are often hesitant to say: "I don't know" or "I don't understand. Would you explain a little more, please." Practice in role playing situations will increase parents' confidence.

Awareness of parental and child rights is important in dealing with agencies. This is a good topic for a parent meeting. Parents should be aware of confidentiality, their right of access to records, and the right of services for their child with special needs. The home visitor can provide some of this information through brochures and discussions and by helping parents contact agencies or individuals knowledgeable in the area.

Keeping appointments and applying the information received from the agency are critical steps if families are to make the most of services from community agencies. Home visitors may assist families arranging transportation and babysitting. In some cases families may need the support of a trusted adult such as the home visitor or relative to accompany them. This is appropriate for home visitors, but they should gradually wean parents of the need for their support and increase parents' ability to keep appointments independently or develop their own support network from family, neighbors, etc.

The home visitor and family can discuss questions to be asked during the appointment. Helping parents clarify the information they need or concerns they have prior to the appointment will give parents more confidence in obtaining needed information. Writing specific questions to take may also be helpful.

Another activity which will increase parents' abilities to gain and apply information is to practice clarifying information they receive from professionals. This is particularly important for medical appointments. Many times these appointments result in suggestions for treatments or other follow-up. Parents must understand clearly what to do. Home visitors can role play conversations with the doctor prior to the appointment. Home visitors may also assist if parents have questions resulting from an appointment. During the home visit the home visitor can call the doctor or assist the parent in doing so and clarify any questions. Home visitors and parents can develop a plan for implementing suggestions from the professionals.

In summary, community agencies provide many valuable services to Head Start families and children. The home-based Head Start program is responsible for increasing parents' awareness of these services and their ability to independently contact agencies and obtain and apply information from them.

The foundation for a successful home-based program has been laid. Families have been recruited, current functioning and needs of children and families have been determined, and home visitors are prepared to facilitate the integration of families into the community. All of this information will be applied during program activities such as home visits, group socialization experiences, and parent activities.

Follow-up Activities

1. As you were shopping in the supermarket, a woman, noticing the Head Start button on your jacket, asks you about the program. What would you tell her about it? Don't forget to mention the four component areas, the center and home-based options, the strong parent aspect, and that it is twenty years old.

2. Outline what information you would share on the recruitment visit. Put this information in a list form. Role-play the presentation of this information, focusing on your ability to communicate in a clear and concise manner and to ask open-ended questions. Practice again any parts of the information you felt unsure about, and remember to be businesslike but friendly.

3. Differentiate between screening, developmental assessment, and family assessment. Give the purposes of each process.

4. A new staff member has joined your agency and your supervisor has asked you to train her to use the program's screening tool. You will most likely use modeling and role play to help teach this skill, but also make a list of do's and don'ts and helpful suggestions and share them with your new home visitor. Help her find at least two children to whom she can administer the test and observe her at least once. Offer constructive feedback and reinforcement.

5. Role play how you would inform a parent that their child's screening results indicate a need for further evaluation. Describe the purpose for the evaluation, its end result, and any other information they will need to feel comfortable and informed.

6. Recall a problem you have had in the past in administering an educational assessment. Review the situation: your behavior, the child's behavior, parental reaction, and any other variables that might have contributed to the problem. Now rewrite the scene changing things that *you* could be in control of; for example, more involvement of the parent, correct materials handy, etc.

7. With fellow home visitors, decide what materials are needed to assess the items on your educational assessment. Make an Assessment Materials Kit. Of course, you want to use as many items from the home as possible, so make a special list of these materials and let families know ahead of time what you will need.

8. Besides having the necessary materials at hand for the educational assessment, you need to think ahead about involving the parent in this process. Brainstorm all the possible ways you can do this. Be specific—use the ideas presented in this chapter and the methods that have been successful for you in the past to get your creative juices flowing. After the initial assessment is completed, remember that when parents are partners in targeting skills for their child to learn, they are more likely to keep actively involved throughout the year. The potential gains that could be made will be lessened without their support and participation.

9. Choose one of the family assessment forms found in this chapter. Ask a friend to role play as a Head Start family on your caseload, and fill out the form. Practice asking open-ended questions in a non-judgmental way. Ask your friend for feedback on your interview skills. Do they understand the goal of this process? Can you explain it to them?

10. Try to recall the last problem you were conscious of solving. Review your actions. What skills did you employ and why? Keeping these skills in mind, develop a repertoire of helping behaviors that you can use in assisting families to solve their problems.

11. Review your agency's family assessment process. Does this process include steps: to identify strengths and needs, to set and prioritize goals, and to plan ways to meet the goals? If not, discuss with your colleagues and social services coordinator ways to include these steps to make your program's procedure one that promotes the development of family independence.

12. In the Community Resources portion of this section, activities are suggested to enhance your ability in enabling families to become independent in securing needed community resources. Assess your skills, strongest and weakest, in this area; select and carry out an activity that would strengthen your weakest area.

13. Using the resource, *Head Start Linkages: Establishing Collaborative Agreements*, complete the "Linkage Assessment Tool" on pages 16 and 17. It would be most beneficial to engage all staff members in this process, completing the assessment individually and then comparing answers as a group, rating each question by group concensus. Based on the results, explore what needs to be done to form even more successful linkages with other agencies.

3

Construction of the Home-Based Program

Objectives

After reading this chapter, the home visitor will be able to:

- discuss the elements of a home visit and the purpose for each part;
- give examples of effective strategies for carrying out each part of the home visit;
- select recording forms that facilitate documentation of child and parent progress;
- design a child group socialization experience;
- discuss three vital components of a parent volunteer program;
- name four types of parent meetings and suggest ways to plan and implement them;
- state the purpose for and contents of the office confidential file and the home visitor's working file;
- specify guidelines for maintaining confidentiality;
- outline three major steps that help create smooth transitions into the classroom environment for both parents and children.

Many significant milestones laid the groundwork for implementing the home-based program. Initially—based on assessment of community and family needs—it was determined that the children and families would benefit from a Head Start program which included weekly home visitis, regular group socialization experiences for children, and regular parent activities. Secondly families were recruited for the home-based option; this process included informing families about the program, completing enrollment, and initiating screening and assessment procedures.

This chapter will describe implementing the home-based program. The target audience for this handbook is home visitors; therefore, responsibilities for implementing are described in terms of the home visitor's role. Each Head Start program will need to assess their staffing pattern and determine the responsibilities of home visitors, component coordinators, and administrative staff. Home visitors need the support, expertise and encouragement of peers, coordinators, and directors to ensure comprehensive quality services to families.

The home-based program includes the following which are described in detail in this chapter:

- planning and implementing home visits,
- group socialization,
- parent activities,
- reporting procedures, and
- transitioning.

The Home Visit

The time has come for your first home visit. You find yourself at the door . . . Now what? You may find yourself saying, "Maybe I should have gone over it in my head one more time!"

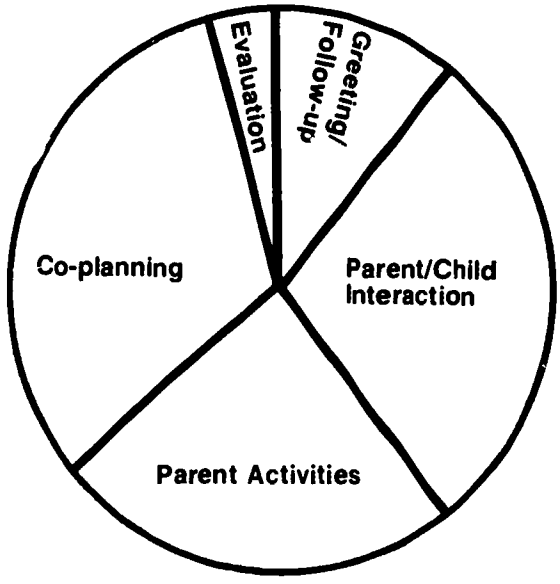
That is just what we will do: go over the elements of a home visit to make it a positive experience for everyone involved. And because the visit is designed to be a learning experience for both the parent and the child, we'll also take a look at how the home visitor can foster the strengths of the parent, the development of the child, and the relationship between the two.

The following diagram (Figure 1) puts the home visit in perspective. Each home visit is designed to include specific elements.

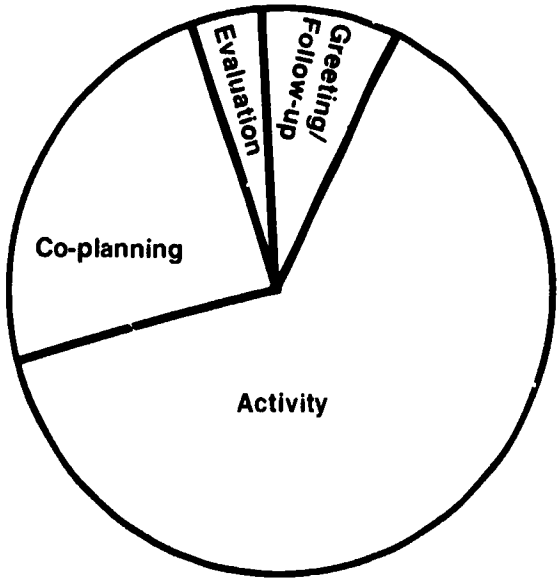
Figure 1

Elements of a Home Visit	Purposes
Greeting	Focus on parent Create warm, enthusiastic atmosphere
Follow-up	Review past week's activities Reinforce family's accomplishments
Activities	
Parent/Child Interaction	Teach new skills Generalize and expand skills Present component information geared for child
Parent	Share program announcements Share component information Guide families in meeting identified needs
Co-Planning	Involve parent in selecting appropriate activities for next visit After discussion, encourage parents to choose between visit activities.
Evaluation	Involve parent in assessing what was learned and what could be improved

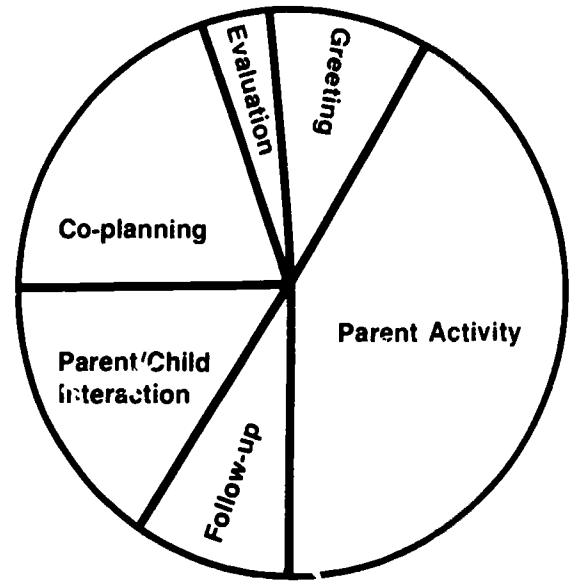
While all the elements need to be included, the order and time spent on each varies depending upon the home visitor, the family situation, activities planned, and unexpected needs which arise. To gain a perspective of different arrangements of the elements, review the following possibilities.



There are visits where the elements are quite evenly divided into the time frame.



The structure shown here would be used when doing an activity incorporating several purposes and requiring a large amount of time; for example, making vegetable soup or going to the grocery store.



A division such as this could be a time when parents express needs which require prompt attention. Home visitor and parent discuss possible solutions, develop a plan to meet the needs, and proceed with the visit.

Realize that a rigid schedule is not necessary. Elements are not always distinctly divided but are sometimes incorporated and each home visitor will have a preference in how to include them. However, consistently using all the elements does form a pattern. As families grow accustomed to the elements and know what to expect, you should:

- keep on task,
- provide organization,
- keep the focus on the parent, and
- encourage the best use of time.

Again flexibility is the key. The home-based program is successful because you enable parents to enhance the development of their children. The parents then provide the child continuous learning experiences. For every parent/child interaction is a potential learning experience. Careful planning and implementation of each element of the home visit results in activities which incorporate all the screening and assessment information available on a child and family and which encourage the parent to continue and expand the activities.

The next pages will discuss planning and implementing each element of a home visit.

Greeting the Family

As the door opens, remember the parent is often feeling unsure about the visit, particularly until a relationship is established with the home visitor. Be friendly and warm. The greeting is an important moment to set the stage for the rest of the visit. Here are some ideas to keep in mind:

- ★ greet the parent first, then the child;
- ★ try to avoid discussing personal or non-work related matters at the beginning (there will be ample time later to visit with the parent);
- ★ immediately go to the area where you usually work in the home to indicate you are ready;
- ★ act as if you're glad to be there.

As a courtesy the parent may offer you a cup of coffee or a soft drink as you enter the home. While you want to accept the parent's hospitality, to do so could change the entire home visit. It is better to accept the offer, but to add that you would enjoy it more when the work is finished. Establishing this procedure will ensure that you will never need to rush through the activities because too much time was spent socializing.

Follow-up

After greeting the family, ask about the activities they have been doing since the last home visit. Use the **Family Activity Plan** (Figure 2a) that was completed last visit to review activities they have done during the week. Ask them to show you things they made or new skills the child learned and to tell you about appointments they kept or other ways the family followed through from the last visit. Review each new skill the parent and child worked on during the week; record activities as accomplished or not accomplished. This review provides an opportunity at the beginning of the visit to reinforce families.

FAMILY ACTIVITY PLAN

recorded next visit

Accomplished
Yes No
#1 ____ ____
#2 ____ ____

PARENT/CHILD ACTIVITY #1

New Skill (Objective)	Ryan will hop 5 feet on one foot without aid 3/3 times.
Materials	Have Ryan try this activity on a hard level surface such as concrete.
Presentation	Stand beside Ryan and ask him to hop to a parent 5 feet ahead.
Help/Aid	If he has difficulty, take his hand to help him and let go as soon as he's going forward.
Reinforcement	Praise Ryan and tell him how many feet he hopped.
Generalization	Let Ryan hop on different surfaces such as carpet or grass.

PARENT/CHILD ACTIVITY #2

New Skill (Objective)	Ryan will put his shoes on the correct foot twice a day.
Materials	Ryan's regular shoes.
Presentation	Ask Ryan to place each shoe in front of the correct foot.
Help/Aid	If the shoes are not placed correctly, then move them and show Ryan which parts of the shoe go on the inside and touch.
Reinforcement	Tie Ryan's shoes and do a special activity like reading a book with him.
Generalization	Have Ryan try putting on different shoes.

FAMILY ACTIVITIES

- attend parent meeting on Thursday
- prepare muffins which we made during the visit
- take children to library for story hour

PLAN FOR NEXT VISIT

Materials I will provide

Find pictures of animals

Activities/Unit

pets

discuss animals that fly, swim, walk

COMMENTS/QUESTIONS to discuss on next home visit

Figure 2a

Be specific and sincere with your praise of the family. The parent has worked hard and has successfully taught the child a skill that one week before he or she could not do.

Sometimes we are not this lucky though. After reviewing the activity, we may discover that the child has not learned the skill. This can happen when:

- the skill was too difficult for the child to achieve in one week;
- the teaching method did not work for the child;
- the parent had difficulty with the activity; or
- the parent did not work on the activity during the week.

When the activity appears not to have been accomplished, have the parent try the activity with the child. Occasionally this demonstration will help you identify the problem. You might even find that the child is able to perform the skill for the parent although he or she cannot do it for you. In any case, if the child does not meet the objective, the activity should be modified and presented again. This modification can be discussed when you co-plan the next visit.

Reviewing the family's activities encourages follow-through since it is the first subject you **always** bring up. This review provides parents an opportunity to discuss problems they may have had and provides you and the parents information on the child's skills which will be valuable in planning future activities.

Activities

This element of the home visit is divided into **Parent/Child Interaction Activities** and **Parent Activities**. Each type requires planning involving the parent and implementation techniques which are individualized for each family.

Parent/child interaction activities

These activities accomplish the following purposes:

- ► to teach "new" developmentally appropriate skills,
- ► to generalize and expand skills the child has learned, and
- ► to present component information for the child.

These purposes can be met through games or other motivating activities which include siblings or other family members present. Some activities will meet one of the above purposes; more frequently, activities will accomplish several purposes and be coordinated with parent activities.

Children learn through play by creating, exploring, questioning, and manipulating. Activities planned for each home visit allow the child to play while increasing the parent's awareness of what the child is learning and how they can change materials, directions, or environment to expand the child's world. Play can be thought of as any activity which the child enjoys. It can be very non-directed, for example, giving the child paper, scissors, markers, and glue and letting the child "create the product"; or it can be playing a game like "Candy Land" with directions and rules to follow. The key to planning and presenting these activities is the **child**. What materials does he enjoy? What activities are most interesting? How much structure does she prefer? Is the activity developmentally appropriate—does it provide opportunity for success, some challenge, and minimal frustration? Ideally play uses skills the child has and also provides a challenge.

The learning which occurs during play is somewhat dependent upon the materials provided, the amount of adult involvement, and the directions provided to the child. When the home visitor and parent plan an activity, they will consider its purpose, to teach new skills or to review or expand previously learned skills, and they will create a

play experience for this purpose which is enjoyable for the child.

One of the big advantages of the home-based program is the parent's opportunity to learn to use the home more effectively as a learning environment. Routine events can become learning experiences for children. Parents can learn how to teach children while grocery shopping, fixing dinner, doing the laundry, etc.

One way to encourage parents is to use items found in the home as teaching materials—don't be bound to toys from the Head Start program. Plan objectives for the child, and with the parent think of items in the home which can be used to teach the objective. Show parents that they don't have to purchase expensive toys to teach their child. There will be activities which require some special materials, particularly with handicapped children. The parents and you may be able to make some of these. If the materials are not available in the home, use educational toys and materials available from the program.

Another way to encourage parents to create learning experiences is to plan activities around family routines. Demonstrate what skills the child can practice. For example, while the parent is folding laundry, the child can:

- sort or name colors,
- count,
- name each item,
- name where you wear each item,
- stack folded clothes,
- name items as big or little, or
- follow directions for putting clothes away.

Discuss the family's daily routine and help the parent plan informal activities around the routine. Encourage parents to include the children in as many daily activities as possible. Be careful not to place too much emphasis on the activity and ignore the needs of the child.

Teaching New Skills

The parent and you will select one or two new skills to teach the child during the week. These skills require the teaching techniques of correction, reinforcement, and demonstration. Remember these activities are planned to teach new skills as opposed to expand previously learned skills.

Since success in teaching a new skill is reinforcing for the parent, insure success by selecting appropriate skills for the child to learn. The educational assessment is an important tool in planning new skills to teach. It provides a list of skills the child can do, those he or she cannot do, and those he or she is beginning to learn. When using a developmental checklist, keep the following guidelines in mind.

☆ **Choose a sequentially appropriate skill.**

Skills listed in the checklist are sequenced in order of difficulty. Skill number 1 in a given developmental area will be easier for a child to learn than skill number 15; skill number 15 will be easier than skill number 40: and so on. Therefore, be sure the child is able to perform the skills related to

the skill you wish to teach. One word of caution: learning does not follow a rigid pattern. No two children follow the same sequence of skill acquisition. Thus, those skills that closely follow one another need not necessarily be taught to the child in sequence but rather taught according to the individual pattern of learning.

☆ Choose a functional skill for the child.

When choosing among several skills, choose the skill most useful to the child in his home environment. This will provide the child many opportunities to practice during the daily routine. It also will increase the likelihood that the parent will work on the skill throughout the week. For example, if you have identified "climbs stairs alternating feet" as one skill that the child cannot perform, you will choose to teach it only if the child has a staircase at home or some place frequently visited. Otherwise, it will not be a high priority skill.

☆ Choose an emerging skill.

An emerging skill is one the child is learning but needs more practice/instruction in order to master. For example, the skill you may be interested in teaching the child is "buttoning large buttons." If the child can button large buttons but only when you help by guiding the button, he has an emerging skill. The child will master the skill if given more help and practice. Choosing an emerging skill to teach the child will increase the likelihood that the child and parent will experience success during the week.

☆ Choose a skill the child has shown an interest in.

Perhaps during the assessment the child really enjoyed a particular type of activity, such as jumping. It is good practice to present a skill that is related to the child's interest; jumping rope.

☆ Choose a skill that the parent is interested in the child learning.

By selecting a skill that the parent values, you increase the chances that the parent will work on the activity during the week. This, of course, increases the odds that both the parent and child will experience success which in turn will help both feel good about the program and encourage them to continue to work on the new activities.

☆ Choose a skill that the specific child needs to learn.

Finally many skills that a child will learn do not appear in the checklist. Checklists are not intended to be used cookbook fashion. As you get to know the child better and become more familiar with the child's abilities, you will more easily identify skills he is ready to learn. Often you will not find these skills in the checklist. Rather they may be sub-skills of one or more of the listed skills, or they may even be unrelated to any skill in the checklist. Remember to teach these skills to the child. After all, one of the benefits of the home-based program is the ability to tailor each child's program to specific needs and learning style.

Generally, the skills which you and the parent have selected to teach will not be learned in one week. Therefore, planning must include breaking the skill into small steps which can be accomplished during one week and which lead toward acquisition of the targeted skill.

Having selected the skills to teach, you need to plan exciting activities that will teach the skill to the child. These activities will:

→ have a specific teaching objective which helps you identify whether or not the skill is learned;
→ provide appropriate correction or "teaching" that helps the child replicate the expected response;
→ include planned reinforcement;
→ use household materials and routines as much as possible;
→ allow the child opportunity to explore materials;
→ be written on the Family Activity Plan with complete directions including materials, presentation, teaching techniques, and reinforcement; this written plan will serve as a guide for the home visitor and parent;
→ be worked on by the parent and child throughout the week.

Of the one or two new activities presented during this part of the visit, begin with the activity that requires the child's greatest attention. Usually once a young child has been involved in an active task, such as kicking a ball or jumping over small obstacles, it is difficult to get the child re-directed to a table activity. This, however, depends a great deal on the individual child; knowledge of the child will be important in deciding the order of activities.

Once you have selected the first activity, you will need a few minutes to talk with the parent about teaching the skill. But what happens with the child? Does he or she just sit and wait? Well, this is a good time to let the child warm up for the activity. This is best accomplished by giving the parent the materials to give to the child. The child can play with them so that when you are ready to begin working, he/she will be familiar with the materials and will not be distracted from what you and the parent are trying to do.

When presenting a new activity:

- Begin with the activity that will be most demanding of the child's attention.
- Give the child materials to explore.
- Meanwhile, explain the activity and its rationale to the parent.

Very often you will find that when you are ready, the child is playing with the "toys" in a way that will allow you to move right into the activity. This smooth transition makes the entire home visit more pleasurable for everyone.

While the child is occupied, discuss the lesson plan or Family Activity Plan with the parent. Have the parent read over the directions. Discuss the week's objective and the directions for teaching the activity. Review with the parent why the skill was chosen. Be clear and specific about the activity, and encourage the parent to ask questions.

Once you've reviewed the activity with the parent, try it with the child. During the home visits at the beginning of the year, parents will probably feel more comfortable watching you do the activity once or twice. As the year progresses, parents present the activity themselves following only discussion. Always encourage the parent to do the activity with the child before you move on to another activity. Stay tuned in to parent's skill and comfort level.

Presenting new activities is an important part of teaching; it tells you and the parent how well the child can perform the skill prior to instruction. This information is useful for the following reasons.

- ☆ The child may already be able to perform the skill as stated in the objective. It will be silly to continue working on a skill already mastered. The activity will have to be changed. But be sure to reinforce the child's accomplishment.
- ☆ On the other hand, the child may not be able to achieve the skill within one week. Since it is important for the parent and child to experience success each week, talk with the parent about changing the objective.
- ☆ It may also indicate that an appropriate skill has been targeted. It seems as though the child will be able to learn it within the week.
- ☆ It provides a "base" from which to judge improvement at the end of the week.

After Mary explains the activity to Ms. Marks, she turns to Ben. *"What do you think of those pictures, Ben? Which one do you have there?" "The truck,"* replied Ben. *"That truck looks funny to me, Ben. Something is missing. Is it the door or the tire?" "The tire,"* Ben says. *"Yes, the tire is missing."*

Try the activity with the child. In the example, Mary gives Ben one of the pictures and asks him what it is. Then she asks if he notices that something is missing. The home visitor or the parent names two parts of the object, one of which is the missing part, and asks Ben which named part is missing.

If the child is unable to name the missing parts, the home visitor begins teaching the skill, using the planned correction procedure. However, if the child can name the missing parts each time, then the home visitor should reinforce the child, give credit for having achieved the objective, and change the objective. After changing the objective the home visitor or parent should try it with the child. If the new objective was appropriate, make the necessary changes on the lesson plan.

"You did such a good job naming those missing parts, Ben. Now let's try something different. Here's the truck. Can you tell me what's missing?" asks Mary. *"The man,"* reports Ben. *"That's right, Ben. The man is missing. But something else is missing. Is it the tire or the door? The tire,"* says Ben.

The objective has been changed to indicate that after a week's instruction the child will be able to name the missing part without help. During teaching, the parent will not give the child a "choice of two" unless the child has difficulty. Giving the child a choice of two is now the correction procedure.

Satisfied that the objective is appropriate for the child, the home visitor can now demonstrate teaching the activity. This gives the parent an idea of how to use the reinforcement and correction procedure. The parent has already seen how the materials are introduced to the child and how to get the child to respond while the activity is first presented. Now the home visitor will focus on other aspects of the activity that the parent has not yet seen.

The home visitor works with the child, reinforcing him for a correct response. The reinforcer should be the same as that specified on the activity for the parent. It should be delivered immediately after the child responds; it should be sincere; and it should specify what the child has done right.

When the child has difficulty or responds incorrectly, the home visitor can demonstrate a positive way of correcting the child. This should help the child find the correct response as well as increase the likelihood that he or she will respond correctly the next time without help. Be sure to use the correction procedure stated in the directions.

Demonstrate just long enough for the parent to understand how to carry out the activity. The home visitor can easily forget this. After all, the home visitor enjoys working with the child and likes to work on the activities prepared for the visit. Remember, however, that the parent is the primary teacher in a home-based program. Therefore, the activity should be passed to the parent while the child is still fresh and interested in it.

After the home visitor clarifies any questions that the parent may have, the parent tries teaching the activity. This demonstration gives the home visitor an opportunity to observe the parent teach the skill and insures that the parent will not have difficulty teaching during the week.

To teach the activity:

- Follow the directions stated on the lesson plan.
- Reinforce the child's correct response.
- If the child has difficulty, help the child using the correction procedure indicated in the plan.
- Work on the activity just long enough to give the parent a good idea of how to teach it.
- Make teaching interesting and fun for the child and for the parent.

Establishing the parent's demonstration as part of the routine from the very beginning of the program helps avoid problems later. Although the parent may feel somewhat awkward the first time he or she teaches an activity in front of the home visitor, the home visitor's warm and positive remarks will help the parent relax in the future.

When the parent begins the demonstration, the home visitor should allow the parent the freedom to move through the entire activity with the child. There may be some brief moments when the parent hesitates or appears unsure. The home visitor should not intervene or step in and take over.Allow a few moments for the parent to try again. If the parent continues to appear lost or turns to the home visitor for help, the home visitor should give some verbal hints or cues to get the activity started again.

As the parent works on the activity and the child responds correctly, the parent will reinforce the child. Nonetheless, the child will often turn to the home visitor, looking

for additional reinforcement. While the home visitor will want to respond, he or she should be careful to let the parent do it. It would be unfortunate if the child were reluctant to work during the week when the home visitor is not around to reinforce the child's progress. Make sure the parent is the primary reinforcer.

When the parent demonstrates:

- Be an observer, not a participant.
- Don't allow your reinforcement to mask the parent's.
- Reserve your comments until the parent is through.
- If the parent has difficulty, don't take over the teaching; give verbal cues.
- Stress the positive aspects of the demonstration; be positive about the problems.
- Make sure the parent understands your comments by demonstrating.

Provide the parent with positive feedback after the activity. Reinforce the parts of the demonstration that went well. Also give the parent suggestions to make the activity run more smoothly and to increase the chances that parent and child will be successful. This can be done very nicely through a discussion with the parent, having the parent suggest the parts that he or she felt went well and those that were choppy or uncomfortable.

When the home visitor makes a suggestion he/she should be sure that the parent understands. Many times the home visitor can demonstrate how to make the change and the parent can then try it.

Encourage the parent to continue working with the child on the skill until both are comfortable with it. Be careful, though, that the child does not become so tired of the activity that he or she will have no interest in it during the week.

It is time now to work on the next activity. Follow the same procedure as before. But before presenting the new activity, clear away the materials from the previous activity. Also let the child know it is time to stop what he or she is doing and begin something new.

The new activities are an important part of the process for increasing parent teaching skills and child skills. Clearly these activities produce specific outcomes or benefits for the child in the form of increased skill acquisition. Not only are objectives based on the assessed needs of the child, but also each activity includes the reinforcement and correction procedure to which the child responds best.

By working on teaching specific new skills during the week, parents gradually learn many important teaching techniques including:

- ☆ selecting appropriate activities to teach,
- ☆ observing and evaluating child progress,
- ☆ modeling or showing the child the correct response,
- ☆ reinforcing correct responses, and
- ☆ giving child aid in performing a skill until the child can do it independently.

The parent is given a verbal and written description of each new skill he or she will teach as well as a model to observe. Presentation of these new activities also permits the parent to practice teaching the child while the home visitor observes and provides feedback. Through this individualized process the parent learns what to teach and how to teach.

Benefits of the new activities for the child

- ♦ Objectives are based on the child's need.
- ♦ Activities are designed with the child's specific learning style in mind.
- ♦ Activities are taught in a consistent manner on a daily basis.

Benefits for the parent

- ♦ Parents learn to teach developmentally appropriate activities for the child.
- ♦ Parents learn specific teaching techniques.
- ♦ Parents practice specific teaching techniques.
- ♦ Parents are provided with individualized instruction for teaching their child.

Generalization and Expansion Activities

After a child learns a skill, he or she needs to practice it periodically to make sure he or she can still do it. Also, children need to learn to use new skills in a variety of situations. For example, Lisa has learned to name "big" and "little" using two balls.

To make this skill functional, Lisa needs to use this skill in several situations with different materials. She needs to be able to name big and little people, pictures of big and little objects, etc. This is generalizing a skill.

Another way to generalize a skill is to combine skills in new ways. Playing hopscotch is a good example. Lisa has learned to hop on one foot and turn around while hopping. She can now use these skills to play a game with other children.

The parent and you will plan activities for each visit in which children can use new skills with different materials, in new situations, or in combination with other skills. Generalization of skills should occur in the home, neighborhood, and, eventually, the child's total world. Select skills to generalize which the child has recently learned. You may plan an activity specifically to teach generalization, or you may incorporate a generalization experience within another activity. For example, during the past few weeks Jason has accomplished these skills: telling what's missing from a group of three objects; drawing a square by connecting dots; naming a circle, a square, and a triangle; and naming objects as same and different.

The parent and home visitor can plan any of the following activities to help Jason generalize one or more of the above skills.

- Use pictures of a circle, square, and triangle and have the child name the pictures. Play a game where the children close their eyes and one picture is removed, take turns naming the missing picture (other pictures may be added).

- Show the child two pictures and have the child name the pictures as being the same or different.
- Using paint and brushes or fingers, have the child connect dots to draw a square, or you draw a circle and triangle and ask the child to name them.
- Play a game of same and different using items around the home—two pieces of fruit, items of clothing, pieces of furniture, pictures in books, etc.
- Find objects around the house that are different shapes. Look for big ◯'s and little ◯'s, etc.

Art and music also provide opportunities for the child to be creative and to generalize skills. Let the child decide how to move to music or make up *silly* words to songs; let the child tell a story which you write in a book and the child illustrates.

The possibilities for expansion activities are limitless. Plan generalization and expansion activities by reviewing with the parent skills the child has recently learned or skills which need expansion. Remember, one activity can offer the opportunity to practice several skills and possibly incorporate component information. Constantly keep in mind the variety of purposes you could accomplish with some creative activity manipulation; for example, during an activity in which the child's body is traced he/she might practice adding body parts to an incomplete person . . . something the child recently learned but has never done with materials other than pictures. He or she could also review happy and sad feelings. Color names, action words, and nutrition information on what makes us grow can be shared.

The child may be unaware of the goals and purposes of the activity; however, the parent and home visitor should be. The goals must be set based on the individual child; consider her developmental strengths and needs and her activity and material

preferences. If your program uses a unit approach, determine the best way to incorporate generalization and expansion goals into the unit.

If your program uses a curriculum based on weekly units, the same activity may be brought into each home, but the parent and the home visitor will emphasize different aspects of the activity to make it suitable for each target child. For example, an activity based on the theme *winter* might be making a picture of a snowman. The home visitor might have as goals: drawing circles for one child; cutting them out for another; and naming the position of the snowballs (on top of, in the middle, on the bottom) for yet a third child. Exactly which aspect of the activity will be stressed depends entirely on the individual child.

In summary, the parent and child learn many new skills, and then expand on these otherwise limited and isolated skills so that they can utilize them in situations that vary from the setting in which the skills were initially learned. The child first practices, then generalizes the skills, and ultimately combines them, enabling him/her to interact with the environment in ways not previously possible. The parent learns to use newly acquired skills through basically the same process, so that through practice, he or she will eventually generalize teaching skills to daily occurrences.

Component Information Activities

Component activities are activities planned to present health, sanitation, safety, medical, dental, and nutrition information on the child's level. The activity might include books, songs, games, role plays, or trips in the neighborhood. An example of a health activity is reading a book about going to the doctor. The children and parents can also role play what happens in the doctor's office. This activity can be expanded to include several objectives. The children can name pictures in the book or describe what's happening on a page. During the role play they can name body parts and the function of each part.

Help parents plan activities for children which address one of the component areas weekly. Remember to expand these activities to include review and generalization objectives for the child. These activities can also be coordinated with information for the parent, such as pamphlets which emphasize the activities discussed. When appropriate, encourage the parent to continue the activity during the week. For example, if the children practice brushing their teeth, make a chart for the children to mark each day they brush their teeth. Many curricula listed in the Resources contain excellent ideas for component activities.

In summary, you will always use parent/child interaction activities during the visit. The goals for these activities are to teach the child and parent new skills. To do this the parent will gradually take the lead in teaching. There are several techniques that the home visitor can employ to help the parent take the lead during the parent/child interaction activities.

- ☆ Avoid sitting between the parent and the child. To do this encourages the home visitor to direct attention either to the parent or to the child, but not to both. It also makes direct parent and child interaction difficult. Finally, the child is more likely to look to the home visitor than the parent for help, instruction, and reinforcement. (Remember this suggestion anytime there are seated activities during the visit.)
- ☆ Go over the activities and their purposes. Let the parent select those activities he or she feels comfortable presenting.
- ☆ Briefly discuss the directions with the parent. Discuss which of you will do each part. This will allow the parent to select the parts of the activity that he or she feels most confident and prepared to work on.
- ☆ Start the activity, such as reading a book. Then pass the activity to the parent to continue. This will give the parent a chance to see you model briefly and will give the parent an idea of how to continue.
- ☆ If you have worked on an activity during an earlier home visit and plan now to

present a similar activity, remind the parent of the earlier activity, give verbal cues for presenting the new one, and then let the parent teach it.

- ☆ Gradually, week by week, increase the parent's participation. Start slowly and be specific about what you hope to accomplish with each activity. As parents become more comfortable, let them work more on their own.
- ☆ Remember to reinforce the parent's successes and be positive when you need to give suggestions. Parents need to know when they are doing something well and when and how to improve their skills.
- ☆ If the parent is working with the target child, you may need to help keep the sibling(s) occupied.
- ☆ When starting an activity, hand materials to the parent, not to the child; this helps to get the parent involved.
- ☆ If the parent runs into a problem, verbally cue the parent rather than stepping in and taking over.
- ☆ Let the parent present new and challenging materials to the child. This puts the parent in the spotlight.
- ☆ If the child is having difficulty and looks for assistance, let the parent respond. It would not help the parent or the child, for that matter, if the parent is expected only to work with problem-free situations. Initially you may have to demonstrate ways the parent can handle a situation, but gradually help the parent depend on you less.

Parent Activities

Each home visit will contain some activities and information which focus directly on parents. You might let the children continue one of the other home visit activities, or you might bring special materials or games to occupy children during this time. Talk with the parent and determine a strategy which gives you important uninterrupted time.

There are three types of information or activities which you will share with the parent:

- component information,
- program information, and
- meeting needs expressed on the Family Assessment.

Component Information

This is general information which can be presented to all families and includes discussing with the parent, leaving pamphlets or other materials, and informing parents of community resources. All components—medical, dental, nutrition, mental health, child development, safety, social services, and parent involvement—will be included.

Most well-designed home-based curricula incorporate component information in each unit (Appendix B). Programs which don't use a unit curriculum have found it helpful to develop 1-2 component activities for each week at the beginning of the program year. Pamphlets and other information necessary to carry out activities can be gathered with assistance from component coordinators. A sample of this type of plan is included in Figure 3.

When discussing the component information during each home visit, ***personalize*** it for each family. Discuss how the family can apply the information. This information sharing can be extended to an activity involving the children. For example, if this week you are discussing fire safety, you might plan escape routes with parents and then have a fire drill to teach children what to do in an emergency. Some component information might involve an activity for parents during the week which will be followed up on the next visit. Perhaps this week you discuss nutrition and children's eating habits. During the week the parent records how many snacks the child eats each day and what foods the child eats for snacks. On the next home visit the parent and you discuss snacks and changes which might improve the child's diet.

An activity in one of the component areas might best be accompanied by a handout on which to base your discussion with the parent. Be sure the information is presented in clear, non-technical language. As you adapt the information to the specific family and home, encourage the parent to write these adaptations on the handout to refer to later. Give the parent a folder in which to keep all handouts. Some parents like to have the handout a week in advance of the discussion. They can read it and prepare a list of comments or questions.

Another helpful idea is to coordinate your component activities with information presented at parent meetings. Help parents apply the information from parent meetings to their own situations. This can be very helpful in getting the information to come alive for the parent.

In most cases you will be exposing the parent to information or resources rather than doing in-depth training. You will have neither the time nor the expertise to do so. However, encourage the parent to share any questions with you, and don't be afraid to tell the parent when you don't know the answer. Jot the question down and let the parent know that you will find the answer and that you will both learn something new. The parent will not expect you to have all of the answers but will appreciate the fact that you have done something extra.

Figure 3

Month April
Theme April Showers

Home Visit Activities

WEEK 1

1. Art: Egg shell collage on Easter egg shape.
2. Art: Will make a stoplight.
3. Spring Walk: Will talk about safety when walking, crossing the street, facing traffic.
4. Will draw face and/or a man to place in ME BOOKLET.

WEEK 2

1. Art: Make Easter egg baskets.
2. Color Easter eggs.
3. Easter egg hunt.
4. "Food: Early Choices": **HI Dee Ho**
   Purpose: To introduce children to the idea that food and exercising help them grow and keep healthy.

WEEK 3

1. Science: Plant seeds.
2. Body Movement cards.
3. Art: Will make butterflies with construction paper and egg cartons.

WEEK 4

1. Discuss why rain and sun are necessary for plants to grow. Place one plant in dark area and one in sunlight and observe growth.
2. Art: Marble painting.
3. "Food: Early Choices": **Mixing Up Food.**
   Snack: Fruit Salad.

Parent Education Activities

1. Will discuss traffic safety and the importance of teaching children to be careful of traffic.
2. Strategies For Caring For The Sick Child.
3. Will discuss the importance of allowing children to cook.

1. Traffic Safety Booklet #1. Will read booklet to child and discuss.
2. Will discuss car safety.
3. "Food: Early Choices": **Food For The Family.**

1. Will discuss lead poisoning and symptoms of lead poisoning.
2. Will review basic safety rules for children—inside and outside.
3. Will review fire drill plan.

1. Will discuss using household materials and routines in teaching.
2. "Food: Early Choices": **Labels . . . Windows For What's Inside.**

Program Information

Each week there will be program information to share with families such as program newsletters and announcements of parent meetings, other program activities, and community events of interest. Take a moment during the parent time to share this information. It is particularly important in home-based programs to keep parents up-to-date on program activities because they have less opportunity to see announcements posted in the center. If there is a parent meeting or child group experience scheduled, tell the parent and be sure that the information is written down and placed in a prominent place, perhaps beside the telephone. Encourage parents to attend meetings, volunteer as aides, or even contact other parents to remind them of meetings, etc. Help parents recognize that they are valuable contributors to the program and that the program will benefit from their time and ability.

Meeting Expressed Needs of Families

During the Family Assessment process, families identified specific strengths and needs. The Family Assessment process also involved setting goals to meet these needs. During each home visit parents and home visitors will work on activities which lead toward attainment of set goals. As goals are accomplished, parents will select new goals to work toward and activities will be planned to meet these new goals.

One goal for the home-based program is to increase families' independence in meeting their own needs. Home visitors can assist by informing families of community resources and assisting them in contacting other agencies. Activities could include role playing the contact of an agency to secure service.

Another activity is using resource directories to find appropriate agencies. Plan activities which give parents the assistance they need; do not do something for them which they can do themselves.

If the parent/family is hesitant to express needs, you can plan activities to encourage or help the parent. The parent must be aware of all the programs and services available in the community and through the Head Start Program. Discuss various agencies such as the Health Department and tell the parent its location, schedule of services, eligibility requirements and Health Department personnel to contact. The Component Activities previously discussed are another way to generate expressed needs by sharing pamphlets on safety, nutrition, sanitation, and medical, dental, and mental health. These pamphlets may make the parents aware of a need and result in their identifying it to the home visitor. For example, the home visitor and parent discuss a pamphlet on dental health and bottle mouth caries. After this discussion the parent asks the home visitor about the milk or juice bottle the two year old takes to bed at night. They plan steps to change this habit and promote better dental health.

When working on these activities, the home visitor is not as much an educator as an in-home resource person. Home visitors

are not expected to be experts in all fields. They are not social workers, doctors, psychologists, or marriage counselors. Thus, when the parent has expressed a need, the role of the home visitor is limited to helping the parent locate, contact and follow up with appropriate resources and apply information from various resources.

You asked me last week if I knew of any places that needed temporary help, Ms. Franks. I checked into it the other day. There's a place called MANPOWER that has an office in town. Apparently they arrange temporary jobs for people. The phone number is in the book. Would you like to talk with them?. . .Mary, I wouldn't know what to say. I haven't worked since Jean was born, countered Ms. Franks. *Let's try it, I'll make believe I work at the MANPOWER office and you talk with me as though over the telephone. . .I don't know, Mary. . .Oh, let's give it a try. Who knows, maybe you could get a job!. . .OK, but I'll feel silly,* said Ms. Franks. She ended up calling before the visit ended.

As with all activities, it is important to individualize to meet the parent's expressed needs. The intention of these activities is to help the parent find solutions to problems they are having. As you work toward a solution, encourage the parent to be as independent as possible. Suppose a mother were to discuss with you that her husband has left and that she is having difficulty making ends meet. She doesn't know what to do and is not aware of the resources in her community that could help. The home visitor and the Social Service Coordinator could assist the mother in a number of ways.

- Explain the Aid to Dependent Children (ADC) program offered by the Department of Human Services.
- Give the parent the phone number to call to apply for ADC.
- Give the parent the name of a person at Social Services whom she could contact.
- Call Social Services for the parent to make an appointment.
- Arrange transportation for the parent.
- Drive the parent.

Each step represents increased responsibility for the home visitor. Help parents use their own strengths and resources. Give only as much help as they need to find their own solutions. The more parents do on their own, the more independent they will become. Working toward this end should be your goal as you present activities that address parent needs.

Some needs expressed by families may require direct intervention by a specialist. For example, the parent may be having difficulty coping with the demands of a handicapped child. The home visitor should refer this need to a person experienced in counseling families. The counselor may suggest some activities for the home visitor, or the counselor may see the family separate from the regular home visits.

There may be occasions when the home visitor arrives for the visit and finds the family has new needs which need immediate attention. For example, a child has developed a high fever during the night; parents have just been informed they must move; the family is without food; or one parent reveals a drinking problem. Relieving the crisis obviously takes precedence over other activities planned for the visit. The home visitor will need to discuss with the parents possible solutions. Give the parents the opportunity to do as much as possible for themselves—do not step in and direct. The visitor may need to consult with other Head Start coordinators or community resources to provide alternatives to the parents. The visitor can assist the parents in planning steps to meet the needs. Obviously the steps to care for an ill child will need to be accomplished quickly. The home visitor can assist in finding a clinic and arranging transportation, if necessary. In short, meeting the family's expressed needs will be directly linked to the family assessment, will occur on a weekly basis, and will encourage problem solving and the development of independence on the part of the parent.

Let's review what has happened up to this point in the home visit: You started the visit off with a warm greeting and followed up on the activities the family has been doing since the last home visit. During this review you reinforced the child for new skills she accomplished and the parents for teaching. You also reinforced parents for appointments kept or participation in parent meetings or other specific ways they followed through on some part of the previous visit.

During the Parent/Child Interaction activities, you and the parent discussed the activities planned for the visit and presented them to the target child. Siblings were also involved in the activities whenever appropriate. These activities included generalization and expansion of skills, component information on the child's level, and activities to teach new skills.

Next you shared program information with parents including announcements, newsletters, and special events. Component information was discussed and handouts and/or pamphlets provided. All of this information was individualized to make it meaningful to the family. Parent activities were also presented which assisted parents in meeting a goal set on the Family Needs Assessment.

The next part of the visit, Co-Planning, is critical to cementing and incorporating the material covered on this visit and encouraging parent involvement on the next visit.

Co-Planning

There are two types of planning during the visit: planning family activities for the week based on information from the present visit and planning for future visits. Planning family activities involves the parent in selecting activities for the week. Use the Family Activity Plan to record these activities. The activities to teach the child new skills should always be included in the Family Activity Plan. Review directions for each activity and help parents plan a convenient and appropriate time to do them. For example, if an activity relates to dressing, plan to do it in the morning or at night when the behavior normally occurs. Some programs and parents have found that recording on the Family Activity Plan each time an activity is done provides a reminder to parents and enables home visitors to reinforce families for working regularly with their children (or in some cases to discuss importance of doing activities with children and encouraging parents to work more frequently).

The Plan also includes family activities. Help the family choose and record activities to do during the week. These might include:

- attending parent meetings or other program sponsored activities;
- making and/or keeping appointments with medical, dental, or mental health clinics;
- continuing activities started on the home visit, for example art or cooking projects;
- expanding on home visit activities; for example, after talking about zoo animals on the home visit, the family visits the zoo.

Ask parents if they have any questions about the activities they will be doing during the week.

Planning for the Next Visit

The second type of planning involves preparing for the next home visit. Including parents in planning tends to increase their commitment to participating in activities and carrying out activities between visits. Secondly, parents gain skill in setting appropriate expectations for their children. Involve parents in planning from the beginning. While they may need more support and guidance during initial home visits, they will gradually take on more responsibility.

If the program uses a unit curriculum, share the suggested unit theme for the next visit with the parents and discuss their interest in the topic. If the theme does not seem of interest, the parent and you may select another unit or design activities around a theme suggested by parents.

During the initial visits discuss the types of activities done on each visit. Tell parents that activities need to be individualized for each child and that each type of activity has specific purposes.

To plan **generalization/expansion and component activities**, consider skills the child already knows. If using units, review suggested activities and determine what skills the child would be expected to demonstrate. The parent and you may need to modify the suggested activities to make them appropriate. If not using units, the parent and you suggest activities involving generalization and expansion. Plan the materials that parents and home visitor will provide. (Record on the Family Activity Plan for parent and Home Visit Report for home visitor).

There may be times when it is difficult to think of an appropriate motivating activity or a means for modifying a suggested activity. Explain to the parent that you will use her suggestions and consult other resources to help plan the activity for the next visit.

In planning **new skills**, give parents a copy of the educational assessment or checklist. The checklist provides a record of skills across developmental areas which their child can perform, including those learned since enrollment in the program. Using this tool helps parents select appropriate skills to teach their child. It is important that new skills are learned across all developmental areas. Home visitors may want to suggest the developmental areas on which they should concentrate during the next visit. If parents have difficulty selecting a skill, home visitors might suggest two or three which would be appropriate. Remember developmental checklists are by no means complete; parents may suggest skills not on the checklist which are important in that child's particular environment.

After new skills have been selected, discuss the necessity of breaking each skill into small steps so that the child will be able to see accomplishment quickly rather than to work on the end result for a long, somewhat frustrating period. The involvement parents have in breaking down the skills will increase as they become more familiar with the process. Initially after skills are selected, you might suggest appropriate aid or materials. Gradually bring parents into the process of selecting subskills to teach and strategies and appropriate materials to use.

New skills might also be selected from skills the child and parent worked on previously, but the child was not able to accomplish. When activities are continued, several things can be done to ensure success.

☆ The objective can be modified. Change the objective to reflect how well you expect the child to perform the skill if it is worked on for another week.

As an example, if the objective not achieved is:

Ben will hop 5 feet, on one foot, without aid 3/3x.

The home visitor can change it for the next week to be:

Ben will hop 5 feet, on one foot, while holding onto table, 3/3x.

☆ The correction procedure for teaching the activity can be changed. The approach to teaching the task can be altered to better suit the child's needs.

For example, the previous activity directions may have stated:

Correction Procedure:

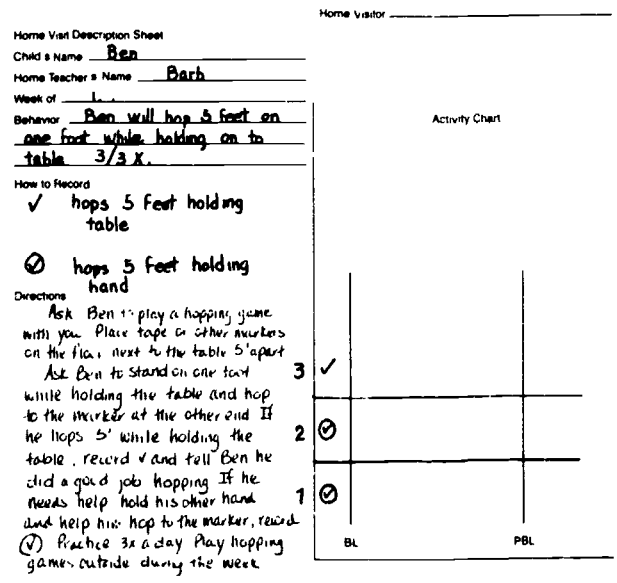
If he has difficulty, take his hand to help him and let it go as soon as he's going forward.

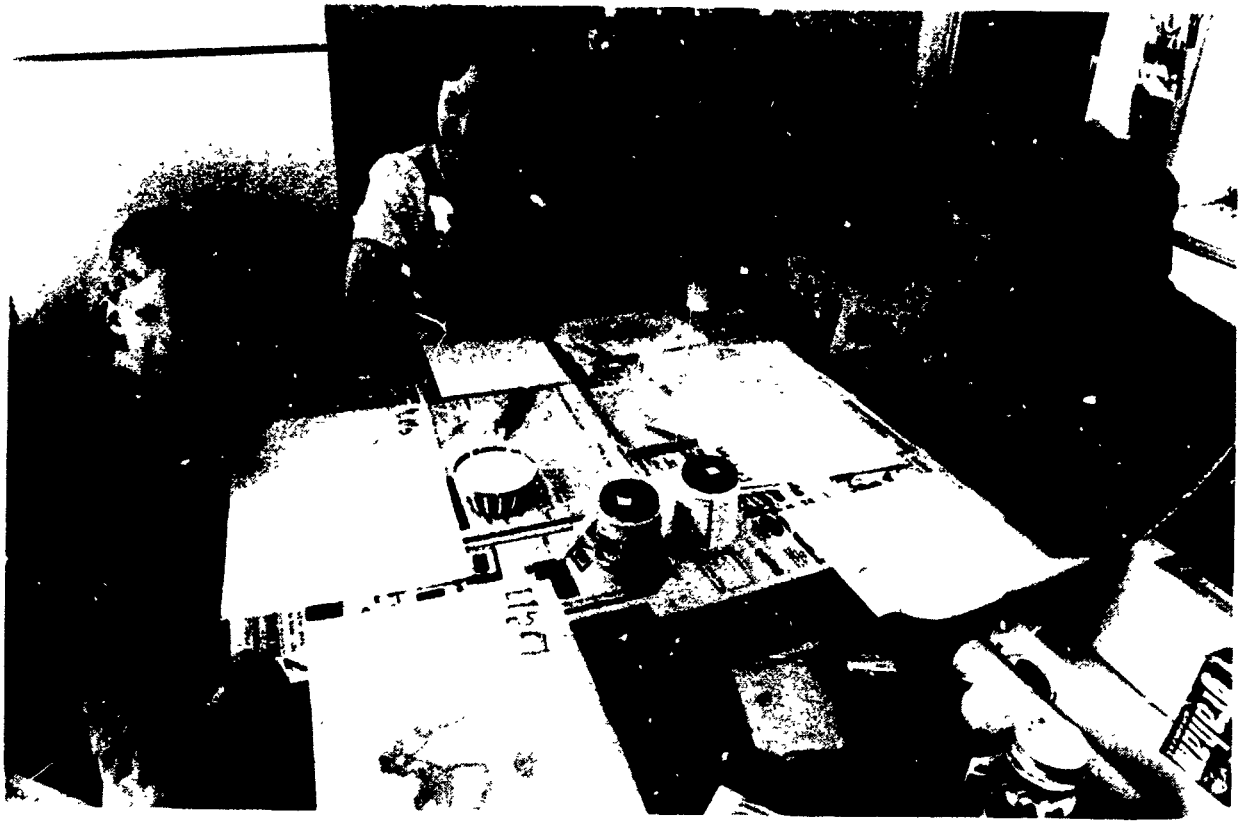
The changed procedure can read:

If he has difficulty, hold his hand while he holds table with other hand.

☆ If the parent is unclear about how to teach the activity, it may be enough just to plan the same activity. (Discuss it with the parent and give her a chance to try the activity while you are there.)

Sample chart for teaching new skills.





By including parents in planning, you are increasing their ability to plan and teach appropriate skills as well as helping them set appropriate expectations for their children. The planning done by the parents is dependent upon their skills. Initially parents may be hesitant to participate in the planning process. They may feel that you are the teacher and should have all the answers. Continue to discuss activities with them and reinforce their teaching skills. If you show parents that they do have valuable information to contribute, they will become comfortable participating in the planning.

The final activities to plan are those relating to parent's **expressed needs**. Review the Family Assessment with the parents and determine progress that has been made toward goals. If a goal has been accomplished, parents may select a new goal. They may also have additional needs or interests. Select the goal or step toward reaching a goal which will be worked on during the next visit. If materials are involved, determine who will bring them.

Evaluation

The close of the visit is approaching. Activities for this week are complete; families have established activities they will do during the week; and activities for the next week have been discussed.

Conclude the visit by asking parents what they learned today, what they liked, what they would like changed, etc. Ask parents to comment on the Home Visit Report, Figure 4. If parents don't feel comfortable writing on the form, you can record their comments and then ask them to sign it to document the completion of the visit.

This part of the visit can also include socializing with the parents. They may offer coffee or soda. Sit and relax and talk a moment before your next scheduled visit. Often a little personal talk as you leave helps conclude the visit and lets the parent know you care.

The following chart summarizes all the elements of the home visit.

SUMMARY OF HOME VISIT ELEMENTS

Element	Purpose	Hints
Greeting	To focus on the family and begin the visit with enthusiasm.	Take a few minutes to think and relax to get yourself off to a good start. Focus on the family; get involved with them. Act like you're glad to be there and the feeling will become real. Find and build on the positive aspects of the family.
Follow-up	To provide positive reinforcement to child and parent for completing activities during the week.	Call families during the week to encourage completion of activities and provide support if there are problems. Be sure parents are involved in selecting activities to be completed during the week. Stress the importance and positive effects for parents of working with their children. Keep encouraging! Avoid giving them guilty feelings; try different ideas to encourage completion of activities. Help parents plan activities which fit into their present routines.
Parent/Child Interaction Activities	Child learns new skills. Child generalizes and expands present skills. Component information on child's level presented. Parents learn to make daily routines learning experiences using household materials. Parents increase their ability to teach their children effectively.	Consider child's developmental strengths and weaknesses in selecting skills. Consider child and parent's interest and likes in planning activities and materials. Involve parents in planning and implementing all activities. Be flexible, have back up activities prepared in case there are problems. Let parents practice activities during the home visit which they will be doing during the week with the child.

SUMMARY OF HOME VISIT ELEMENTS

Element	Purpose	Hints
Parent Activities	Increase parents' awareness of community resources. Increase parents' participation in Head Start program activities. Guide parents in meeting their identified needs. Foster ability of parents to meet their own needs. Increase parents knowledge of health, nutrition, safety, and social services.	Personalize information to make it applicable for each family. Reinforce parents for their participation in program activities. Focus on needs identified by parents; don't place your values on families. Only do as much for a family as they need; don't do things which they can do for themselves. Listen to families; clarify their thoughts to ensure understanding. Remember: Parents are adults.
Co-Planning	To increase parents' motivation to participate in the home visit and follow through on activities between visits. To increase parents' ability to set realistic expectations for their children.	If parents have difficulty planning activities to do during the week, offer suggestions from which to choose. Gradually increase parents' involvement in the planning process. Have them suggest ideas at first and gradually increase their involvement in planning complete activities. Use parents' suggestions; if some need modifications discuss how the parents' suggestion could be incorporated into an appropriate activity. If you place importance or value in parents participating in planning, they will also.
Evaluation	Involve parent in assessing the home visit.	Ask parent "What did you learn?" "What did the kids learn?" "What should we do differently next time?" Your perception of the visit may be different from that of the parents; ask parents to evaluate even if you don't feel the visit was the best. Learn from their perceptions. Leave on a positive note; let the parents know you care.

A Final Word

A home visitor is like a chef. As chefs begin their careers, they must first become familiar with their kitchens, and they rely heavily on recipes developed, tried and shared by others. As they develop their own base of experience, they discover that they needn't follow recipes quite as closely for they are aware of the effect each ingredient will have on the finished product. Finally, through their own experimentation, successes, and failures, they are able to share their own recipes with others.

To ensure your success as a home visitor, keep these do's and don'ts in mind.

- ☆ Do be a good listener
- ☆ Do have specific goals or objectives for each visit.
- ☆ Do be flexible.
- ☆ Do be prompt to your home visits.
- ☆ Do realize the limitations of your role.
- ☆ Do help parents become more independent.
- ☆ Do keep language appropriate.
- ☆ Do dress appropriately and comfortably.
- ☆ Do be confident.
- ☆ Do remember that small improvements lead to big ones.
- ☆ Do be yourself.
- ☆ Do respect cultural and ethnic values.
- ☆ Do monitor your own behavior—the parent is observing you.
- ☆ Don't impose values.
- ☆ Don't bring visitors without the parent's permission.
- ☆ Don't socialize excessively at the beginning of the visit.
- ☆ Don't exclude other members of the family from the visit.
- ☆ Don't talk about families in public.
- ☆ Don't be the center of attention.
- ☆ Don't expect perfection from the parent.
- ☆ Don't ask the parent to do something you wouldn't do.

Last, but most importantly, remember the parent is the person to whom your effort should be directed. Parents are people who have a great deal of knowledge, skills, and life experience behind them. As home visitors, we need to respect this and build upon their base of experience. At the same time, we must ensure successful experiences for the parents so they develop confidence as effective parents and teachers of their children.

Recording the Home Visit

In order to accomplish all of the preceding purposes, **Home Visit Plans/Reports** and **Family Activity Plans** must be prepared for each visit with each family. Consider the following reasons for using these two recording forms:

- ★ To keep the responsibility for teaching with the parents by involving them in development of weekly lesson plans.
- ★ To keep the home visit focused primarily on the parent from planning to evaluation.
- ★ To keep track of progress toward goals for child and family in all component areas.
- ★ To allow for the individual needs of the family.
- ★ To enable the home visitor to plan effective techniques for enhancing the parent's skill.
- ★ To assess what was accomplished between visits.
- ★ To keep on task during visit.
- ★ To share necessary information.
- ★ To be prepared with necessary materials.

Family Activity Plan

This plan (Figure 2b), is completed and remains in the home during the week to serve as a guide to families in carrying out suggested/planned activities. The **Parent/ Child Activities** are completed prior to each home visit and are based on parents' ideas and suggestions from the previous visit. These activities are planned to teach the child new skills; parents work with the child by following suggested procedures. At the beginning of each visit during follow-up, the home visitor observes the child doing each activity and records accomplishment of new skills. Completion of the **Family Activities** and **Plan for Next Visit** is described in the Co-Planning Section of this chapter.

The final section of this form **Comments/ Questions** is completed by parents during the week. These may relate to problems with activities, information they would like from the home visitor, or general comments about any of the activities. They can share these with you during the next home visit.

Since the Family Activity Plan contains a record of child and family activities, you will want to collect them each week to be kept on file with the Home Visit Report/Plan for the visit.

Home Visit Report/Plan

Lesson plans can be developed by using unit curriculums or by using a variety of resources to plan for each family. If the program uses a curriculum with suggested activities for each home visit, it is necessary to individualize the activities for each child and family. Individualization is particularly important in activities designed to teach new skills to the child and meet specific needs expressed by parents.

The following lesson plan incorporates necessary information and provides a guide for planning and implementing each element of the home visit.

Page 1 of the Home Visit Report/Plan (Figure 4) will be completed before each visit using information from the Co-Planning portion of the previous visit. Record the **New Skills** which parent and child will work on during the week. The plan contains only the objectives for these skills; complete directions will be recorded on the Family Activity Plan left in the home. The **Generalization/Expansion/Component** section of the plan contains activities done with all children and family members. This may be activities from a Unit Curriculum or activities planned from other sources. If you use units, your program may choose to record only the unit title or number on this plan. If you modify activities or use activities not described in the curriculum, record those in this section. If you are not using units, describe the activities.

Figure 2b

FAMILY ACTIVITY PLAN

recorded next visit

	Accomplished Yes	No
#1	____	____
#2	____	____

FARENT/CHILD ACTIVITY #1

New Skill (Objective):

Materials:

Presentation:

Help/Aid:

Reinforcement

Generalization:

PARENT/CHILD ACTIVITY #2

New Skill (Objective):

Materials:

Presentation:

Help/Aid:

Reinforcement:

Generalization:

FAMILY ACTIVITIES:

PLAN FOR NEXT VISIT:

Materials I will provide:

Activities/Unit:

COMMENTS/QUESTIONS to discuss on next home visit:

Figure 4

HOME VISIT REPORT/PLAN

Child (Family): ______________________ Home Visitor: ______________________

Scheduled Date: Time: Rescheduled Date: ______________________

ACTIVITIES	Social Services	Health: Medical	Health: Dental	Health: Nutrition	Health: Mental health	Health: Safety/Sanitation	Parent Involvement	Education: Motor	Education: Language	Education: Self-help	Education: Socialization	Education: Cognitive
Parent/Child Interaction:												
New Skill (objectives) *Record complete directions on Family Activity Plan*												
(1) ______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
(2) ______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Generalization/Expansion/Component:												
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Parent:												
Program Information: ______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
General Component: ______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Meet Expressed Needs: ______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
______________________	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

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Figure 4 continued

Page 2

PLAN F')R NEXT 'VISIT:
Unit/Activities:

Materials Home Visitor
Supplies:

New Skills:

Family Assessment/Component Activities:

EVALUATION (Parent Comments):

Parent Signature: _____

Home Visitor Comments:

The **Parent Activities** are also recorded on the Home Visit Report/Plan. Briefly describe each type of activity the parents and you will do during the visit.

When reporting both types of activities, indicate the component or developmental area the activity addresses. It is probable that activities will touch on more than one component or developmental area—record in each appropriate column. This record provides a quick check that over a period of 3-4 home visits all developmental and component areas are being addressed.

Page 2 of the Home Visit Report/Plan will be completed during the Co-Planning and Evaluation portion of the home visit. The detail to which the **Plan for the Next Visit** is completed is dependent upon individual family strengths and interests and to some degree the phase of the program year. During initial home visits planning may include only suggesting ideas or themes for activities. As families progress in the program, planning may include selecting skills to teach and planning teaching procedures, developing generalization experiences, individualizing unit activities, etc. Discussing and recording materials to be contributed by parents and home visitor is important on each home visit. Ask the parent to record items they will provide on the Family Activity Plan (which they keep); items which you will provide are recorded on the Home Visit Report (which you keep). It is possible that with some families who have become skilled in planning, the parents and you will complete Page 1 of the Home Visit Report/Plan for next week during the Co-Planning portion of the visit. If this is the case, you will only complete the **Materials** section on Page 2 of the planning section.

The remaining sections of the Home Visit Report/Plan are completed at the conclusion of the visit. Following a discussion with parents, ask them to record their comments and sign. Some parents may prefer you write their comments.

Home Visitor Comments may be completed during the visit or immediately following. Remember to be objective in your comments. Record information you saw or heard which will assist you in planning and implementing future visits.

As the title implies, the Home Visit Report/Plan serves two purposes. It provides a guide for implementing the activities planned for the visit and also serves as a record to document activities done with each family.

Experienced home-based programs have developed a variety of other record keeping procedures to document home visits. The following are samples which you might consider.

SCHOHARIE COUNTY HEAD START
HOME VISIT PLAN

DATE _____ FAMILY _____ H B V _____

HOME VISIT #. _____ PERSON INVOLVED _____

VISIT BEGAN. _____ ENDED _____

Evaluation of last week's AT HOME Activities _____

Activities for Parent & Child to do this week _____

Materials left in home _____

COMMENTS _____

_____
Signature date

SCHOHARIE COUNTY HEAD START
HOME VISIT PLAN (con't)

GOALS _____

INCLUDE TARGET DATES

OBJECTIVES	ACTIVITIES	MATERIALS	EVALUATION
EDUCATION			
NUTRITION			
HEALTH			
PARENT INVOLVEMENT			
SOCIAL SERVICES			

Sample Homevisit Report

ARVAC, INCORPORATED—HOME START TRAINING CENTER
Post Office Box 2110
Russellville, Arkansas 72801

DATE _____ **HOME VISITOR REPORT FORM** FAMILY _____

COMPONENT	WHAT	WHO	PARENT RESPONSE	HOME VISITOR ACTION	REFERRALS/FOLLOW-UP (SERVICE/DATE)	MATERIAL FOR NEXT VISIT
HEALTH Concepts:	Activity					
MENTAL HEALTH Concepts:	Activity					
DENTAL HEALTH Concepts:	Activity					
NUTRITION Concepts:	Activity					
SOCIAL SERVICES Concepts:	Activity					
PARENT INVOLVEMENT Concepts:	Activity					
EDUCATION Concepts:	Activity				Assessment No.	Response

HOME VISITOR _____ DATE _____ REVIEWED BY _____ DATE _____

Sample Homevisit Report

Parent and Child Education Programs
Mill Shoals, IL

Rx Activities	Baseline	Post Baseline	RECORDING (/ = when presented; fill in date when accomplished)								

Week # _____

Visit # _____

Date _____

Length _____

Theme: _____

/ = Presented

Last Week's Total										
Total Accomplished										
Total Presented										

Home Visit Activities										
Wash hands; brush teeth										
Snack:										

Parent Activities _____

Developmental Areas	Cognitive	Language	Motor	Self-Help	Soc.	Health	Nutrition	Dental	Mental Health
Last Week's Totals									
Total Number Activities Y.T.D.									

Parent Comments: _____

Teacher Comments: _____

_____

Parent Signature (upon completion of home visits)

Sample Homevisit Report

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Home visiting ideas from exemplary programs.

Curriculum planning is done in three stages. First, activities are planned for skill acquisition. The home visitor and parent choose a skill off the Portage checklist and break it down so the child can learn it within a one week instructional period. The home visitor prepares an activity chart that includes instructions for the parent. It also includes correction procedures, reinforcement, and a place to record the child's progress. Parents, depending on ability, assume more and more responsibility for preparing activity charts as the year progresses. The second stage is activities which are planned for maintenance and generalization of skills. These activities include snacks, art, nature walks, etc. The third stage is parent activities. The home visitor and parent work at increasing the family's problem-solving abilities and independence in all component areas.

All home visits are focused on themes including all four component areas. Educational activities are planned off of a locally designed assessment with additional activities added by the parent and home visitor to include all component areas.

Before the beginning of the year, we develop 36 lesson themes to use during the year.

We have monthly objectives in each component area, like kitchen safety; however, the activity may be different depending on the needs of each family.

In our staff meetings, we develop curriculum for a one month period.

Social Service/Parent Involvement Coordinator makes a home visit and fills out a family needs assessment. Coordinator meets with home visitor and plans strategies. The home visitor is responsible for carrying these out with as much parent participation as possible. The coordinator is not called in again unless a crisis occurs or the home visitor or parent needs additional support.

Health Coordinator prepares a monthly curriculum which the home visitor implements adapting it to each family. This includes a weekly snack and health/nutrition activities.

This program prescribes to the HENS concept.

3/84
1S Form #1-9
CAMBRIA COUNTY COMMUNITY ACTION COUNCIL, INC.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Group Socialization

One necessary element in a successful home-based program is the group socialization for children. Both parents and staff members often question the lack of opportunity for children to interact with their peers in the home-based option, and the evaluation of the Home Start Demonstration Program indicated that peer group socialization was a matter of concern. Consequently one of the requirements of the home-based option is to provide regular peer group interaction experiences for children.

The social and emotional world of three and four year old children is growing beyond the family. They need to develop friendships and increase their ability to get along with others. Through group experiences children learn to share, take turns, respect others' feelings, and deal with conflict. Friendships give the child a sense of belonging to a group in which he/she is a valued and unique member. The focus of group socialization experiences is to promote positive peer socialization and interactions. This section will discuss group socialization basics.

- When and how often should these groups meet?
- How long should a session last?
- Where can socialization experiences be held?
- Who is responsible for staffing?
- How is a group experience planned?
- What do you do about implementation concerns such as: transportation, snacks and lunches, schedules, suggested activities, outdoor play, parent and community volunteers, recording and evaluation?
- What are other possibilities for peer group experiences?

When and How Often?

Group socialization must be scheduled at least once a month for three hours (the minimum requirement suggested in the home-based draft performance standards). The Home Start Training Centers recommend increasing the number to at least two per month, and if at all possible, to one each week. With a greater number of contacts, children feel more at ease in groups and are more likely to learn to interact successfully with each other.

How Long?

The length of the group socialization varies from two to four and one half hours. This time length varies depending on location, the number of group socializations per month, and the age of the children. If there is only one per month, the experience should last at least three hours.

Where?

Group socialization can happen anywhere—any available building or facility will do. Public facilities must meet local licensing requirements. Possibilities include existing Head Start centers, public or private schools, churches, libraries, nursing homes, community rooms, senior citizens centers, hospitals, traveling vans, client parents' homes, home visitors' homes, and empty store buildings. Each location has advantages and limitations. Many programs use an already established Head Start center when center-based children are not in session. The advantages are tremendous.

- Interest centers are in place.
- Materials are readily available.
- They contain child-size equipment and facilities.
- Centers usually have kitchens.
- There is an established playground.
- Storage space is available.
- Many centers are licensed, allowing USDA reimbursement for meals and snacks.

There are also limitations.

- Home-based and center-based staff may disagree over use of materials and space.
- Home-based and center-based staff may encounter scheduling problem. For example, the center-based staff may prefer to use the center for a parent meeting or for a staff meeting at the same time as the home-based staff wants to use it for group socialization.

If center-based and home-based staff are sharing a center, talk over these problems and develop workable solutions before the program year begins. Staff might develop calendars together and set the schedule for both center-based and home-based child center time, parent meetings, etc. They should decide about use of materials—can all groups use from the same set of supplies, or must home-based and center-based supplies be kept separate?

Other types of buildings are very usable and have differing advantages and limitations. Churches and schools often have child-size equipment and facilities; schools have playground space and lunch programs; senior citizen centers, nursing homes, and hospitals will often offer hot lunches; empty store buildings can be developed into more permanent facilities. Public awareness may be greatly enhanced through interaction with groups donating space.

As always there may be limitations.

- In most of these buildings outdoor play space and equipment may be limited or non-existent.
- Most do not have child-size equipment or facilities, and the staff must be more creative in using space. For example, in a senior center with no child-size equipment, the staff may choose to do many activities on the floor or may develop portable, multi-use equipment.

- In many of these buildings, materials and equipment must be put away, or in some cases, taken from the building after each session. This requires more time and more planning. If materials must be carried in each time, staff can pack together in labeled boxes basic materials that will probably be used each time (scissors, crayons, paper, puzzles, books) and can develop simple interest center materials and pack them into labeled boxes. One home visitor has developed several box interest centers, including a doctor's office, a ranch, a restaurant, a circus, and a gardener's box. The ranch box contains boots, cowboy hats, neckerchiefs, a curry comb, a piece of hide to comb, a branding iron, books about cowboys and ranches, and small size horses, cows,and fence. In the gardener's box are child-size garden tools, seeds, seed catalogs, hats, and books about gardening (*The Carrot Seed*, etc.).

Using homes—either parents' or visitors' homes—works well if the people involved are not forced to offer their homes. This should be completely optional, especially for the home visitor. Usually several parents enjoy having the group.

There are many advantages.

- Parent involvement may increase.
- Children do not have to travel long distances because the group socialization is held in their area.
- Children and families who live in the same general area have an opportunity to get better acquainted, and as a result, often develop on-going support/interest groups.

There are also some limitations.

- Outdoor play space and equipment are often limited.
- Many homes are small and cannot accommodate more than six or seven children. This means that a home visitor will probably have to schedule two group socialization experiences each week (or month). For example, in one home-based program, part of a home visitor's client families live in a trailer court that is some distance from the office and also at a distance from other home-based families. The home visitor meets with this group of six or seven children once a week in one of their homes. The resident parent serves as her aide. Parents offer their homes when it is convenient and comfortable for them.

Mobile vans are used successfully by several programs. The home visitor drives to a central location one or more times a month (usually at least twice a month) and conducts a group socialization experience for four to seven children in the van.

There are advantages.

- Materials and equipment can be kept in place on the van.
- Child-size equipment can be installed.
- The van can be equipped with kitchen facilities.
- Group socialization can be provided in outlying areas without requiring children to travel long distances.
- Children and families who live in the same general area can get better acquainted.

There are also limitations.

- The initial cost of the van and outfitting it for use may be prohibitive.
- Travel expenses for the van may be high.
- Road conditions may make use of a van undesirable.

All of these possibilities are being used successfully by Head Start programs. Choose a safe, productive environment that will work in the local area (see Sample Safety Checklist. Figure 5). Base choices on what children and their families need and on what will most benefit them and the community.

Figure 5

PACT
P.O. Box 8
Timewell, IL 62375

SAFETY CHECKLIST
SPACE FOR CLUSTER GROUP

Home Visitor _____ Area _____ Date _____

Building _____ Address _____ Phone No. of Building _____

Owner _____ Phone No. of Owner _____

1. Square footage of area _____
2. Does each floor have two remote exits? _____
3. Does at least one exit go directly to the outside? _____
4. Can bathroom doors be opened from outside in case of emergency? _____
5. Is emergency lighting available? _____
6. Are hazardous areas (kitchen, storage rooms, furnace rooms) segregated from the remainder of the building with doors and walls? _____
7. Does electrical wiring appear to be adequate? _____
8. Are there approved and working fire extinguishers available? _____
9. Does the staff know how to operate the fire extinguisher? _____
10. Is there a safe and effective heating system? _____
    (radiators, stoves, hot water pipes, portable heating units, and similar potential hazards are adequately screened or insulated to prevent burns)
11. Are painted surfaces peeling and/or lead contaminated? _____
12. Are rooms well lighted? _____
13. Are there adequate toilet and handwashing facilities _____
14. Is there a telephone available? _____
15. Is the space available for the time scheduled for cluster group? _____

OUTDOOR SPACE

1. Location of outdoor space _____
2. Square footage of area _____
3. Is there a fence around the area? _____
4. If no fence, number of feet from the road _____
5. Is there playground equipment available? _____
6. Condition of playground equipment _____
7. Condition of area (glass, tree limbs, rocks, etc.) _____

Who?

Who is responsible for planning and conducting the group socialization? Most often one or more home visitors meet with the children. Staffing includes many of the following variations.

- Two home visitors are responsible for two group socialization experiences per week (or bimonthly or monthly). For example, in one program two home visitors who work out of the same office in a small midwest rural community conduct two group sessions per week. On Wednesday home visitor A's caseload children attend; on Thursday home visitor B's caseload children attend. In a situation like this, the home visitor supervisor or education coordinator should designate one of the home visitors as lead teacher.
- One home visitor, acting as lead teacher, conducts the group socialization and uses one or more parent volunteers as aides. This is often used in isolated communities or areas where home visitors work out of their own homes and live and work at a considerable distance from each other.
- A staff person other than a home visitor serves as the lead teacher. She may be responsible for group socialization experiences for from two to five different groups in one week. A home visitor serves as her aid when children from her caseload attend. This is often effective in urban settings but can also be used in other locations.
- The home visitor and a coordinator may provide the plan and conduct the group experiences.

Another possible way to provide group socialization is considerably different from others in that parents, target children, and preschool and kindergarten siblings all come to the same location at the same time one or more times a month. On arrival, target children go to one designated area, kindergarten children to another, and infants and toddlers to a third area. Parents stay with the Head Start target children for about thirty minutes to observe and interact with their own children or others. Parents then go to a parent meeting which may be either a business meeting or an educational meeting or a combination of the two. (A sample schedule of Joint Parent/Child Socialization is included in Figure 6.) A nutritious snack is served to all groups and developmentally appropriate activities for all groups are planned. More staffing is required than in the other variations because one or more staff members, depending on the size of the groups and on the ages of the children, must work with each group. (For example, plan one adult for three infants.) Often outside helpers such as community volunteers and foster grandparents are available. Program parents sometimes take turns working in the child centers. This option has been extremely popular with parents. Regardless of the staffing pattern you choose, include, if possible, the home visitor whose caseload children are attending as one of the staff members. She knows the children and families better because she visits in the home, and this helps both children and parents to be more comfortable with the group experience.

Figure 6

JO'NT PARENT/CHILD SOCIALIZATION SCHEDULE

9:00	Arrival
9:15 – 10:35	Free Play
9:30 – 10:35	Snack
9:30	Parent Education Meeting
10:35	Notify Children of "Pick Up Time"
10:40	Pickup Time
10:45	Circle Time (extend time as children are ready)
10:55	Get Ready to go Outdoors
11:00	Outdoor Play
11:30	Dismissal

How to Plan?

Good planning is the key to success in group socialization just as it is for home visits or for any other type of peer group experience. The following hints will assist you in planning.

- Set a regular time for planning—and stick to it. Include everyone who will be working on group socialization day (parents,too).
- Coordinate group socialization experiences with home visit lesson planning. (If the home visit theme is winter fun and safety, use the same theme for the group experience.)
- Check individual child needs. Use assessment instruments to determine individual needs to be addressed during group time.
- Check reports and evaluations of the previous group socialization.
- Set a schedule or routine so children know what to expect.
- If parents meet at the same time, follow a similar procedure. Plan at a regular time, probably right after or along with the planning for children. Elicit parent input, and list responsibilities. Use a lesson plan. Write everything down. List materials and who is responsible for getting them. The following are sample lesson plans which home-based programs use in planning socialization experiences.

GROUP SOCIALIZATION

VOLUNTEER HELPERS:

_____

_____

_____

TEACHER: _____

DATE: _____

PLAY GROUP SCHEDULE

9:30 A.M.	(ARRIVAL) MORNING SNACKS
	_____
	_____
9:45 A.M.	FREE CHOICE OF ACTIVITIES
	_____
	_____
	_____
10:45 A.M.	ART ACTIVITIES
	_____
	_____
11:15 A.M.	GROSS MOTOR TIME (OUTDOOR/INDOOR PLAY)
	_____
11:30 A.M.	MUSIC (SONGS, MUSICAL GAMES)
	_____
	_____
	_____
11:45 A.M.	SPECIAL ACTIVITY (LARGE GROUP)
	_____
12:00 A.M.	LATE SNACKS
	_____
	_____
12:30 P.M.	CHILDREN ARE RETURNED HOME

NUMBER OF CHILDREN _____ _____

_____

ADAPTED FROM ARVAC, INCORPORATED—HOME BASE TRAINING
P.O. BOX 2110
RUSSELLVILLE, AR 72801

GROUP SOCIALIZATION PLAN

DATE _____ Begin Time _____ End Time _____ HOME VISITOR _____ _____

ACTIVITY	OBJECTIVE	MATERIALS NEEDED	VOLUNTEER RESPONSIBILITY	EVALUATION
Refreshments Served:				

Parent and Child Education Programs
Mill Shoals, IL

LESSON PLAN - SOCIALIZATION DAY

Program Location _____

Date _____

GOALS

1. Motor
   - A. _____
   - B. _____
2. Cognitive
   - A. _____
   - B. _____
3. Language
   - A. _____
   - B. _____
4. Soc./Self-Help
   - A. _____
   - B. _____
5. Creative
   - A. _____
   - B. _____

TIME	ACTIVITY	IMPLEMENTATION

PACT
P.O. Box 8
Timewell, IL 62375

Cluster Group Lesson Plan and Evaluation

Home Visitor(s) _____ Date of Cluster _____ Time: _____

Area # _____ Place of Cluster _____

Cluster Kit # _____

Lesson Plan

(include the following in your plan: socialization activities, gross motor activities, art and/or music activites, free choice time, nutritious snack, and any other planned activities)

Time	Objective	Activity	Evaluation

Plan approved by _____ Date _____

What about. . .

Transportation?

Transportation is handled in a variety of ways. Some programs use agency owned vans to transport children. Some contract with city or county transportation systems. Some ask parents to bring their own children. Some help parents to form car pools. Others ask home visitors to transport children in agency station wagons or in their own cars.

Regardless of the transportation method you choose, check insurance regulations. Make sure all passengers, drivers, and vehicles are adequately covered.

Snacks and Lunches?

Do you need to serve a snack or lunch? The answer is "Yes." If the time is fairly short (two or three hours), a **nutritious** breakfast or snack is probably sufficient. If children are present for longer than three hours, serve both a snack or breakfast and lunch. Breakfast and lunch nutrition requirements are the same as those for center-based Head Start. Snacks and meals provide not only good nutrition but also additional socialization experience.

Schedules?

The schedule will depend on the length of the experience and also on the type of snack or meals that are provided. The philosophy of your program regarding the structure of group experiences also influences the schedule. How much free time should children have? Is there time for individual activities? What happens in small/large group time? The following schedules (Figure 7) suggest alternatives with different levels of structure

Figure 7

HOME-BASED SOCIALIZATION SCHEDULE SUGGESTIONS

★ ★

Provide a Realistic Daily Schedule Within a Three Hour Schedule

Schedule 1
(Tightened)

8:45–*Free-Choice Activities*
Indoors (choices limited to three or four areas, each guided by an adult)

9:30–*Early Group Time*
(Day's activities are introduced. Teacher's expectations of children's behavior during activities are role-played or illustrated in story form.)

9:45–*Snacks—Total Group*
(As child finishes eating, an adult goes to the activity areas and supervises.)

10:30–*Outdoor Activities*
(Four or five activity choices)

11:20–*Late Group Time*
(Quiet alternatives)

11:40–*Children prepare to go home*

11:45–*Children leave*

Schedule 2
(New Nursery School)

8:45–*Free Choice Activities*
Art Work: painting, crayons, paste, etc.

Informal reading and looking at books

Listening to records block play

Manipulative toys and puzzles

Language Master

Dramatic play

10:20–*Snacks*
One table at a time; other children continue with activities

10:50–*Group Time*
(Quiet Alternatives)

11:00–*Outdoor Activities*
(Seven or eight activity choices.)

11:40–*Children prepare to go home*

11:45–*Children leave*

Schedule 3
(Relaxed)

8:45–*Free-Choice Activities*

Indoor and outdoor (all activity areas)

10:20–*Snacks Available*

(Other activities continue)

11:15–*Group Time*
(Quiet alternatives)

11:40–*Children prepare to go home*

11:45–*Children leave*

★ ★

Nimnicht, Glen McAfee, Oralie, and Meier, John. *The NewNursery School.* General Learning Corporation, New York; 1969, p. 146.

Activities?

What kinds of arrangements and activities should be provided? Remember that the overall purpose of the group experiences is to promote positive interactions among children and increase their socialization skills. If possible, set up interest centers similar to those in a center-based program, and include similar types of activities. Plan activities that will include all areas of child development. Refer to Resources for a list of books which discuss classroom environments, discipline, and other subjects related to successful group experiences.

The following handout (Figure 8) lists high-interest ideas for group socialization.

Figure 8

SOCIALIZATION DAY

IDEAS! IDEAS! IDEAS! IDEAS! IDEAS!

Socialization day for the children enrolled in HEAD START HOME BASE can be a time to enjoy those activities that would be difficult or almost impossible to do in individual homes, such as:

I. HAVING SPECIAL GUESTS
- a. component staff
- b. police officers
- c. fire fighters
- d. arts and crafts folks
- e. musicians, puppeteers
- f. animal guests
- g. storytellers
- h. children's theatre companies

II. GIVING AUDIO-VISUAL PRESENTATIONS:
- a. films (check local library)
- b. slide shows
- c. filmstrips
- d. play records

III. GAMES
- a. parachute play
- b. red rover/red rover
- c. duck, duck, goose
- d. simon says
- e. relay games
- f. telephone games

IV. WORKSHOPS
- a. first aid
- b. trip to doctor
- c. safety in traffic

V. GROUP ACTIVITIES
- a. Rehearse and present a play.
- b. Sing songs with aid of piano, guitar, the clapping of many hands, whatever is available.
- c. Finger-painting (this can of course be done in individual homes but it is an activity few parents are thrilled about repeating with their children due to the messiness of the activity).
- d. "Dress-up" role-playing.

VI. FIELD TRIPS
- a. nature walks
- b. visit the fire station
- c. visit the dentist's office
- d. visit the grocery store
- e. visit a farm
- f. visit a cheese factory
- picnic at a favorite park

(NOTE: You may want to consider using special themes for each month's socialization day: CIRCUS, AMERICAN INDIAN, ANIMALS, FLOWERS, COUNTRIES, etc.)

Outdoor Play?

Should outdoor play be included? Absolutely! If there is a playground, use it. If not, go to a nearby park, go for a walk, or find a place to play ball or a group game. But do go outside. It is a good way to help parents realize the importance of fresh air and outdoor play.

Volunteers?

Use those volunteers—parents first, community people if you need them, students, foster grandparents, nurses, etc.

How do you get parents and others to volunteer?

- Ask them.
- Let them know you need them.
- Tell them what kinds of tasks they can do.
- Tell them their involvement will help the children.
- Tell them when and where.
- Help them find transportation.
- Help them arrange child care for other children.
- Provide training.
- Make sure they understand the rules.
- Welcome them when they arrive.
- Help them find something they **like** to do.
- Help them get started.
- Give positive encouragement throughout the session.
- Thank them for helping.
- List volunteers in the newsletter.
- Mention their volunteering on home visits.

Keep volunteers enthusiastic by developing a volunteer interest inventory which lists various tasks or activities. The following example (Figure 9) will give you a start.

Effective and successful volunteer efforts involve a commitment from the program and from the volunteer. Schoharie County Head Start has developed the following **Memo of Understanding** to specify expectations of volunteers and Head Start staff (Figure 10).

Recording and Evaluation?

Recording and evaluation provide documentation for the program and help the home visitor to provide an ongoing, cohesive, and comprehensive program for children and their families. Keep attendance records, observations of children in the group, and overall summaries of a day's activities. Evaluate what happens against the set objectives. The following **Small Group Checklist** (Figure 11) was developed to assist home visitors and supervisors in evaluating group experiences.

Other Possibilities for Peer Group Socialization?

Field Trips

Some programs count field trips as group socialization experiences. They may be counted as long as at least one other three hour peer group experience is provided each month. Field trips give children a chance to interact with each other in different circumstances and also help them and their parents to learn about the surrounding community. The **Home Visitor Field Trip Form** (Figure 12) can be used for planning, setting objectives, and evaluating the field trip.

Play Groups

Home visitors can suggest that families get together to provide additional opportunities for their children to play with other children. This often happens naturally as parents and children get better acquainted.

In Summary

There is obviously no one right way to provide group socialization experiences for home-based children and their parents. All variations can work well if staff members adequately assess family needs in their program area, if they plan sufficiently, and if they continually evaluate and work to improve the group time.

Schoharie County Head Start

Figure 9

VOLUNTEER INTEREST INVENTORY SHEET

Name: _____

Would you like to:

1. _____Read a story to some of the children?
2. _____Teach or lead a song or some music activity?
3. _____Conduct an art activity?
4. _____Work puzzles with some children?
5. _____Conduct small group instruction activities?
6. _____Show some children how to use carpentry tools?
7. _____ Show children how to use a guitar or other musical instrument?
8. _____Conduct large-motor activities?
9. _____Prepare and help serve snacks?
10. _____Help make playground materials?
11. _____Cook or bake with some children?
12. _____ Display a costume from another country or an ethnic group?
13. _____Plan a field trip for the children?
14. _____Show film or filmstrips?
15. _____Help make materials for the classroom?
16. _____Share your hobby with the class? If so, what is it?
17. _____Bring refreshments for a holiday party?
18. _____Play games with the children?
19. _____Take photographs of the children at special events?
20. _____Repair and maintain equipment?
21. _____Choose library books for the classroom?
22. _____Prepare a class scrapbook?

_____

OTHER IDEAS: _____

Figure 10

Schoharie County Head St t
MEMO OF UNDERSTANDING

As a volunteer working at Schoharie County Head Start I agree to:

Respect the confidentiality of the classroom.

Submit a doctor's certificate that I have been tested for TB and the results are negative (or take a tine test administered by Head Start).*

Attend orientation or training sessions that may be necessary to help me in my job.

Abide by Schoharie County Head Start rules and regulations which are applicable to me.

Honor the following commitment to work at:

Head Start Center _____

Days _____

For a period of _____

Time _____ Weeks _____

If I must be absent from a scheduled commitment, I will notify _____ _____as much in advance as possible.

Signed _____

Address _____

Telephone _____

As a staff member participating in the SCHS volunteer program I agree to:

Accept and support the volunteer's efforts to help.

Share information, ideas, and techniques which will enable the volunteer to do assigned tasks effectively.

Be available on (circle one) M T W Th F at _____o-clock to provide feedback to the volunteer on her/his job performance.

Communicate appreciation for the volunteer efforts.

Signed _____ Date _____

Title _____ Center/Room _____

*Regular kitchen volunteers must have a current physical on file in the main office.

Figure 11

Home Based Head Start
Mineral Point, WI

Small Group Checklist

Home Visitor _____ Children _____

Date _____ Parent(s) _____

Observer _____

Small Group Activities	Check One Yes	No
1. Was there a group activity; e.g., singing, fingerplays, circle games, musical instruments, records, etc., included in the small group activities?	☐	☐
2. Did the group activity involve all the children?	☐	☐
3. Were small manipulatives used which encouraged group play; e.g., blocks, trucks, Legos, Tinkertoys, Fisher-Price toys, etc.?	☐	☐
4. Was there a story time; i.e., were there books, Peabody, puppets, records, filmstrips, flannel board, etc., used?	☐	☐
5. Were the children encouraged to listen and/or retell the story?	☐	☐
6. Was there enough time for the children to talk and ask questions?	☐	☐
7. Was there an art project?	☐	☐
8. Were the children offered opportunities for dramatic play; e.g., dress-up clothes, hats, puppets, dolls, telephones, etc.?	☐	☐
9. Were large motor activities encouraged (indoors or outdoors); e.g., walks, sand/water/snow play, playgrounds, hopping, tossing bean bags, balance beam, etc.?	☐	☐
10. Was there a food-experience activity?	☐	☐
11. Were all the children involved in the food-experience activity?	☐	☐
12. Did the home visitor model positive health practices for the food experience, i.e., did she/he and the children wash their hands, use clean utensils, etc.?	☐	☐
13. Were the small-group activities safe, well-organized, and well-supervised?	☐	☐
Children's Self-Concepts		
14. Were the children's names used on their work?	☐	☐
15. Were the children's efforts recognized, not just results?	☐	☐
16. Did the home visitor listen and respond to the individual children—giving attention to what the child thought was important?	☐	☐
17. Did the home visitor speak and act toward the children in a manner that reflects respect for the children's individuality?	☐	☐
18. Was sex-stereotyping avoided?	☐	☐
19. Did the home visitor model positive ways ("Keep the playdough on the table.") rather than negative ways (Don't get playdough on the rug.") of giving directions?	☐	☐

Children's Opportunities for Success

20. Were choices given to the children only when a true choice was meant?	☐	☐
21. Were the children encouraged to do as much for themselves as possible?	☐	☐
22. Were the children encouraged to solve their own problems, explore, etc.?	☐	☐
23. Were the children given ample warning of a change in activities in order to lessen the frustration of an unfinished activity?	☐	☐
24. Were the children encouraged to take responsibility for materials by putting them away?	☐	☐

Parent Involvement

25. Was the parent present?	☐	☐
26. Did the parent actively participate in the small group activities?	☐	☐
27. Did the home visitor actively encourage a non-participating parent to become involved in the small group activities?	☐	☐
28. Did the parent have a planned activity? If so, what?	☐	☐
29. Did the home visitor speak and act toward the parent in a way that reflects respect for the parent's individuality?	☐	☐

Comments:

To be signed after discussion of the above:

Supervisor _____ Date _____

Home Visitor _____ Date _____

Figure 12

PACT
P.O. Box 8
Timewell, IL 62375

HOME VISITOR FIELD TRIP FORM

AREA #_____

DATE OF TRIP _____

Time	Objective	Activity	Evaluation

Form of transportation _____

Number of children attending _____ Number of parents or aides attending _____

Bus will need to leave central office at _____

Pick up Points:

_____ time _____

_____ time _____

_____ time _____

_____ time _____

_____ time _____

Trip approved by _____ Date _____

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Group socialization ideas from exemplary programs.

Our home-based and classroom staff work closely together—on socialization days the classroom staff work with the children while the home visitor attends the parent meeting.

Socialization groups are held once a week by joining the classroom program for the day.

Socialization groups are held four times a month, each child participating once a week, for a 2-1/2 hour period. Classroom facilities are used on the day they are not in use by the variations in center attendance program. A full time home-based bus driver/cook picks up children and parent volunteers for the group socialization and also prepares a hot meal for the children.

Each home visitor is assigned an agency van for one week each month. During this week the home visitor arranges two group socialization experiences. One is a field trip, the other either a half-day socialization group for the home visitor's total caseload at a classroom-like setting; or two half-day socialization groups for half the home visitor's caseload at a parents home. Home visitors may choose either option depending on location, parent preference, and availability of a facility.

Socialization groups are held once a week for each child. Wednesdays are set aside for home-based socialization group. The four day a week classroom program does not operate on Wednesdays. Cooks and bus drivers work five days a week, serving the home-based socialization groups on Wednesdays. Morning and afternoon socialization groups are held at each classroom site for approximately 3-1/2 hours. Home visitors team up and serve as each others aids during the group session.

Socialization groups are held 2 times a month with only half a caseload attending the session. These are held in parents' homes. Home visitors work closely with the hosting parent to plan activities for these 2 hour group socializations. The last 6 weeks of the program year home visits are discontinued and 2-1/2 hour sessions are held four days a week in classroom settings. Parents provide their own transportation, with the help of a parent aid who is hired to help transport and act as a classroom aid.

At one time during the program year, the home visitor secures a classroom setting and provides 4 consecutive weeks, 5 half-days a week, of classroom activities. Transportation is provided by the home visitor and parents. Hot lunches are contracted from the public school districts. Home visits are discontinued during this 4 week period. In addition, home visitors provide at least 4 additional socialization groups during the year, either at the same site or other locations, to include field trips. Siblings are encouraged to join the four additional socialization groups held during the year.

Two or three parents volunteer each week to help with the socialization group.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Parent Activities

We have discussed thus far two critical elements in any successful home-based Head Start program—home visits and group experiences. A final key ingredient is parent activities. While parents are the focus of every home visit, we have an additional responsibility to encourage their participation in other aspects of the program as well. The booklet *Parents In Head Start* states:

> *"When parents as well as children have opportunities to grow and learn, the benefits to both are more than doubled. As parents develop skills, make friends, and assume responsibility in Head Start, they feel better, not only about themselves, but also about their children. Children then take pride in their parents' accomplishments and feel more confident themselves. The combination of increased confidence, proud role models, and high parental expectations helps the child to profit from the program's services and maintain in the future the advantages of a Head Start."*

This commitment to parent involvement is an important way that Head Start stands out from other programs of its kind. This section will address two types of parent involvement—volunteering and parent meetings. Each is an important ingredient in any good home-based parent involvement plan.

Parent Volunteers

There isn't much within an agency that parent volunteers can't do if given some direction. To explore the possibilities, consider the list below.

Parent Volunteers Can. . .

- Ride the bus
- Plan and conduct parent workshops
- Edit monthly newsletters
- Build a fence
- Set up and conduct an art activity
- Plan holiday parties
- Organize fund-raisers
- Type, collate, answer phones
- Observe classrooms and home visits in a supervisory capacity
- Make toys
- Cook snacks and meals
- Write grant proposals
- Teach a sport
- Serve on parent committees
- Babysit so other parents can spend time helping at the center
- Tell stories to the children
- Help recruit families
- Serve as interpreters
- Order materials
- Plan menus
- Organize a guide of possible field trips, community resources, or guest speakers
- Organize and run a toy lending library
- Tape record story narrations
- Instruct in a craft
- ETC. ETC. ETC. ETC. ETC. ETC.

Parent Volunteers Can't. . .

- Work with confidential materials
- Sign the paychecks

A first step in your volunteer effort will be to use this list and any other ideas you may have to establish an inventory of ways parents could be of assistance in your particular program. This listing can then be converted into a parent inventory (Figure 13) which will be used to determine parents' participation interests. The more diverse the potential involvements, the more likely you'll hit upon something that each parent will be interested in doing. Use your imagination!

Figure 13

OPTIONS FOR PARENT PARTICIPATION CHECKLIST

Please put a ✓ check beside the ways you woul like to be involved in the program.

I would like to:

__orient new parents to the Head Start program

__help work on the newsletter or monthly activity calendar by:
__typing __drawing __collating __addressing
__writing a child/parent activity
__developing a "talk about page"
__writing an article on _____

__help make decisions with the Policy Council

__volunteer for group experiences __days available

__help on field trips __days available

__telephone other parents

__carpool with a parent to parent meetings

__make toys or teaching materials

__plan: __parent pot luck __sports team for parents
__family game day __picnic __pizza fest

__recruit families for the program

__repair toys

__help with menu planning

__serve as a host(ess) for parent meetings

Special skills and crafts I can share:
__art __music __sewing __knitting __cooking
__home repair __plumbing __woodworking __exercise

__car repair __speaking foreign language_____
__other _____

Resources I can share:

__donate materials for resource co.op (egg cartons, magazines, nuts and bolts, fabric)

__ideas for games to play when you take a walk with your child

__help plan and lead a parent meeting

__help work with children during parent meetings

__meet with another parent to share feelings

__help organize fund-raising activities

As the home visitor you are vital in assisting with the completion of the **Options for Parent Participation Checklist.** You can help explain items and give examples from your experience with prior families.

For each potential volunteer activity on your interest survey, a *job description* should be written to help volunteers define exactly what will be expected of them. The description should outline the duties of the job; the necessary time commitment; qualification requirements (transportation, training needs, skills, etc.); location; supervision; and benefits that can be expected by the volunteers' participation.

Once you've recruited volunteers for the various jobs you have available, you'll obviously want to keep them motivated. A prime motivator will be that they fulfill the purpose for which they volunteered in the first place. However, many other variables intervene and may be equally as influential in determining whether the volunteer stays, improves in functioning, learns, or contributes. According to the Minnesota Office on Volunteer Services, the following are some of these variables:

- quality of the welcome,
- quality of training (initial orientation and in-service),
- quality of supervision,
- acceptance by the community of volunteer efforts,
- success (or chances of success) of the volunteer efforts,
- opportunities to participate in planning,
- mobility within program and opportunities for advancement,
- staff willingness to work with volunteers as part of the team,
- leadership's willingness to allow new people opportunities for leadership and learning leadership skills,
- documentation of volunteers participation (job description, skills developed, training, hours, etc.),
- recognition of the financial costs of volunteering and efforts to reimburse out-of-pocket expenses,
- an opportunity to evaluate the quality of the volunteer experience and to be evaluated in relation to their contributions, and
- sincere thanks and recognition for their contribution.

Parent Meetings

Parent Meetings and/or programs should be scheduled at least monthly. They may be planned in conjunction with group socialization although some evening meetings are necessary to involve working parents. Parents should determine the content and type of meetings, and as much as possible they should be responsible for the meetings. Notices of the meetings should be distributed a week beforehand; and transportation, babysitting and refreshments should be provided if you want the best possible attendance.

There are four basic types of parenting meetings: 1) instructional, 2) participatory, 3) informal, and 4) support.

Instructional meetings are designed to give parents new information and skills or to answer parents' questions. These meetings are usually conducted by a staff person or a professional. Attendance may be limited based on interest in the topics discussed. **Participatory meetings** are conducted to have parents learn by doing. These meetings are less formal and may be conducted by parents. Content and personal interest in the product may effect participation. **Informal meetings** are social gatherings. These meetings should be planned and run by parents. Attendance should be good. **Support meetings** are planned to provide parents with emotional support and a means to expand their resources. These meetings could combine parent and staff direction. Attendance should be high at the beginning of the year.

The most effective parent meetings balance activities to include socialization, participation, support, and information with one type dominating. When parents determine the content for meetings, they should also decide on a goal, list activities, and decide on a measure of success for the meeting which is tied to the goal.

PARENT MEETINGS

Topic	Family Pot Luck
Goals	Socialization Share nutritious low cost menus
Activities	Games Prize for best recipe
Measure of Success	12 families attend 8 families bring recipes

Within each parent meeting it is important to have activities varying from listening to doing and sharing. Following is just a sample of possible meeting topics.

Instructional

Your child: infant to age five
Sex education
Behavior management
Nutrition needs of young children
Sibling rivalry
The value of play

Participation

Field trips
Games to make and play
Fund raisers
Do-it-yourself repairs
Writing resumes
Interviewing for jobs
Grooming
Low cost nutritious cooking
English as a second language
Civil Service or GED test preparation
Craft classes
Canning and freezing

Support

Handling stress
Self concept
Dealing with death and divorce
Single parenting
Community resources
Values clarification

Informal

Family pot lucks
Create a new playground from throwaways
Food tasting party
Exercise classes
Bowling team
Quilting bees
Square dance
Game night
Family field day

To determine which subjects will generate the most interest, a parent survey can be devised. The survey should list topics you are prepared to offer and include questions on preferred time, days, and locations for meetings. Once parents have determined their priorities, they can draw on a wide range of resources for ideas, expertise, and materials. They may call upon Head Start staff, fellow parents, or myriad community consultants and resources.

Parents and the Parent Involvement Coordinator will have primary responsibilities for planning and carrying out parent meetings, but you can contribute to their success.

- ☆ Inform each parent on your caseload of all meeting particulars.
- ☆ Motivate parents to attend by showing how the subject relates to their interests or needs.
- ☆ Speak at a parent meeting on a specific topic.
- ☆ Develop information packets and handouts.
- ☆ Suggest materials for follow-up activities.
- ☆ Relate a topic to a particular family's needs or strengths.
- ☆ Model and reinforce parent attendance and participation.
- ☆ Follow up at home visits with an informal discussion pertaining to meeting topic.

Once meetings have been conducted, evaluations will allow planners to continually improve parent involvement efforts. Methods of evaluating the success of parent meetings are:

- checking for increased attendance,
- determining the amount and type of verbal parent contributions,
- recording whether or not a parent initiates talking about the parent meeting,
- asking parents to write down one thing they like/shared/learned, or
- using a formal evaluation sheet (Figure 14).

PARENT MEETING EVALUATION

Figure 14

Type of meeting _____

Person presenting _____

Circle yes or no for each statement.

Goals for the meeting were clear	yes	no
Material was clearly presented	yes	no
Material was useful	yes	no
Time was allowed for questions	yes	no
Time was allowed for discussion	yes	no
Everyone had a chance to participate	yes	no
Social needs were considered	yes	no
I left with something new to do/think over	yes	no
I shared an idea/experience	yes	no

I would change the meeting by: _____

Topics for future meetings: _____

The Parent Meeting Checklist shown in Figure 15 will assist you to plan and implement parent meetings that are well attended, interesting, valuable, and for which parents assume increasing responsibility.

A final word on parent activities is offered by Glenna Markey in *Developing Responsible Parent Involvement*. She has outlined a rather complete list of pointers that may help you improve the parent involvement in your program.

★ Have the right attitude; you must really believe in parent involvement. Good parent involvement requires time and work on the part of **all** staff. You must be **enthusiastic**.

★ The success of parent involvement will depend on how well you use parents. Half-hearted efforts will not do. Parents must have **meaningful involvement**. How long would you volunteer if all you were asked to do was clean up someone else's mess!!

★ Plan! Plan! Plan! Plan! every day, week, month, year.

★ Contact **all** parents. Be creative. Individualize. There is a way to involve all parents—working parents, handicapped parents, and bedridden parents. Brainstorm ideas! Stop thinking of parent involvement in traditional ways; make it an adventure.

★ Let parents know that you expect their involvement. Ask each parent to donate 60 hours per year. Use the language of expectation. Be assertive but tactful.

★ Make staff responsible and accountable for parent involvement.

★ Use more parents than just the core of faithful and willing ones. Make a rule never to call the same parents twice in a row.

★ Individualize—expect a lot from those who can, but don't expect too much from those who can't. Be thoughtful and creative.

★ Increase the parents' awareness of the resources available to them. Help them develop their own strengths.

★ Reinforce your expectation of parent involvement on home visits.

★ Collect parent feedback, listen to their input, and make them feel comfortable.

★ Utilize the parents' skills and talents.

★ Have regular communication with parents.

★ From the first contact with parents, always let them know how important parent involvement is.

★ **Be constantly appreciative**. Some possible activities are:

- Keep track of parent hours per family.
- Have a volunteer of the month.
- Form a volunteer babysitter pool.
- Have room mothers.
- Have volunteer opportunities and parent meeting topics advertised in the newsletter.
- Make a list of possible tasks parents can do; then have parents add to the list.
- Give rewards to the home visitor's families with the highest attendance at meetings.
- Let parents earn "toy coupons" that can be redeemed for toys for home visits.
- Give parents rewards for hours; for example, "Dinner for two at McDonald's."
- Have books parents can get validated for hours worked and activities attended, and honor them at the end of the year with special prizes like a shampoo set or other items donated by the community or made by staff members.
- Have a pot luck luncheon and invite those who volunteered.
- Constantly use sincere praise and gratitude for their efforts.

★ Above all, be creative, be individual, and be PERSISTENT!

Figure 15

PARENT MEETING CHECKLIST

Planning and Arrangements	YES	NO
1. Are babysitting and transportation provided for parents?	☐	☐
2. Do parents decide themselves on date and time of future meetings?	☐	☐
3. Are the frequency of meetings predetermined or limited in any way?	☐	☐
4. Do parents gradually assume responsibility for planning meetings?	☐	☐
5. Do you provide needs assessments or family interest surveys to help parents plan meetings?	☐	☐
Implementation		
6. Do you assist the shyer parent by accompanying them to the meeting or pair them with a more confident parent?	☐	☐
7. Do you provide resources for your parents at the meetings?	☐	☐
8. Do you arrange for "ice-breakers" or brief socialization/introduction times at the first parent meetings?	☐	☐
9. Do you prescreen any speakers, films, etc. to be sure they will fit your needs?	☐	☐
10. Are different types of meetings planned for variety?	☐	☐
11. Is information usually presented in the same way at each meeting? (Such as a lecture.)	☐	☐
12. Do parents gradually assume responsibility for implementing meetings?	☐	☐
Evaluation and Motivation		
13. Are parents kept informed as to topics of future meetings instead of just being told there is a "parent meeting" coming up?	☐	☐
14. Do you give parents positive feedback on their participation at parent meetings?	☐	☐
15. Do you follow-up on topics of parent meetings with parent education activities during the home visit?	☐	☐
16. Do you seek feedback from the parents after the meeting?	☐	☐

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Parent activity ideas from exemplary programs.

The Head Start Director also has the role of Parent Involvement Coordinator. She meets with each home visitor's caseload for their initial meeting. The focus of that meeting is to write a parent involvement plan for the year. Parents determine what activities they are interested in under the following categories:

Parent Education
Training Activities
Fun/Interest

Through a group process, activities are determined and parents are assigned to different committees. Each committee establishes their responsibilities and carries out planning and implementing these activities. Director/Parent Involvement Coordinator acts as support person in carrying out these monthly parent meetings and works closely with each committee. The local technical school offers free babysitting and meals, at cost, for parenting programs through a grant. Transportation is not provided although efforts are made to organize car pools.

An annual Spring Workshop is conducted which provides parents with two days of training. Two general sessions are held in the morning, then parents are free to choose four of the six to eight sessions held over the two days. This effort has been very successful. Areas most attended are: stress management, self-concept development, changing children's behavior, understanding child development, low cost meals, make and take toys for tots, and car maintenance.

Each home visitor's caseload is assigned a Parent Involvement Specialist who plans a weekly parent activity. Parent Involvement Specialists also plan a monthly parent meeting. These are planned at the same time as the socialization groups and parents interested in attending will ride in on the bus with their child.

One parent meeting is held each month in addition to an Exploring Parents series. Home visitors are involved for the first 2-3 meetings on training parents how to conduct parent activities, then parents are on their own. Parents choose their own topics. Babysitting is provided at the meeting site and is paid for out of the parent fund. At the end of the year each county (sometimes combining home visitor's caseloads) goes all out and plans a Recognition Dinner. The program purchases the main dish and refreshments and the rest is pot luck. This has been a big success.

The home visitor along with social service/parent involvement coordinator plan monthly parent activities. Exploring Parenting Series, along with other topics of interest are provided. Babysitter is provided on site and parents provide their own transportation.

First three weeks parents are involved in an intense parent orientation. During this time, the social services/parent involvement coordinator meets with each home visitor's caseload and provides training for parents in conducting parent meetings. Parent meetings are held at the same time as the socialization groups and parents join children for the last half hour.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Record Keeping

Record keeping is essential for the smooth running of all Head Start programs, center and home-based. It provides documentation for funding, program accountability, assessment of program effectiveness, and it assists home visitors and component staff in planning and providing services for families. The record keeping system developed by each program must provide enough information to document program services to each family without requiring so much time to keep current that it takes away from the focus of working with parents and children. Records should help and not hinder our work.

What needs to be recorded? Although various systems have been developed, the following information must be included in any good system.

- ☐ Application/Enrollment forms
- ☐ Health records
- ☐ Developmental screening, assessment, and diagnostic reports
- ☐ Individual Education Plans and Family Assessment Plans
- ☐ Home visit dates, attendance at parent workshops, and child group experiences
- ☐ Lesson Plans or Home Visit Report/Plans
- ☐ Referrals to other agencies and follow-up
- ☐ Volunteer hours for documentation of in-kind
- ☐ Accounting records
- ☐ Evaluation of progress for families and target children

Records become increasingly important for home-based programs because their services are not as visible as the classroom option. Since the majority of activities take place in the home, your records are the only lasting proof of what your program has done.

For a home visitor, two types of files have proven helpful. The first is the office confidential file and the second is the visitors working file. The confidential file contains all pertinent information on the family and child served. This information can be organized according to component areas. Recommended information for each child's/family's **confidential folder** includes the following.

Health

The health record needs to show all pertinent information on health status, medication intake, services provided, and emergency contact information. Specific items include:

- → emergency information/people to be contacted,
- → health and developmental history,
- → dietary intake and food habits,
- → treatment plans, including immunization,
- → signed parent consent forms,
- → schedule of daily medications, including fluoride and vitamins if applicable,
- → records of accidental injuries during program activities,
- → referral and follow-up information,
- → age-appropriate screenings, physical and dental exams,
- → age and sex-appropriate growth charts,
- → record of follow-up and actual services provided,
- → source of payment for services, including free federal, state and locally funded health services and family food assistance,
- → explanation, if free services are not used,
- → medicaid number on private insurance identification,
- → for each pregnant woman, a record that she is under medical care.

Social Services

Social Services records reflect family needs and the family's contact with the Head Start program and referrals to outside agencies. Specific information needed includes:

- → registration/enrollment form,

→ income documentation,
→ verification of absences,
→ signed parent consent form for child to participate in specific activities, i.e., field trips,
→ signed parent consent form to release child information with specific institution/organization identified on form,
→ home visit reports,
→ family/staff conference reports,
→ referral/follow-up information,
→ Family Needs Assessment and plans for meeting those needs,
→ signed parent consent for others to pick up child or for bus driver to drop child off at a different location,
→ record of child care arrangements. Name, address, and telephone number of provider.

Parent Involvement

Records need to be kept on parent's participation in all aspects of the program, including volunteer time. This record might consist of a running log of all activities and X's to indicate who participated.

Education

The education records should reflect ongoing observation and evaluation of the child's growth and development for the purpose of planning activities to meet individual needs. Records need to include:
→ observation and anecdotal records,
→ growth/developmental assessment summaries,
→ plans to meet individual child's needs,
→ home visit reports which are education related,
→ parent-staff conference summaries,
→ Individual Education Plan (IEP) for each child professionally diagnosed as having a handicapping condition,
→ referral/follow-up information.

This information will assure that a program is aware of the individual needs of each child and is documenting the services provided (to satisfy any outside evaluator who may assess the program). The above mentioned information should also point out any weakness that the program may have and give staff valuable information in trying to remedy the problem. Although in the truest sense of the word records are not needed in order to work with children and parents, high quality programs typically distinguish themselves by having accurate, up-to-date records of their activities.

The confidential family/child file typically stays in the office. Home visitors need to have a working file which they can use as they are planning their visits and recording the events of the past week. A **typical working** file will contain the following information:
→ family identifying information including phone number,
→ directions to the house,
→ copy of the individual education and family plans,
→ educational assessments,
→ pertinent health information (i.e. medication, allergies),
→ Family Activity Plans,
→ Home Visit Reports/Plan for previous week, present week, and blank forms,
→ any notes on particular needs of the child or family or ideas on activities for the future.

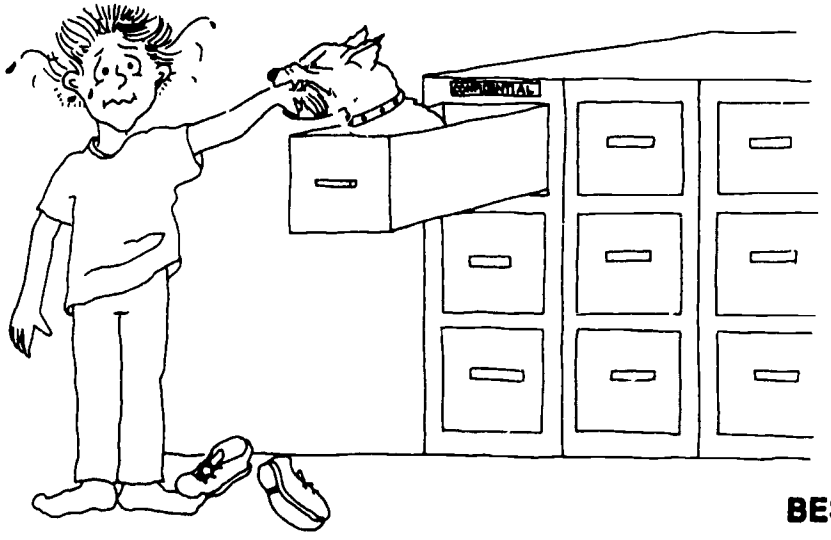
The working file serves both as a repository of useful information and as an ongoing notebook of ideas, suggestions, and informal plans for future activities.

Confidentiality

Home visitors typically have a special, unique relationship with the parents they serve. You work with the family in their home and parents often confide in you about private matters. A family has the right to expect that what you see and hear in their home will be kept in the strictest confidence. Any written material that has family or child identifying information must also be kept strictly confidential. This includes your working file as well as the central file. Here are some basic guidelines for maintaining confidentiality:

- Don't leave confidential records out in the open.
- Write only what is necessary and when you do, be objective and factual.
- Parents have the right to read any and all portions of their files so be thoughtful about what you write.
- Never share written information on a child or family without the parents' written permission.

Written permission must state what information may be given to whom, for what purpose, and when the records are accessed. Some records which contain information just for Head Start should never leave the agency. Examples of this type of information include: records of income and social service records of family problems. A general rule is to give agencies information which aids in the development of an appropriate educational program for a child. If the information is not helpful educationally, it should not be shared.



Confidentiality also involves information which is shared verbally with other home visitors or agencies. A home visitor may not discuss a child unless parents have given their permission. The first impression of these restrictions may be that the home visitor's hands are tied and more paperwork is required. If we turn the tables and place ourselves in the parent's shoes, it's easy to appreciate the precautions the Head Start agency is taking to protect the privacy of the families with whom we work. The following letter is a good example of a parent's feelings about confidentiality. It was provided by Duluth Head Start, Duluth, Minnesota.

This letter summarizes many important aspects of confidentiality. Home visitors do develop close relationships with the families they visit. You must be very careful not to discuss information about these families with anyone outside the Head Start staff. And remember anytime you do discuss a family with a fellow home visitor or coordinator, the purpose of the discussion should be to assist the family or the child. Never discuss personal information about the family which does not pertain to the program for the child and family.

Dear Teachers and Staff:

I'm glad my child's records are now confidential—not to be read by anyone but school staff and not to be sent to another agency or school without my permission. The records contain information that I don't want just anyone to know. I can now read my child's file if I wish and, if it contains anything I want removed or corrected, I have the right to request this.

These rights are very important to me and my child because they protect our reputations—what others think and say about us. Unfortunately, our reputations have no protections against loose talk—only your caring about us and your being careful.

So PLEASE REMEMBER:

1. When you talk about me or my child to someone, she could be my best friend, my worst enemy, or my sister-in-law's sister-in-law! She may report it all back to me (making me dislike you) or tell it to my mother-in-law (when I find out, I'll kill you!).

2. When you talk out loud in the Pizza Hut about that horrid little Scotty who's driving you crazy—someone may hear you who knows just who Scotty is.

3. When you speculate about the reasons for any trouble my child is having ("Sometimes I think Scott is hard of hearing") others may repeat them as fact ("Did you know—I heard it from Scott's teacher—that Scott has a hearing problem?").

4. I am especially sensitive to opinions about my child's behavior and how his misbehavior might be my fault. I very often feel (and sometimes say) that I'm a poor mother but no one else had better even suggest it!

5. You have no idea what information about me that I want kept confidential. It could be: my boyfriend's name, how often I move, whether I am on welfare, or my dad was an alcoholic, even my address and phone number. In other words, you shouldn't be talking about me at all!

Finally, I would like to ask you to be aware of what my child hears. If someone remarks about him or me when he is listening, be sure your answer doesn't give him the idea that there is something wrong. (Such as—"You shouldn't ask if Scotty is Indian. His mother doesn't want anyone to know about that.") He will remember your answer long after you've forgotten.

Thank you very much,

Scotty's Mom

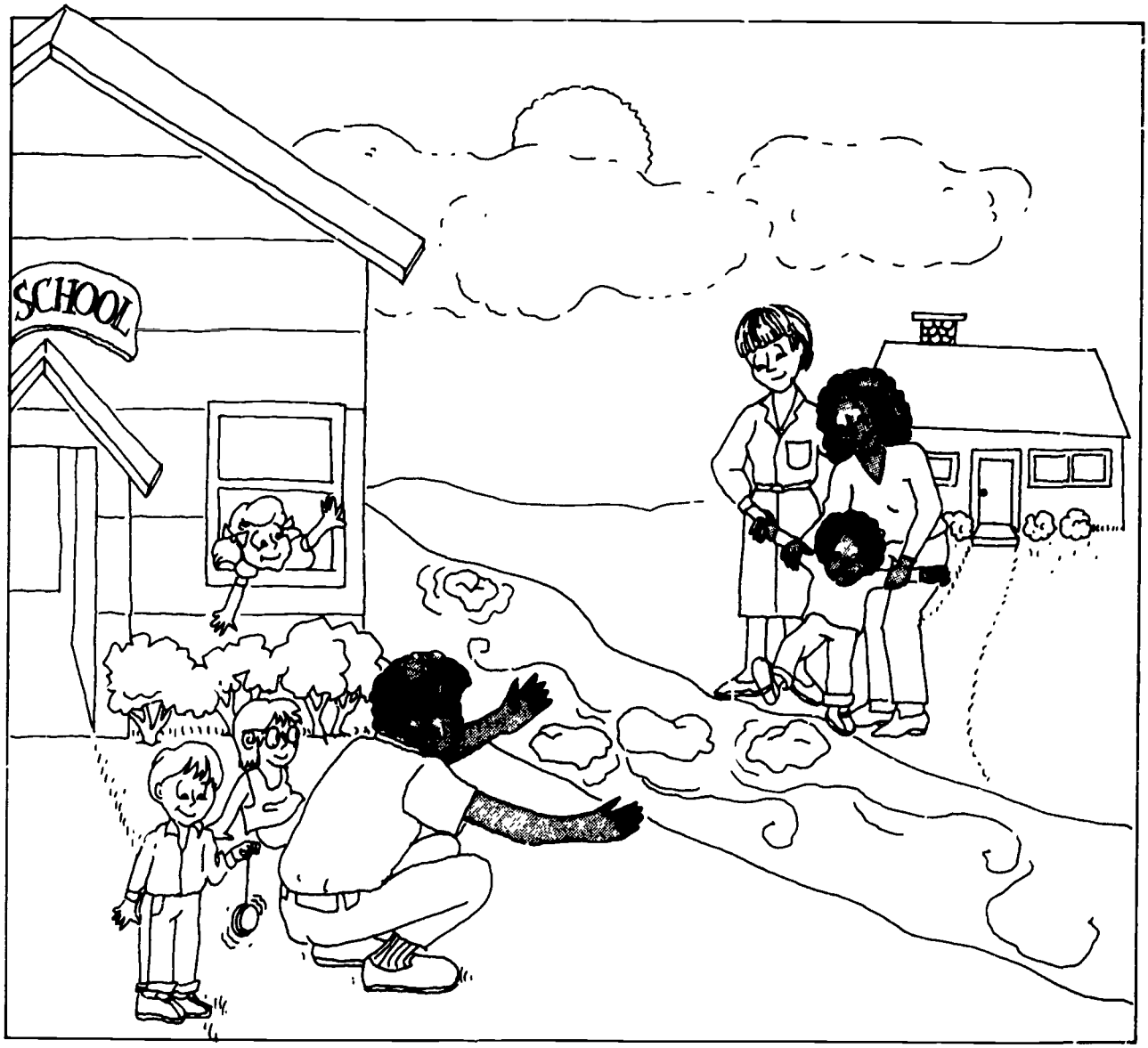
Transitioning Into the Classroom Environment

An appropriate close to this discussion on implementing the home-based program is transitioning children and families. Transition to a classroom can be a challenge, just as changing jobs can be a challenge. New friends have to be made; new skills have to be learned; new rules and routines must be followed. Some children respond to the classroom with enthusiasm and excitement. Other children may be shy, cry, have upset stomachs or throw tantrums. Home visitors and parents can plan a smooth transition for home-based children. Three major steps will help to create smooth transitions for the children on your caseload.

Step 1: Specify the differences between your program and the school program, and prepare children by teaching skills and practicing routines required in schools and center-based programs.

Step 2: List and employ methods and procedures for involving parents in the transition process.

Step 3: Design a communication system for exchange of information that meets the needs of Head Start, parents, and the receiving classroom or program.



Step 1:

Specify differences between your program and the classroom program.

In order to identify what differences there are, you should visit classrooms. If you and other home visitors have children going to several different classrooms, split up the classrooms each of you will visit and spread visits out over the year. If you cannot arrange to visit a classroom, telephone the teacher to get some critical information.

Questions related to the following topics will help specify the differences between your program and the classroom program.

1. **Persons in the classroom**
2. **Physical arrangement**
3. **Daily schedule and routines**
4. **Rules**
5. **Teacher style and attention**
6. **Academic and self-help skills**

1. Persons in the Classroom

How many adults work in the classroom?
How many children will be in the classroom?
Will other children in your program also be attending the new school?

Transitioning Suggestions

- ♦ Assist parents to form play groups. Start by conducting a joint home visit for two or more parents and children. While the children play together, have parents plan future play groups. Your future role in play groups should be as a consultant to parents.
- ♦ With parent permission, introduce them to others whose children will be going to the same school. Give parents ideas on forming friendships between children.
- ♦ Arrange a field trip to the classroom with the children and plan a joint activity with the center-based students, such as:
  - Set up a seasonal party or picnic.
  - Have a teddy bear picnic (each child brings his/her favorite teddy bear).
  - Create a friendship stew or salad (each child brings something to add).
- ♦ Conduct a joint home visit with the new teacher.
- ♦ Assist parents to have their child work with an unfamiliar adult or older child, for example:
  - a new babysitter
  - a new Sunday School teacher
  - a new park supervisor

2. Physical Arrangement

Do children sit at tables, on a group rug, or on mats?
Are areas (play, work) in the classroom separated?
Are toys visible and reachable from work areas?
Is the bathroom in the classroom, next to the classroom, or down the hallway?
Do children have a locker, cubbie, or hook for their personal belongings?

Transitioning Suggestions

- ♦ Vary your work and play areas during the home visit. Use tape with names or symbols on it for the parent, child and yourself to sit on the floor to work. Let the child find her/his name or symbol.
- ♦ When you make home visits, let the child see materials to be worked with later in the visit. If you bring a bag of materials, let the child set up the first activity while you and the parent discuss the teaching methods.
- ♦ Conduct home visits in a variety of settings, such as the park, restaurant, or public library. Help the parent to teach the children several ways to find the bathroom/drinking fountain (ask, visibly scan, ask a friend to go with him/her).
- ♦ Encourage the parent to set up a personal storage area in the home for the child and leave special materials for

which the child is responsible for the week. Suggest different types of personal areas, such as a closet, toy chest, box, or an empty ice cream barrel.

3. Daily Schedule and Routines

How long is the school session?
How much time do children spend:

- *in large groups,*
- *in small groups,*
- *working independently or alone,*
- *at free play or choice time,*
- *in recess,*
- *doing academics,*
- *at snack,*
- *listening, or*
- *acting on materials.*

Is the schedule repeated, or does it often change?

Transitioning Suggestions

- Plan an activity in which the parent makes a set of cards, magazine pictures or drawings of daily activities (sorting laundry, preparing a meal, weeding the garden, watching TV). Have the parent and child plan a morning's activities and arrange the pictures in the order they will do them.
- Have the parent take the child to the park and set up two or three rules to be followed (feet first down the slide, one minute reminder before we leave). Be sure the parent discusses the reason for the rules and has the child repeat them.
- Motivate parents to bring their child to clusters. Tie the clusters to preparing the child for large and small groups in school.
- Provide parents with a suggestion list of independent activities for their child. Have them start with a reasonable expectation of independent time for their child and work up to 15 minutes. A child could sort silverware, do a home-made puzzle, color a picture, sort screws and bolts, etc.
- While conducting home visits, regularly give the child a chance to choose an activity or toy to independently play with while you talk to the parent.
- Occasionally leave worksheets and ideas for working on academics in the home.
- Conduct snack time during a home visit, modeling nutritious food choices, manners for taking and passing, and clean up procedures.
- Build the child's listening time by bringing in longer stories and having the parent take the child to story hour at the library.
- During a home visit use a paper and marker to write down items or draw symbols representing each activity that will take place. Refer to the chart during the visit to help the child predict what will happen next.

4. Rules

Do children speak out volunteering answ or do they raise their hand? Do they raise their hands:

- *to get help,*
- *to indicate they are finished,*
- *to get permission to speak,*
- *to share at circle or show-and-tell?*

When are children free to move about the room and talk to other children?
What materials are children responsible for locating and putting away?
How do children get from one place in the building to another? (Single file, in a group, or with partners.)
Do children use bathroom, drinking fountain, pencil sharpener independently at specific times or with permission?
Are areas of the classroom limited to specified children?

Transitioning Suggestions

- ♦ At cluster time or during specific parts of the home visit, set up a hand raising rule and use a special flag for children to raise when they finish working.
- ♦ At cluster have a show and tell time when children are expected to volunteer answers and contribute openly.
- ♦ Let the child locate and return items for specific activities during your home visits.
- ♦ During cluster time or with play groups, have the children line up singly or with partners to go to another area of the building or on a field trip.
- ♦ Have the parents set up rules for their child to:
  - ask permission (to play outside, to watch TV, to use special materials);
  - do things independently (go to the bathroom, get water from the sink); or
  - do things at specific times (watch TV, nap, listen to a bedtime story).

5. Teacher Style and Attention

How often does the new teacher attend to children individually?
How does the teacher discipline children:
- *for misbehavior,*
- *for inappropriate behavior?*

How does the teacher reward or praise children for good behavior?

Transitioning Suggestions

- ♦ Plan activities in which the parent teaches the child to keep playing/working without their attention for up to 15-20 minutes. Before the child starts playing, they should brainstorm all the ways she/he could play with toys to help prevent losing interest.
- ♦ With the parent make a list for the new teacher of what works when the child misbehaves and what works when the child does the wrong thing. If the parent has strong feelings about a particular kind of discipline, encourage the parent to let the new teacher know them and discuss them with her/him.
- ♦ Have the parent make a list of what his/her child likes:
  - types of toys and materials;
  - activities (tickling, giving five, looking at catalogs, dressing up);
  - phrases, songs.

Try to specify what works best at what time (example: rubbing back before nap, special time talking together after finishing drawing, etc.).

- ♦ In cluster, try varying your attention to match the amount and type the child will receive in the new program.
- ♦ Assist both the parent and child to use a warning system to circumvent having to use reprimands, etc. Try foreshadowing, and repeating and reinforcing rules (2-3).

6. Academics and Self-Help Skills

Does the new school have an entry assessment instrument or a set of expected skills?
What subjects are taught and which self-help skills are assisted in the classroom?
What types of materials are used for which subjects? (Manipulatives, worksheets, books, games.)
How are subjects taught? (Large groups, small groups, activity centers.)
How are children expected to respond? (In unison, individually, verbally, or in writing.)
How do children complete written responses:

- *circle the right/wrong answer,*
- *color in the right/wrong answer, or*
- *mark an X for the right/wrong answer?*

Which self-help skills does the teacher expect children to have when they come to school?

- *taking care of their noses and washing their hands,*
- *going to the bathroom independently,*
- *opening milk cartons and using a straw,*
- *tying shoes, and/or*
- *putting on their own clothing?*

Transitioning Suggestions

- Plan activities in which the child practices self-help skills with the parent (play dress up with parent's clothes—his/her brother's clothes, play veterinarian and have the child wash her/his hands before seeing each animal, go to a restaurant for milk or buy small milk cartons from the store).
- Ask for a copy of the screener the school uses.
- Bring materials like the ones used in the new school on your home visit. Suggest materials to the new teacher that have been successful for parents and you.
- During cluster experiences give children opportunities to work at learning centers and in small and large groups. Vary the types of responses you expect of children to include:
  - unison for finger plays, language concepts and new rules;
  - individual for content about a story or at show-and-tell;
  - written for drawing, math and prereading.
- Preteach the necessary self-help skills.
- Give the parent a summer calendar with sample suggestions for practicing skills and interacting each day (see Figure 16).

SUMMER CALENDAR
JUNE

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
				1 Plant three bean seeds in a small pot	2 Make a boat from a margarine tub, a paper sail and a plastic straw.	3
4	5 Find 5 square objects in your house. Find 8 orange things outside.	6 Make a fort out of empty boxes	7 Made a mask from a paper bag	8 Count the doorknobs in your house.	9 Go to the summer library story hour at 10:00 a.m., get a library card and check out some books.	10
11	12 Make a collage of things you found outside.	13 Name the furniture in your bedroom.	14 Make some playdough: 3 c. flour 1 c. salt 2 T. oil	15 Ask a friend to watch Sesame Street with you	16 Have mom make a treasure map and hide a treasure for you to find.	17
18	19 Make shapes with a 6 foot piece of yarn. Walk the line.	20 Take a walk. Make a map of your neighborhood together.	21 Fill the sink with water, bubbles, funnels, containers and have fun.	22 Make a big clown head on a sheet. Cut out the mouth. Throw a ball in the mouth.	23 Whipped painting. Put soap flakes and small amount water. Beat. Fingerpaint on paper with it.	24
25	26 Wear something blue today. Find all the blue things you can in 15 min.	27 Have scavenger hunt. Make list by drawing or cutting out pictures. Look for items on list.	28 Make a scrapbook of animals from magazine pictures.	29 Tell mom a story about your family. Have her write it down. Draw picture to illustrate it.	30 Decorate your tricycle for the 4th of July. Use crepe paper and streamers.	

Figure 16

Step 2:

Involve Parents in the Transition Process

In addition to introducing parents to the transitioning activities suggested in the previous section, the home visitor may assist in setting up a parent meeting with the teacher(s) from the next environment. The classroom teacher and the home visitor can answer questions about which skills are important and why they are important, and they can make specific suggestions to parents, etc.

Another parent meeting may be devoted to reviewing "survival skills" and methods to teach them at home. Explain that survival skills allow a child to adapt and compete in her/his new environment. Distribute the Survival Skills Checklist (Figure 17) for parents to review.

Have groups of three to six parents choose one of the survival skills and brainstorm all the possible ways of teaching it. Groups can then share two of their best teaching suggestions for others to use. You may wish to share the booklet *Get a Jump on Kindergarten* (see Resources section) with those parents whose children will enter kindergarten. It lists survival skills and has suggestions for teaching them.

Set up a time for the parents to visit the new school with their child. Have the parent plan to take their child to the school playground during the summer.

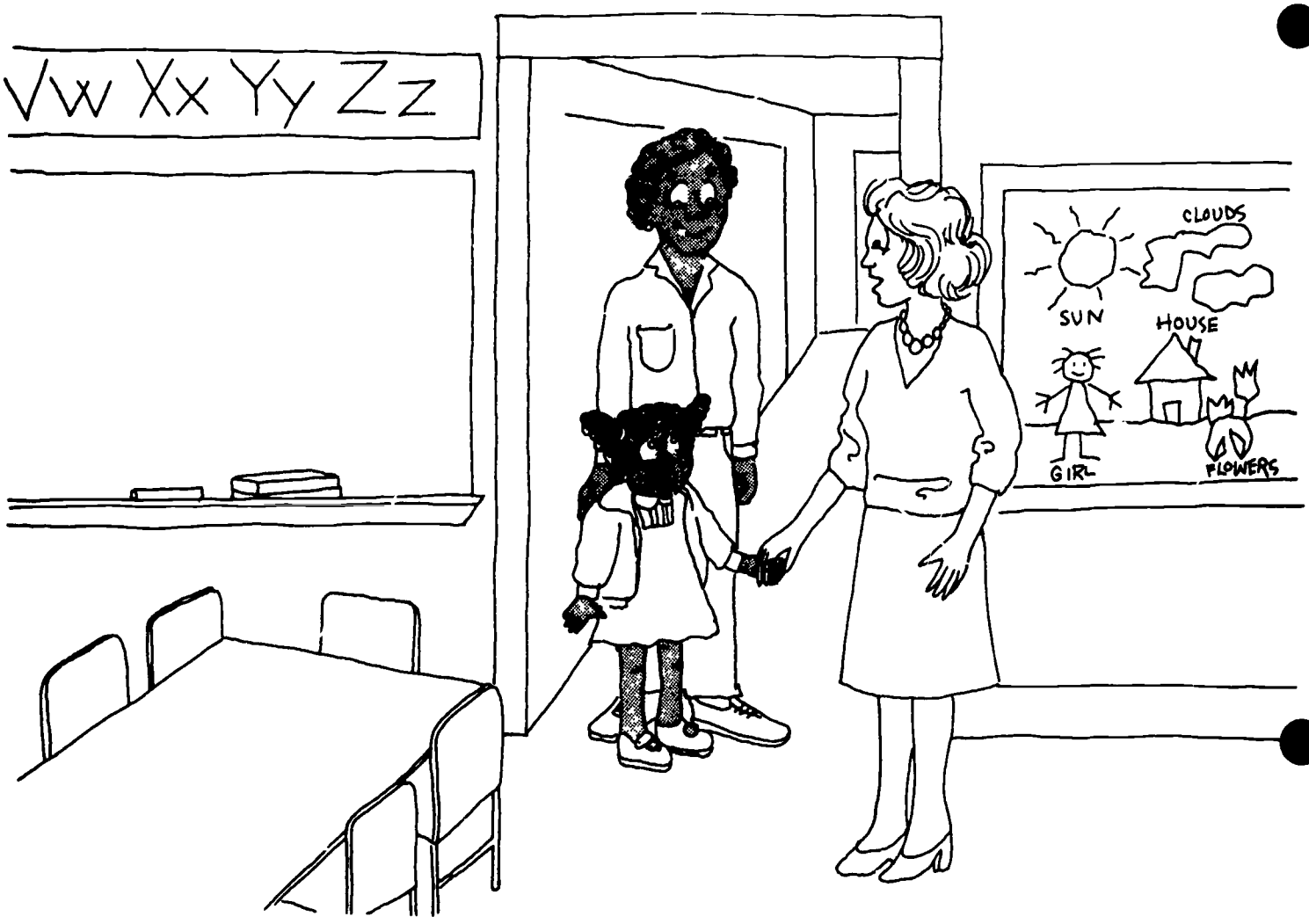
Make a list of what will be different for the parent—types and frequency of contacts, and types of parent participation options. Check with the classroom teacher to see if parents can volunteer in the program. Discuss with the parents ways they can remain involved in their child's education.

In giving parents a place in the transition process, individualize so parents have a purpose without feeling overwhelmed. Perhaps a rap session for parents who want to discuss their concerns and feelings about their child's entrance into school would help parents deal with frustrations. As with the children, each parent will differ in the type and amount of support needed for a smooth transition.

Survival Skills Checklist

Figure 17

1. RESPONDS POSITIVELY TO SOCIAL RECOGNITION AND REINFORCEMENT
2. EXPRESSES EMOTIONS AND FEELING APPROPRIATELY
3. ATTENDS TO A SPEAKER IN A LARGE GROUP
4. RELATES EXPERIENCES AND IDEAS TO OTHERS
5. INITIATES APPROPRIATE INTERACTIONS WITH ADULTS AND PEERS
6. FOLLOWS THREE-PART DIRECTIONS RELATED TO TASK
7. MAKES CHOICES
8. ATTENDS TO TASK FOR MINIMUM OF 15 MINUTES
9. COMPLETES ABILITY LEVEL TASKS INDEPENDENTLY
10. OCCUPIES OWN TIME FOR AT LEAST 15 MINUTES
11. DEMONSTRATES APPROPRIATE ATTENTION-GETTING STRATEGIES
12. MOVES THROUGH ROUTINE TRANSITIONS SMOOTHLY
13. WAITS TO TAKE TURNS AND SHARES
14. HAS BASIC INDEPENDENT SELF-HELP SKILLS:
    - Will put on/off outer clothing within a reasonable amount of time
    - Cares for own bathroom needs
    - Feeds self



Step 3:

Design a Communication System for Parents, the Home Visitor, and the Receiving Teacher

In order to make an easy transition, some children will require a great deal of time, effort, and communication among parents and educators. Others will require none. Examine each situation and establish an appropriate plan of action. The following are suggestions for methods of communication—all of which, in various combinations, will be appropriate for the children and families on your caseload.

- ☆ Contact the receiving teacher and set up guidelines for communications. Guidelines may include how often and over what period of time contacts should occur. They will also cover what type of communications are to be made (phone calls, progress reports, written information, conferences), and whom these communications will involve.
- ☆ Provide the parent with information about the school the child will be attending:
  - the name of the school,
  - its address and phone number,
  - the name of the principal, and
  - the name of the teacher.

- ☆ With the parents fill out the child's Progress Report (Figure 18). Explain why they must sign a release of information before the progress report is forwarded.
- ☆ Plan a joint home visit with the receiving teacher and present home visitor.
- ☆ Set up a formal transition planning meeting with the parent, receiving program personnel, and support personnel as appropriate. Figure 19 provides an outline of what can be discussed at such a meeting as well as a form for documentation that will be useful to next year's staff.
- ☆ Give the receiving teacher and parent your phone number so they may contact you in the fall with questions or concerns. Schedule one time at the beginning of the next school year to contact them to find out how things are going.
- ☆ Coordinate arrangements necessary for the child and parent to visit the center or school and to meet the staff and observe the children in action.

As you can see, transitioning strategies encompass a wide range of possibilities from simple to elaborate, involve many people or few, and take a great deal of time or very little. Each family and child will require special thought and planning on your part to determine what is most appropriate for them. It's worth the effort though when you see your children and families easily bridge the gap from home to school.

This chapter on implementing the home-based program has provided many ideas and techniques which you can use in all aspects of the program. Much of what we have discussed relates to what is supposed to happen, and probably will. But . . . occasionally some additional resources, hints, and support will provide that extra boost to get you over the hump . . . So don't stop now . . . *Finishing Touches* are just ahead.

HEAD START PROGRESS REPORT

Figure 18

Child's Name _____ Parent's Name _____

Birthdate _____ Address _____

Receiving School _____ Phone Number _____

Reporter _____ Reporter's Position _____

I. **PROGRESS REPORT:** Child can, upon request, easily perform the following activities:

A. Cognitive Skills:

B. Motor Skills:

C. Language Skills:

D. Socialization Skills:

E. Self-Help Skills:

II. **EMERGING SKILLS:** The next activities the child should be able to learn are:

A. Cognitive Skills:

B. Motor Skills:

C. Language Skills

D. Socialization Skills:

E. Self-Help Skills:

III. **PROGRAM FINDINGS:** How does the child learn best?

A. Areas of Strength

B. Areas of Need

C. Meaningful Reinforcement

IV. **PROGRAM RECOMMENDATIONS:**

V. **SUGGESTED PARENT INVOLVEMENT:**

164

Transition Planning Meeting Summary*
Region IX RAP

Child _____ Birthdate _____ Age _____

Referral Source _____ Title _____

Meeting Date _____

1. Description of child at home.

2. Major concerns of family at this time (for child, others in family).

3. Description of the child at school.

4. Major concerns of staff regarding child, family:

5. Other than Head Start, what services is the child receiving? (medical, therapeutic, etc.)

6. Description of major developmental changes made by the child during year:

* Designed to organize the relevant information and concerns generated during the planning meeting and to assist the participants in the considerations of future program planning and educational goals for the child.

7. What educational goals are suggested for the next school program?

8. What other agencies have diagnostic information regarding the child?

9. Is it recommended that the child enter the next school program in the summer or in the fall?

10. What type of program placements are recommended for next year? (i.e., Head Start, Head Start and Public School combination, Public School Special Education class, Public School Mainstreamed Program, Regular Public School Program, etc.)

11. What related services are recommended for next year? (i.e., transportation, speech therapy, physical therapy, etc.)

12. Signatures of persons attending Transition Planning Meeting

Name	Position
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Figure 19

Follow-up Activities

1. Thoroughly review the five elements of a home visit and be able to discuss the purpose of each element. Do your home visits contain all the parts? If not, how could you incorporate the missing elements?

2. Greeting a new family can be scary for both you, the home visitor, and the parents. With a colleague, role play your first meeting with a shy parent, a hostile parent, a talkative parent, and a distracted parent.

3. Review the handout, Summary of Home Visit Elements. In the Hints column, place a plus (+) sign next to each hint that you are already doing; place a minus (-) sign next to those hints you never or only sometimes do. Choose several items marked with a minus sign and plan how you can incorporate these behaviors into your home visits. Once they become a natural part of what you do, choose several more items and repeat the process. Add your own hints to each section. Share with a friend!

4. Outline your current record keeping practices. Are they meeting the goals outlined in this chapter? If not, review the sample forms and procedures developed by experienced home-based programs and, consider how you might update and/or streamline your agency's practices. Discuss these possibilities with your colleagues and supervisor.

5. The focus of group socialization experiences is to promote socialization and positive peer interactions. The philosophy of your program about these experiences will influence your decisions about structure, scheduling, choice of activities, and so on. Individually or with your colleagues, develop a working philosophy about group experiences, outlining the basic tenets that you believe make group experiences a valuable and essential component of home-based programs.

6. Develop a workable group experience schedule that incorporates all of the tenets of your philosophy and the suggestions in this chapter. Exchange constructive criticism with your colleagues.

7. Brainstorm all the "people" resources in your community that could help make your group experiences the talk of the town. Be sure to put parents at the top of the list. Make a plan on how to convince these valuable resources to be a part of your group experiences. Be creative!

8. Evaluate one of your group experiences using the Small Group Checklist. Use one of the books listed in Resources to help turn the "NOs" into "YES."

9. Read the booklet "Parents in Head Start." Use its information to renew your enthusiasm for belief in and commitment to parent involvement.

10. Establish an inventory of ways parents could be of assistance in your program. Use your imagination and make the inventory as diverse as possible. Design a form and ask parents to complete it. Keep the format and response needed simple, and use drawings, your agency's logo, or colored paper, etc. to make it attractive.

11. Based on a parent meeting planned by your agency, devise lesson plans for your home visits that will: encourage attendance, include materials for follow-up activities, informal discussion, and reinforcement for attendance.

12. Choose one family with whom you work, preferably one with a child with a handicapping condition. Use the suggested lists of information that needed to be recorded. Check both the confidential and working files against these lists. Are all documents in the appropriate file? Are any documents missing? Use this opportunity to put the file in tip-top shape.

13. High quality programs typically distinguish themselves by having accurate, up-to-date records of their activities. But sometimes it is easy to let the paperwork get behind in lieu of your "real" job, working with parents and children. Think back over a one week period and try to recall all the missed opportunities you had to keep your record keeping current. For example, instead of jotting down notes on future activities for a child and family when you got in the car, you simply went on to the next visit. Based on these recalled opportunities, develop a list of at least three resolutions beginning "I will. . ." and make a commitment to carry out these resolutions for a month. Reward yourself for terrific will power and fantastic records!

14. Obtain permission to observe an entire classroom session. Complete the Transitioning Questionnaire.

15. Using the information from a completed Transitioning Questionnaire, select two areas for consideration. For example, Persons in the Classroom or Daily Schedule and Routines. Develop activities for both child and parent for these areas and incorporate them into your weekly lesson plans.

16. Write a Progress Report (summary report) for a child and family on your caseload. Ask a kindergarten teacher how helpful such a report would be.

17. Design a parent meeting that would address survival skills. Indicate how you will individualize for the special needs of each family.

18. Make a chart outlining a communication system for parents, the home visitor, and the receiving teacher. Indicate task, time line, materials needed, person responsible, etc. Consider a three step organization: making the connection, getting acquainted, and implementing the transition.

4

Finishing Touches for the Home-Based Program

Objectives

After reading this chapter, the home visitor will be able to:

- describe at least four strategies to assist in a smooth start for the program year.
- be aware of special problems that may arise during a home visit and methods to solve these.
- give examples of ways to build an organized, structured support system demanded by the unique needs and nature of his/her position.

By following the suggestions for planning and implementing the home visit, you will start out on the right track. Most of your home visits will effectively teach parents to teach their children. However, there will be situations which cannot be handled by planning and implementing the visit as suggested. Working with adults in environments that you do not control can make home visiting an exciting and challenging experience!! Surely you will encounter situations needing special attention. The following guidelines and sample situations should provide basic strategies to help solve the predictable and not so predictable problems you are likely to encounter as a home visitor.

This chapter will be divided into three sections. *Starting the Program Year* presents ideas for introducing parents to the home-based program and suggests a format for the initial home visit. Section II, *Issues in Home Visiting*, presents many questions that home visitors frequently ask. All the suggested methods of handling special problems have been successful in at least one situation. The list is by no means complete but can be used as a guideline. **Think positively**—where there is a problem there is also an answer. The final section of this chapter is *First Aid for Home Visitors.* Home visitors need support in dealing with problems unique to home visiting. Included are hints which have helped home visitors meet their responsibilities in an efficient and effective manner. Also discussed is the staffing procedure for problem solving, a recording method to ensure accountability, and information on training and supervision. The following table lists all the topics covered in each section.

Section I: Starting the Program Year

How do I get off on the right foot?
- Parent/Home Visitor Agreement
- Parent orientation

How do I determine a schedule for the week?
What do I do on the first home visit?

Section II: Issues in Home Visiting

How do I build rapport with parents and motivate them?
What do I do with handicapped children on my caseload?
What do I do if I suspect child abuse or neglect?
What do I do about working parents?
What do I do with a parent who will not participate during the home visit?
What do I do if the TV or stereo is on?
What do I do if there is no place to work?
What do I do about siblings?
What do I do about friends and relatives who drop in during the visit?
What do I do if there is no one home?
What do I do if the parent leaves the room?
What do I do about lost materials?
What do I do about non-reading parents?
What do I do about non-English speaking parents?
How do I help the parent with the child's misbehavior?
What do I do if I am afraid for my own safety?
What should I wear on home visits?
What kind of insurance should I carry?
How do I stay organized?

Section III: First Aid for Home Visitors

Informal staffing
Supervision
Training
Job descriptions

Starting the Program Year

How do I get off on the right foot?

You can avoid many problems during the year by planning **before** your initial visits. Remember parents don't always know what to expect from a home visit. At first the parent may be unclear about what he or she as the parent and you as the home visitor are expected to do. You should emphasize the importance of the parent's role as a partner. Keep in mind that parents and home visitors are dependent upon each other in a successful home-based program and that each has responsibilities that must be fulfilled.

Parent/Home Visitor Agreement

One way of outlining responsibilities for home visits and group experiences is to develop a parent/home visitor agreement (see Figure 1). The agreement can be discussed either at the parent orientation or on the first home visit. You should stress that you will be there to help in planning and teaching activities. Any unsuccessful activities will be re-evaluated by both of you, and together you will plan alternative strategies. Understanding this will put many parents at ease and reduce their hesitation to carry out activities. The parent will have more confidence in actively participating in the program if he or she truly understands this partnership. A copy of the agreement is left with the parent and one is kept by the home visitor. With this initial step you will lay the groundwork for mutual expectations and will set the tone for the remainder of the year.

Parent Orientation

Plan a program orientation at the beginning of the year. Some things to remember in planning this orientation include:

Length: It should be no longer than three hours, including refreshment time.

Place: It should be held in a building that includes a comfortable room, big enough for the maximum number of people you expect.

Babysitting: Try to arrange on-site babysitting (make sure the building has a separate room equipped with toys). Ask for help from fellow staff members, volunteer parents, a high school home economics class, bus drivers, or consider providing an allowance for babysitting costs.

Transportation: Provide transportation, arrange car pools, or pay mileage.

Refreshments: Provide refreshments or have a potluck.

Parent Hosts: Consider enlisting former or returning home-based parents to help with the orientation. They can phone parents to invite them to the gathering, make and send invitations, greet everyone, hand out nametags, introduce new parents to each other, assist with refreshments, or assume other tasks that will help your orientation run smoothly.

Explanation of the Home Visit: Use part of the orientation to explain what you and the parents and the children will do on a home visit. You might role play a home visit with other staff members or with returning parents, or show a video tape of an actual home visit. After the role play or video tape, brainstorm with the parents. Let them list things they would like to learn to do with their children; have them share things that they are already doing with their children; or have them decide how they might prepare the home and their children for a visit.

Parent Advocate: Have a parent who has previously been in the home-based program speak to the group about what he or she gained from participation. Be sure to prepare the parent well— you may wish to follow a question and answer format so you can prompt the parent if the going gets tough

Figure 1

PARENT/HOME VISITOR AGREEMENT

Parent _____

Date _____

Home Visitor _____

Date to be reviewed _____

Parent

HOME VISITS

__ I will be home for each visit or let the home visitor know I will not.

__ I will have my child dressed and ready.

__ I will participate in what the home visitor does with my child and not do other work.

__ I will help during the home visit.

__ I will help plan activities for my child.

__ I will try teaching an activity when the home visitor is there to help me.

__ I will work on activities during the week with my child.

__ I will help my child keep track of all Head Start materials left with me and return them to the home visitor.

__ I will talk with the home visitor about how my child is progressing.

__ Other _____

_____

_____

_____

Home Visitor

HOME VISITS

__ I will be on time for the home visit or let the parent know when I won't.

__ I will bring materials and ideas.

__ I will show the parent how to use the materials.

__ I will present __learning activities during the visit that are planned for the parent and child.

__ I will leave or present materials on health, nutrition, community services, and notices of meetings.

__ I will show the parent how to use what there is in the home to teach the child.

__ I will leave materials and directions for the parent to use the rest of the week.

__ I will use the parent's ideas in planning for the child.

__ I will talk with the parent about the child's progress.

__ I will refer the parents to other resources when necessary to help meet their needs.

__ Other _____

_____

_____

_____

Parent

GROUP SOCIALIZATION

___ My child will come to group socialization at least ___times.

___ I will volunteer to help at group socializations ___ days a year.

___ I will give ideas for group socializations.

___ I will get materials ready with the home visitor's help for the group socializations.

___ I will help present activities at the group socializations.

___ I will be in charge of the children at the group socialization with the home visitor's help.

___ I will go on ___field trips.

___ Other _____

_____

_____

_____

Home Visitor

GROUP SOCIALIZATION

___ I will plan the activities for group socializations.

___ I will set up the area, bringing needed materials.

___ I will present group activities such as singing, games, crafts, storytime, acting out stories, field trips, etc.

___ I will help in teaching the child to learn to get along with others, share, and take turns.

___ I will help the child learn to use good table manners.

___ I will allow time for activities that the child chooses to do.

___ I will help the parents plan activities for the group socializations.

___ I will use ideas the parent discussed with me for the group socializations.

___ I will let the parents teach activities at the group socializations.

___ Other _____

_____

_____

_____

Parent's Signature _____

Home Visitor's Signature _____

Review Comments: _____

_____

_____

_____

_____

Component Stations: Set up stations for each component coordinator. Divide parents into small groups and have them rotate to each station. Component coordinators should explain the important aspects of their roles as they relate to the home-based families and explain how they can and will assist the parents if necessary.

Parent/Home Visitor Agreement: As mentioned previously, you may use the orientation to explain the parent/home visitor contract and to have each person sign it. Remember, some parents may be seeing what is expected of them for the first time and they may decide that this is not the option that best suits their needs. That is to be expected and it can eliminate problems in the future.

A General Reminder: Involve parents as much as possible in the orientation. The more input they have, the more they will learn and the more they will see that they are partners in this process.

How do I determine a schedule for the week?

With a properly planned schedule, you should be able to begin and complete your home visits at the appointed times. You also allow time to plan activities, attend staff meetings and in-services, travel, complete records, conduct group socialization and parent activities, make referrals, and fulfill the many and varied responsibilities of home visitors. The following are some tips for organizing a schedule that works!

- Start with a sheet of paper listing the days of the week, the hours you will be expected to work, and all inflexible weekly activities (for example, staff meetings and group experiences) then begin filling in your home visit times.
- A caseload should be no more than 12 families, based on a 40 hour work week.
- If you are a new home visitor, build up your caseload slowly if possible. Start with as few families as possible and add new ones as your routine becomes established.
- Try not to schedule more than four visits per day. . .three visits is preferable. A visit for one child should be no less than one hour. . .an hour and a half is best. If there are two enrolled children in the home, the visit should last two hours. The day and time for each home visit should fit into the family's schedule as much as possible. When scheduling families, accommodate those with less flexible schedules first. . .for example, mothers who work or go to school or who have several young children at home.
- Allow plenty of time between visits. You will need sufficient travel time and time to review your plans for the next home visit.
- Keep at least one 2-hour time slot open each week, or one day each month, for rescheduling missed visits.
- Save time at the end of the day or, if possible, between each home visit to write down ideas and plans for next week's home visits. It is best to do this while the ideas are still fresh.
- Allow 20% of your total work hours for planning, record keeping, and staff meetings. Depending on administrative policy, some of this time can be spent at the office or at home. This time allows you to meet with your supervisor or other component specialists to discuss the special needs of families on your caseload.

What do I do on the first home visit?

A common fear expressed by home visitors is, "I've just knocked on the door for the first time. Now what do I do?" The first home visit is important if you want to get started on the right foot, so you need to muster all your confidence, enthusiasm and professionalism. Remember that the parents are probably just as nervous and uncertain as you. They are not likely to have ever had a home visitor come to their home to work with them. This may be a very new and intimidating experience.

As mentioned before, plan ahead. Start that very first home visit by following the same structure you will use for the rest of the program year. Remember that most parents have a very busy schedule and have taken special steps to participate in your home visit. By establishing the routine from the beginning, you are demonstrating to the parent that you have an important purpose for visiting the home and this structure insures that purpose will be accomplished.

When the parents greet you at their door, extend a cheery greeting to both the parent and child. Find a good place to work —a kitchen table or a dining room table is preferable, but the home visit can take place on the family's front porch or under a tree, if that is most comfortable for the family.

Use the first home visit to establish a routine and to get acquainted with the parent. Review the home visit process and purpose. Stress throughout the visit how essential the parents' involvement is. Present the Parent/

Home Visitor Agreement if it was not presented at the parent orientation. Next conduct your educational screening if not already completed. Then begin your behavioral assessment. Again, this will need to be introduced and explained to the parents. Involve them in the assessment process. Ask for parent input; have parents demonstrate some skills to be assessed, such as drawing a circle or standing on one foot; ask parents open-ended questions about the child's current skills. To help relieve an anxious parent, tell the parent that you will be asking the child to do some things beyond his/her ability and that after the assessment you will ask if the child's behavior was typical. Explain the relationship between planning activities and completing the checklist. This will prepare the parent to help you target skills during subsequent home visits. Plan additionally to do a creative activity with the parent and child. Do an art project, present a finger play, make a snack, sing a song, dance to music, play a game—anything to get everyone interested and involved. Include the siblings during this activity. Plan an activity with the parent to work on during the week which follows through on activities from your visit. Review this activity with the parent. Make it simple and fun, and be sure it is an activity that will enhance the parent and child relationship.

You may need to take Head Start forms for the parent to fill out (health forms, social service forms, parent questionnaires, etc.). This can be done during the last part of the visit. Discuss each form with the parent and help complete it if necessary. This is also the time for that cup of coffee with the parent if he or she has offered. Use this time to ask if there are any questions about the home-based program and/or each person's responsibilities. Find out what the parent would like the child to learn during the coming year and what the parent likes to do with the child. Ask the parent to help plan activities for the next visit. Also, set a permanent day and time for future visits.

Complete this first home visit within the time specified. Establishing consistency and routines from the beginning will pay off as time goes on. Plan an additional activity for the child and parent in case you find yourself with extra time. If time runs short, finish what you are doing, complete any "must do" tasks, and save the rest for next time.

Above all, on this first home visit listen and observe. Get to know the parent, the child and the environment. Notice positive points upon which you can build in the future. Relax. Be flexible. Enjoy yourself. Even the very first home visit can be fun if you plan ahead and use it as a learning experience for everyone.

Issues in Home Visiting

How do I build rapport with parents and motivate them?

The most important factor in building a good working relationship with families is your attitude. It must be positive. You need to treat parents with respect and with an attitude that conveys, *You are important and special, and I know you can teach.* Focus on parents' **positive** traits and build on those. View each person as a unique individual who has a great deal to offer if he or she is given the chance. You must believe that parents care about their children and want them to attain their maximum potential. Finally, realize that parents are the most important teachers of their children and that through instruction, demonstration, and encouragement they can improve their teaching skills. In short, you must have high expectations which won't crumble if you experience a setback.

If your attitude is positive, building rapport comes more easily and naturally. You build rapport from the moment you meet. But, don't lose sight of the reason you are in the home. You are to facilitate learning, and you have a job to do.

Here are some tips for building rapport and motivating parents.

During the Home Visit

- Make the parent the focus of your visits. Let the parent know that you are interested in his or her growth as the child's teacher. Talk to the parent. Assist through feedback. Ask the parent to work with the child. Help develop the parent's role as a teacher.
- Begin working with the parent and child on specific activities immediately. This sets a tone for the home visits and can provide an excellent opportunity for reinforcing the parent and child. Parents will feel good about their abilities as they begin to see that they can and do teach their children.
- Don't overlook the role that the activities you plan together can play in building rapport. Many times the experience of working toward a common goal—teaching the child—is the best way to build rapport.
- Plan activities around daily routines. The child could count floating objects in the bathtub, point to colors while helping to set the table, learn matching skills while sorting silverware, learn measurement and pouring while the parent cooks, and so forth. Be as creative as possible in planning activities that fit into daily routines.
- Be sure the parents understand the rationale for each activity they teach. Make it a habit to discuss the reason for the activity before it is presented to the child.
- Discuss the daily routines with the parent (for example, bedtime, mealtimes, naptime, etc.), and use this schedule to help the parent select a good time to work on activities each day.
- Be flexible with the type of activities you take into the home. Try to ensure success for the parent. During a particularly busy or difficult time, plan more loosely structured activities that require less of the parent's time. As soon as things settle down, expect the parent to spend more time again.

Taking an Interest in the Family

- Find out what the parent is interested in – a hobby, a sport, a job—and take an interest in that too. You may find a good recipe and share it with someone who likes to cook, give a magazine article on camping to someone who enjoys weekend camping trips, or bring a plant problem that you are having to someone who loves plants. Use your imagination. Be thoughtful.
- Be a good listener. This means stop talking, be interested, put yourself in the parent's place, be patient and ask questions.
- You might send a birthday card to the child or parent and a holiday card to the family.
- If you have taken pictures of the child and parent (always a good idea for language stimulation), make a copy of a particularly good picture and send or give it to the parent.

Reinforcement

- Compliment the parent on things he or she has taught the child already and/or special things around the house. Be honest about this praise. Anticipate and seek out the positives.
- Assist parents to pursue a goal. Help them enroll in and study for Graduate Equivalent Degree (GED) course work or tests, work on a craft together, assist with food budgeting, etc. This can be used as reinforcement for working with the child during the week. **A reminder**—do only those things that you feel competent to do. Make referrals if it is not within your expertise.
- Reinforce the parent for working with the child during the week, for good attendance on home visits, or for any progress made in working with the child. Give recognition in the newsletter, make and distribute certificates for good work, or take the parents and/or their children on an extra field trip.
- After leaving the first activity give a call or send a postcard in two or three days to let the parents know you are thinking about them. Wish them luck on the task. Ask if there are any problems with the activity. Give them suggestions on what to do if there are problems. Remind them of the time and day you will be coming again.
- Have a *Parent of the Month* feature in the newsletter as a reward for good participation.
- Promote socialization among parents for participation. You might help organize an exercise class, a bowling team, a parent field trip, a baseball or volleyball team, or a garage sale.

Parents as Partners

- Allow the parent to teach you some things. Remember you are partners, and this implies a give-and-take relationship. Let the parent tell you about the child and what works with him or her. Let the parent assist you in planning activities for home visits. Be receptive to a parent's suggestion on ways to teach and to reinforce the child.
- Let the parent know that you don't have all the answers and that you've shared some common experiences and problems (toilet training your child, learning to be consistent and following through, finding time to do everything).
- Be patient. Sometimes we expect adults to change too quickly. Remember adults have different learning rates and learning styles too. It takes a long time to change established behaviors. You will need to give the parent time and focus on those behaviors that have changed—no matter how small they may be.
- Utilize the parent's skills and talents whenever appropriate. Ask someone who sews to help make paint smocks. Someone who likes to cook might want to share skills at a parent meeting or a children's group experience. Someone who is artistic might decorate the office or center with a mural or design the cover for the newsletter. A musician can be a tremendous lift for a parent or child gathering. Sometimes the

recognition gained from sharing talents can motivate further involvement.

Using Others as Resources

- Use your fellow staff members as resources in solving your problems. Follow the informal staffing procedure that is presented later in this chapter. Ask another home visitor or your supervisor to accompany you on a home visit to observe. Ask for concrete, positive suggestions after you have completed the visit.
- Get an uninvolved parent interacting with an active parent. Seat them together at a parent meeting, ask them to chaperone a field trip together, have them share a ride to a group gathering, or ask them to assist at one of the children's group experiences. Get them talking about the positive aspects of the home-based program. Encourage the active parent to give support.

A word of caution. . .All of these rapport building ideas can and do work. But they should **not** be the focus of your visit. They should not take up a large amount of time. You are building a positive working relationship so that you can help the child and parent learn and grow. However your role is not to become the parent's best friend. You can be friendly and concerned, but keep in mind that your purpose is to facilitate learning.

What do I do with handicapped children on my caseload?

Because of Head Start's 10% handicap mandate, you will likely have at least one child with exceptional needs on your caseload. To adequately meet the special learning needs of these children, you will need more structured planning and instruction with the child and parent. The procedures to use with handicapped children in a home-based setting are clearly presented in a book

entitled *Serving Handicapped Children in Home-Based Head Start,* an ACYF publication that is available from your regional Resource Access Project. The following are some additional ideas for meeting the special needs of handicapped children and their parents.

- Prepare yourself by reading factual information about the handicapping condition. The Head Start *Mainstreaming Preschoolers* series and your area Resource Access Project are excellent resources for this information.
- Put parents in touch with available resources. They may appreciate the information contained in the Mainstreaming Series. You might suggest that they contact an advocacy group representing handicapped persons (the Association for Retarded Citizens, The Association for Children With Learning Disabilities, etc.). Such groups can help the parents with their questions or difficulties in raising their child. They can also help parents find services they may need in the future.
- Constantly stress the *positive* traits of the child. Point out what the child *can* do. Break down those skills the child cannot yet do into small steps so the parent sees continuous growth.

- Help the parent form realistic expectations for the child. Development of long-term goals at the beginning of the year helps the parent see what the child can realistically be expected to do by the end of the year. Show him/her the steps that will be taken to teach each long-term goal. If the parent asks when the child will do things such as walk or talk, explain that you can't make an accurate prediction. Instead, the parent can look at where the child currently is in relation to the skill and examine the steps that must be mastered before the skill can be attained. Point out to the parent the need to work as partners in helping the child reach each goal.
- If parents are having great difficulty coping with a handicapped child and if they express the need, make a referral. Mental health clinics, school psychologists, or advocacy groups often offer programs designed to help families develop healthy attitudes toward themselves and their handicapped child. This can provide parents with needed support.
- Empathize with parents. Recognize that they are dealing with a difficult situation, but don't pity them. Let them know you are both on the same side—the child's.

What do I do if the TV or stereo is on?

Televisions, stereos, and radios, for better or worse, operate for hours on end in homes throughout the country. People have become so accustomed to the noise that it is no longer a serious distraction for most activities. The noise can present a problem on the home visit, however. As many potential distractors as possible should be eliminated so you can all concentrate on the tasks at hand.

Here are some hints on how to turn off the T.V.

- Explain to the parents that children work and learn best in an environment that is as free of distraction as possible. Ask if they would please turn the stereo (radio, T.V.) off for this reason.
- Tell the parents that *you* work best with few distractions and that you have lots of exciting activities planned that you'd hate to have interrupted.
- If someone else is watching the T.V., ask if you can work in another room. If you must work in the room with the T.V. on, seat yourself so the parent and child have their backs to the set and make sure *you* don't watch it!

- If you are coming at a time when the parent's favorite program is on, ask if there is a more convenient time. Give a choice, but make clear that it is essential to find a time when you can have full attention.

What do I do if there is no place to work?

It is preferable to have a table and chairs at which to work, but remember that the child's chair must be high enough so that objects on the table are within easy reach. You can easily modify an adult chair to raise a child by adding a box or a youth chair. You will also need cleared floor space for some activities. If there is not an obvious place to work or if the area is cluttered, consider the following strategies.

- Explain that a special work place is helpful to the child and parent. Doing the activities consistently in that place helps create a routine. Find a suitable work place with the parent's help. Tell the parent that a table and chairs provide a solid, comfortable surface for the child and a good place to do activities. You might assist the parent and child in clearing the designated area.
- If there is no such area, you can bring a rug to use as your work area. You may either leave the rug for them to use during the week or take it with you for use at other homes.

What do I do about siblings?

Imagine how special a child must feel to have an adult—complete with toys and interesting activities—come to the house once a week. If your home visits are a success, undoubtedly other children in the home will want your time and attention too. In many situations siblings can and will be included in the activities you plan. There will, however, be time during each visit when you'll want to have some time to work on new skills with just the parent and the target child. During these times you'll need

special strategies to structure the situation so everyone is occupied. Here are some suggestions.

- Bring extra activities for siblings. Bring things that they can do by themselves. A large ball, a busy box, stacking toys, blocks, etc. can keep a young child occupied. For older children you might consider bringing coloring books and crayons, paper and colored markers, puzzles, picture books, old magazines and scissors, tape recorded stories with books and recorder, cut and paste activities, simple board games, lacing cards, etc.
- Bring a timer. Tell the sibling(s) that you will need time alone with the parent and Head Start child. Tell them that they need to play alone for awhile. Let them know that if they do this, they will be able to join in the activities later in the visit. Find a private work area for the sibling(s). Set the timer for 10 or 15 minutes (depending on the child's age and attention span) and tell the sibling(s) that when it goes off, they may come in and show you and the parent what they have done. The parent or you should reinforce the child for working alone with praise, hugs, tokens, stickers, or new activities and then reset the timer, if necessary.

- After you have presented new activities to the target child, set up activities in which everyone can be involved. After one or two home visits, siblings will know that they will have a chance to participate too. This is an excellent opportunity to teach socialization tasks such as sharing and taking turns. It can also be a good time to demonstrate child management techniques for the parent and to give the parent an opportunity to teach in an unstructured situation.

What do I do about friends and relatives who drop in during the visit?

Having a home visitor come to the home can be an event that creates curiosity in others. Family friends and relatives may want to drop by to see what is happening. This can be very reinforcing to you, but if these unexpected visits occur frequently, they may interfere.

Again you will need to address this situation with consideration for the individual circumstances. The answer to the problem will depend upon the reason for and the frequency of these unexpected visits. It will also depend upon how distracting it really is. The following are some hints for dealing with unexpected visitors.

- If this happens infrequently and the individuals do not disturb what you are doing, you will probably need to say nothing. In fact, you can turn the situation to your advantage. Involve them in activities or let them entertain siblings as you and the parent and child work alone on new skills.
- If this happens frequently and proves to be a distraction, talk to the parent when you are alone about ways to ask callers to come back later. Help her decide on the actual words to say, like, "Having visitors seems to be distracting for my child. If you'll come back later, I'll tell you all about what we did." Try role playing this situation if the parent seems particularly uncomfortable.
- Try putting a sign on the door (with the parent's approval, of course). Simply say, "Our home visitor is here. Please come back at 1:00."

What do I do if there is no one home?

Since home-based programs are most effective when visits are made weekly, every effort should be made to see each family each week. You will find that if you establish and follow a permanent schedule, the families will usually be ready. You may, however, encounter occasional unreported absences. When no one answers your knock, consider using the following strategies.

- Make it a rule that parents must call the office when they are going to miss a visit. Someone at the office should be responsible for accepting phone calls and should keep a complete time schedule for each home visitor. When a family calls, this person should immediately contact the home visitor to avoid an unnecessary trip to the home.
- Any time you arrive at the home for a scheduled home visit and find no one there, leave a note. State the time you arrived, leave a number where you can be reached and ask the parent to call so you can reschedule the visit.
- Report the missed visit and surrounding circumstances in writing to your supervisor on your weekly lesson plan. You should also call the office immediately to report the missed visit. The supervisor should keep an ongoing attendance record for each family and home visitor.
- Establish an administrative policy to deal with absences. After two consecutively missed visits, the supervisor should contact the family by phone or in person to: a) determine the reasons for the missed visits, b) review the family's and home visitor's responsibilities in the home-based

program, and c) agree on solutions to the problems.

- After three consecutive missed home visits, the supervisor should visit the family and discuss the family's interest in continuing with the home-based program. If they choose to continue, an agreement on roles and responsibilities should be written and signed by both the supervisor and the family.
- It is sometimes helpful to remind parents that you are coming. Call just before you leave for your visit, send a post card during the week to remind them when you will be there again, or post a colorful sign on the refrigerator stating the time and day of your scheduled visit.

What do I do if the parent leaves the room?

Your home visits are designed to focus on both the parent and the child. Therefore, you can do your job *only* if both are present and participating. You will need to make this clear from the beginning. If the parent does leave the room, consider the circumstances carefully before you mention anything.

- If the parent leaves infrequently and for unavoidable reasons, discontinue the activity until he or she returns. While you are waiting, amuse the child. As soon as the parent returns, explain that you're glad he or she is back and continue with what you were doing.
- If the parent leaves frequently and for unavoidable reasons, examine the situation. How could you work together to eliminate the reasons for leaving the room? Discuss the problem and come to some compromise (changing the time of the home visit, bringing activities for siblings, telling people who call to call back, etc.). Explain why the parent must be there.
- If the parent's departure is frequent and for avoidable reasons, examine what *you* are doing. Are the activities stimulating and appropriate? Does the parent understand why you are doing them? Have you made the parent the focus of the visit or are you focusing on the child, leaving the parent out? Are you including the parent in planning activities? Have you planned activities that will allow the parent and child to experience success? Have you allowed and encouraged the parent to take the lead in teaching as many activities as appropriate?
- When addressing the situation, the direct approach is best. Tell parents they need to be there because the program cannot work without their active involvement. Tell them what progress you have seen already, or point out the things they helped the children learn before you came. Tell them that as their skills increase they will be better able to help their children learn new things.

What do I do about lost materials?

You will find that most families will take care of the materials you bring to the home. But when you begin to experience losses, it can be a heavy drain on the budget and on your time. Here are some strategies that may save you money and worry.

- One of the best ways to prevent lost materials is to find a special place in the home to keep all items you take. You can take a suitable container on the first home visit and decorate it as one of your planned activities. Ice cream barrels or sturdy cardboard boxes make good permanent storage areas for home visit materials. Help the family locate a place to keep the container, and many of your potential "missing items" problems will be solved.
- If materials are consistently lost or broken in a particular home, try taking only one commercial material at a time. When an item is returned, take a new item. In order to do this, you will need to rely heavily on homemade materials to carry out many of your activities.
- Monitor yourself carefully. Keep track of materials that are left in the home on your weekly lesson plans or in your personal records. Be consistent about asking that these materials be returned after the family is finished with them.

What do I do about non-reading parents?

You may run into an occasional parent who has little or no reading ability. This should not stop you, however, from preparing written activities. All parents can and do teach their children, and it is our responsibility to help parents teach even though they are hindered by lack of reading skills. Some suggestions are given here for helping non-reading parents teach their children.

- In teaching a non-reading parent to carry out activities with a child, you will need to rely heavily on modeling. Be sure the parent observes exactly how an activity is to be taught and then has an opportunity to try it. Give feedback on the way the parent teaches the activity so changes can be made if necessary.
- Discuss each activity in detail with the parent. Give ample opportunity for questions and make changes in the activity. Leave a written copy of the activity directions in the home for reference by any member of the family who may be able to read and help the parent.
- Illustrate materials needed for each activity to cue the parent.
- Consider tape recording specific directions for the parent as an aid during the week.

How do I help the parent with the child's misbehavior?

Handling a child's misbehavior can be a touchy situation. We have all seen things done and perhaps done things ourselves that we know are not good behavior management techniques. It is easy to slip into negative patterns with children when we want them to act differently. Threatening, bribing, nagging, and punishing often seem to be the fastest ways to remedy a bad situation ... and sometimes they are the only methods parents know. These techniques should be discouraged. Listed here are some suggestions for helping the parent deal with misbehavior.

- You can approach the subject of changing the parents' responses to their children's behavior by asking them if the methods they use seem to work. Ask them to look at a particular misbehavior in their child and the methods they have used to change it. Have them analyze how long the behavior has been occurring and whether the behavior seems to be increasing or decreasing. Then ask the parents to look at something that the child consistently does that they like. Ask them to analyze what they did to teach the child that posi-

tive behavior. This sequence can lead to a good discussion on behavior management techniques.

- The best way to help parents learn different behavior management techniques is to be a good model yourself. Show parents how reinforcement, ignoring of some behaviors, consistency, and removing privileges can work with their children, and explain the procedures when you use them. Tell them how each procedure works and what to expect if they try it.
- An excellent way to examine and learn new management procedures is to refer the parent to some good resources on behavior management and parenting. Some particularly effective books that have been written on this subject for parents are: *The Portage Parent Program, Living With Children, Without Spanking or Spoiling,* and *Exploring Parenting* (see Resources section). You might ask the parent to read a chapter a week as an assignment and discuss it during the next visit.
- If you are working with several parents who want information on behavior management techniques, you might organize a discussion group. If you do not feel qualified to lead such a discussion or to teach behavior management principles, find a mental health consultant, a special educator or a school psychologist who could lead the group.
- Discuss particular problems with a qualified member of your agency or community. Consider bringing this person on a visit to talk with the parent and/or observe the situation so that realistic recommendations can be made.

What do I do if I suspect child abuse or neglect?

The following guidelines are from *Head Start Prevention, Identification, Reporting, and Treatment of Child Abuse and Neglect Revised Policy Instruction*, 1984, and Transmittal Notice 77.1.

- Head Start agencies must report all incidents of suspected or alleged child abuse and neglect to their local child protective service agency or state organization. They are expected to abide by their state's standard reporting procedures.
- Head Start agencies must make every effort to work collaboratively with their local protective service agencies to provide the abused or neglected child a full treatment plan which utilizes the skills and expertise of both staffs. Head Start programs must inform their local protective service agency of any and all treatment programs or services provided by Head Start for a child and his or her family; e.g., play therapy, counseling services, parent aide programs.
- A Head Start staff member must be designated to be responsible for establishing and maintaining cooperative relationships with agencies providing protective services; informing parents and staff of state and local laws related to child abuse and neglect; knowing what community services are available for families with an abuse and neglect problem; reporting instances of abuse and neglect on behalf of the Head Start program; discussing the report with the family if necessary; and helping to establish a written procedure for identification and reporting.
- Head Start agencies must provide orientation and training for staff on the identification and reporting of child abuse and neglect. They should also provide an orientation for parents on the need to prevent abuse and neglect and provide protection for abused and neglected children.
- A comprehensive set of training manuals and slide tapes relating to this policy and to the issues of identification, reporting, and treatment is available from your area Resource Access Project.

How can I help prevent child abuse and neglect?

Prevention of child abuse and neglect involves fostering and maintaining a safe and healthy mental and physical environment for children and their parents. Problems such as family stress, social isolation, ineffective parenting skills, and inappropriate developmental expectations are some factors identified as contributing to child abuse and neglect. Your prevention plan should include a number of strategies.

☆ Review with parents some of the causes of abuse and neglect such as:
- abusive history of parents
- inappropriate expectations of child
- lack of empathy towards child's needs
- strong belief in use of corporal punishment
- inability to cope with stress or handle crisis
- chemical dependency of parents
- poor self-concept

☆ Develop a plan of action with the parent listing strategies that could lead to new ways of handling difficult situations. The Family Action Plan (see Chapter 2) is a vehicle for helping the parents identify these areas. These efforts build the foundation for helping parents to establish positive life-long, problem-solving patterns.

☆ Some of the services that Head Start already provides can help prevent child abuse. Make a determined effort to involve parents in activities such as:
- parent policy council
- parent support groups
- parent meetings

☆ Help parents develop support systems through community linkage.

- ☆ If your community has a "parental stress hot line," provide the parent with the phone number and talk about when and why it would be necessary to call.
- ☆ Access the parent to community agencies which can help to identify and relieve parental stress, such as respite care services.
- ☆ Help parents identify specific situations which could lead to abuse and neglect. Develop a plan for defusing these potentially harmful situations.
- ☆ Encourage parents to talk with someone from Parents Anonymous.
- ☆ Build a trusting relationship and rapport with the family and follow through on activities you indicate you will do or services you will provide.
- ☆ Bring in activities to enhance the parents' self-esteem. The book *100 Ways to Enhance Self-Concept in the Classroom* by Jack Canfield and Harold C. Wells provides a wealth of activities and ideas.
- ☆ Be non-judgmental and be aware of different value systems.
- ☆ Teach parents positive behavior management techniques.
- ☆ Help parents identify skills and behaviors appropriate to their child's abilities by using a developmental checklist.

- ☆ Help parents understand the reason for child misbehavior such as attention getting, frustration, or desire to control the situation. Help parents plan ways to handle these situations.
- ☆ Assist parents in establishing family rules that are:
  - clearly stated
  - consistent
  - fair
  - enforceable
- ☆ List rules in positive statements. Help parents determine appropriate consequence if a rule is broken.
- ☆ Check the Resources section of this handbook for helpful materials related to child abuse and neglect.

What do I do about working parents?

The home-based program focuses on the parent as the primary agent to deliver services to the targeted child and his/her family; therefore, it is essential that every effort be made to have contact with parents on a weekly basis. Home visitors may work with grandparents, babysitters, and day care personnel; but this is in addition to, **not** in place of, the parents. Every effort must be made to meet with working parents on a weekly basis. Here are a few ways that home visitors are able to deliver home-based services to working parents.

- Meet with parents during their lunch hour. Brown bagging it and spending the lunch hour with the working parent can be enjoyable. Most parents can arrange permission for you to enter their work place and find a place to meet. This meeting will need to be kept to the parents' allotted time. In nice weather meeting at a park or under a shade tree during a lunch hour is also a possibility. Even though the child is not present, the parent should be presented with the activities that will be worked on during the week. Working parents should have input in their child's pro-

gram and receive the same services from Head Start that non-working parents receive.

- Evening and weekend hours are sometimes required to meet with working parents. The hours spent in the evenings or weekends are not in addition to your regular hours but are a part of them. A procedure for arranging flexible hours for home visitors should be established in writing by your program.
- Some parents will be able to arrange flex time on their jobs that will accommodate early morning or late afternoon visits. Encourage parents to arrange this if possible. If there are two working parents, do not assume that it is the mother who should try to accommodate the home visit. See if it is possible to have parents take turns. This will allow each parent to participate in the program, and special arrangements to accommodate the visit will only need to be made every two weeks for each parent.
- Home visitors might want to make evening or weekend visits to a two-parent family when one parent works. This is effective when trying to establish rapport and provide instruction to both parents. Two parent families should be given the option of being served at a time convenient to both of them. If this is not possible on a weekly basis, consider a monthly visit when both parents are available.

What do I do with a parent who will not participate?

Your goal is to get parents to participate in their child's program as much as they are able. Parents, depending on their circumstances at the time you become involved with them, will vary in their ability and willingness to participate. Each parent should be seen as an individual and encouraged to participate no matter how hopeless your efforts may seem. Any action on their behalf must be reinforced and can be used as a starting point. No matter how resistant parents appear, your job is to make an effort to gain their participation. Here are some techniques that have worked for home visitors.

- Ask parents to help in activities that are not directly child related, such as making materials, painting equipment, or coordinating a field trip.
- Base your goals and expectations for parents on their individual abilities and circumstances.
- Have parents help select activities or skills that they would like to see their child learn. If you feel that a parent is not realistic in choosing a skill his/her child is ready to learn, offer him/her a choice of skills that you have determined appropriate for the child. The more parents are included in decisions about their child's program, the more likely they are to follow through on activities.
- Parents may resist becoming involved because they feel threatened by your competence or ashamed of your knowing their limitations. Do not misjudge parents' reluctance to participate. Demonstrate what you would like the parents to do as you tell them. This way your actions reinforce your words, helping them to understand more clearly.
- Be sensitive to parents who may not be able to read. Their non-involvement could be a cover up.

- Some parents need more motivation and reinforcement than others to work with their child. One home visitor always put a special treat for a parent in an envelope along with the activity that the parent was to work on during the week. Here are some practical ideas that have worked with parents: picking up things in town for the parents, giving coupons or green stamps, exchanging babysitting for volunteer hours at group socialization. Be creative! Reinforcement does not need to burden your pocketbook!
- Try activities that require two adults, such as jumping rope or finding materials around the house needed for an activity. This might be just what they need to ease into participating in an activity.
- Take the time to review the Parent/Home Visitor Agreement (see Starting Off On The Right Foot).
- Incorporate an activity for the child into an activity in which the parent has a high level of interest, such as cooking or gardening or shopping.

What do I do about non-English speaking parents?

It is essential that the parent is able to communicate with you. If a parent does not speak English and you do not speak his/her language, your program must provide an interpreter. This can be done in a variety of ways, depending on the availability of interpreters, the number of families needing an interpreter, and the number of different languages to be interpreted. Here are some ways programs have been able to work with non-English speaking families.

- The most obvious solution is to hire a home visitor who speaks the language, but this is not always possible. An interpreter is often prohibitive due to cost. Search out volunteers in your community who are willing to interpret for you. Try to obtain a

volunteer by advertising in the newspaper or through a public radio station.

- Some families who have just arrived in the States will have a sponsor family. This sponsor might have contacts with people who could help interpret and also may have obtained resources specific to your family's background which might be helpful to you in serving that family.
- One home visitor phoned to make her appointments late in the afternoon when the older children who were able to speak English were available to interpret. This was beneficial in two ways. First, it involved another family member and second, it provided the parent with a backup person with whom to confer during the week if he/she had any questions about the activities.

What do I do if I am afraid for my own safety?

Do not jeopardize your safety or health. If you find yourself in a situation that you believe is threatening, remove yourself immediately. Although this is not common, it is important for you to be prepared. Trust your judgment. After you have removed yourself from the situation, report the incident to your supervisor and discuss what to do next. Here are some suggestions for handling situations that seem unsafe.

- If you suspect illegal drugs or alcohol were used during or prior to the home visit, excuse yourself as politely as possible by telling the parent that you cannot stay and that you will contact him/her later to arrange another time for the home visit. Report the incident to your supervisor, and record the reason for the home visit cancellation in writing. Record what you saw—not what you suspect. Record statements such as: "Parent was unable to stand without holding onto a chair; his/her speech was slurred and s/he was using language I have never heard him/her use before." If on your next visit you feel it is necessary to confront the parent, do so in a nonjudgmental manner. Explain that you were unable to work with him/her that day because he/she seemed less coherent than usual, that home visits require everyone's attention and participation; therefore, you felt it was better to return on another day. Nothing more needs to be said. At that point, get on with your home visit. If this pattern is repeated, request that your supervisor or mental health coordinator make a visit to help the parent deal with the situation and/or to set limits on the conditions for your time in the home.
- If you feel threatened by visitors in the home, tell the parent that you feel uncomfortable and that you will return at a time when you and the parent can work alone.
- If there is a communicable or contagious disease such as measles, mumps, chicken pox, flu, impetigo, scabies, or lice, do not enter the home. If you learn about an illness during the home visit, check with a nurse, doctor, or health department before you go into another home. Wash all equipment and materials before you use them again.

What should I wear on home visits?

You will be in many locations as a home visitor: homes, social service agencies, clinics, and your office. Your apparel needs to be appropriate for each situation. When in doubt, be more conservative. Some agencies have a dress code and you will be required to follow it. If your agency has not taken into consideration your special circumstances, talk with your supervisor about revising the dress code to include appropriate dress for the home visit. Here are suggestions for the well-dressed home visitor.

- Your clothing should not detract from the task at hand. Simple, clean, neat, conservative clothing is usually best.
- Wear comfortable pants or loose skirts so you are not restricted. Your clothing should allow you to move freely from table activities to floor activities to outdoor activities.

- If you are allowed to wear jeans, make sure they are in good condition. Remember you are showing parents that neatness is not necessarily expensive.
- Keep jewelry to a minimum, especially when working with infants. You do not want the child to be distracted.
- Plan your clothing around wash-and-wear items. A jelly stain on white pants or a snag in a new sweater can be costly.
- During visits to other agencies or your office, more formal dress might be called for. Your clothing should reflect a professional image.

What kind of insurance should I carry?

As a home visitor you should take a close look at your insurance protection—both when visiting homes and when driving either the agency's vehicle or your own. Insurance coverage is nothing to take lightly. As a home visitor, you are responsible for checking your insurance coverage and making sure it is adequate. Obtain a copy of your coverage and carry it in your car. Remember you are liable if something should happen for which you are not insured. Check with your agency to clarify your coverage and your responsibilities. Listed below are questions you should have answered before you enter a home or transport parents or children.

- If you injure yourself on the parent's property, who is responsible? Can you and/or the agency sue the parent? If so, are parents aware of this? Are waivers of this right provided to parents?
- If you accidentally damage the parent's property, who is responsible?
- What protection do you have to cover a parent and/or child involved in a car accident while you are transporting them? Who is responsible for paying for this coverage? Some programs will pay the difference between the cost of your regular car insurance and the increased cost, if any,

for job related coverage.

- Does your insurance policy state minimum requirements for the vehicle you use to transport parents and/or children?
- Is there a seat belt law in your state; and if so, are seat belts and/or car seats provided for each passenger?
- Is there a limit to the number of passengers you can carry and still be protected by your insurance?
- Are siblings covered?
- Do not request parents to transport other parents and children unless you have written confirmation from their insurance company that they are insured. Inform parents the limits of your agency's liability before they accept transportation responsibilities.
- In general, know who is liable and for what he/she is liable. Protect yourself.

How do I stay organized?

Home visiting can bring out the disorganization in the best of us. There seems to be endless materials to check out, check in, and keep track of; records to prepare, organize, and keep handy. And everything has to be kept mobile, at your fingertips, and usually in a very small space. The following are some tips that may save you some organization headaches.

- Stay a week ahead in lesson plans. Check the activities' appropriateness during the visit **before** you present them. For example, the parent and you have referred to the assessment information and determined that the child is ready to cut with scissors. During the visit, before you plan to introduce cutting, give the child scissors and paper, and ask her to snip or cut on lines. If the child can do this, mark it as a learned skill on the assessment tool and plan a more advanced cutting activity. You have thereby saved yourself writing an activity that the child can already do.
- Keep a working folder for each child on your caseload. This folder should include

the child's developmental assessment, address, phone number, and directions to the house, blank lesson plans, planned lessons, observations and notes, and the Family Assessment Instrument. Completed lesson plans will probably be kept in the office for reference and monitoring purposes.

- A metal or plastic file box for your working folders on children can be very helpful. When visiting a family, however, take only that child's folder into the home.
- Avoid bringing too many materials. Bring those items you will need for the planned activities and a few extra for siblings or unexpected circumstances.
- It is helpful if you have a basic materials kit to use throughout the year. Special materials not included in the kit can be checked out from the office. Some sample items in a basic kit might be: crayons, tape, ruler, stapler, drawing and construction paper, glue, scissors (both child and adult sizes), sets of action and object pictures, wooden puzzles, a can of stringing beads, pegs and a pegboard, sequence cards, picture books, lotto games, picture card games, cubicle counting blocks, paints, pencils, magic markers, balls (two sizes), tape recorder, and puppets.

First Aid for Home Visitors

Home visitors, due to the unique nature of their positions, require a structured support system to do a good job. One Head Start program in Pennsylvania has labeled this four tiered system S.O.F.T., standing for:

Sharing
Onsite Supervisory Visits
Feedback On Records and Reports, and
Training

This section will address the support you can expect to successfully carry out your important responsibilities to children and their families.

Informal Staffing

Home visiting can be a lonely job. You may not have much opportunity to talk with other home visitors since you are traveling from home to home. Isolation from other home visitors also means you don't discuss common concerns or problems. To improve this situation schedule weekly staff meetings. Home visitors, supervisors, and the component coordinators should be included. The primary purpose of these staff meetings is to discuss problems that relate to home visiting and the families served.

The informal staffing is effective for sharing problems and selecting possible solutions. The informal staffing log (Figure 2) is a record of the discussion. This log is passed to each home visitor at the beginning of the meeting. Anyone who has a question to discuss at the meeting fills in his or her name, child or family's name, and a brief description of the problem. There is no limit to the number of questions a home visitor may list.

The problems discussed can be anything related to home visiting, the home-based program, or families and children served. No problem is too small or insignificant to

PORTAGE PROJECT INFORMAL STAFFING LOG

Staff in Attendance _____

_____

Recorder _____

Date _____

DATE	HOME VISITOR	FAMILY	PROBLEM	ALTERNATIVE SOLUTIONS *CHOSEN ONE	FOLLOW-UP

Figure 2

be discussed. Examples of concerns which home visitors may have are:

What can I do if the parent doesn't work with the child during the week?

How can I teach Jimmy to put his shoes on the correct feet?

How can I maintain Lisa's attention during the home visit?

Mrs. Jones would like to talk to another parent of a handicapped child. Whom do I contact?

After each home visitor has had the opportunity to write questions, the group discussion begins. A recorder is selected who reads a question and asks the home visitor if he or she would give some additional information about the situation including any solutions which have been tried. Discussion is then opened to the group. Other home visitors may have had similar problems and found a solution. Component staff also may have ideas. The recorder lists all the possible solutions. At the discussion's end the home visitor **must** select one of the alternatives which he or she thinks might work. This solution must be tried during the next home visit.

This is the key to the informal staffing procedure. Some action must be taken as a result of the discussion. After the home visitor has tried the idea, he or she reports the results back to the group. This is usually done after two weeks to allow time to see if the idea was an effective solution.

If the problem was not solved, there are two possibilities: (1) repeat the discussion and select another idea, or (2) take an observer on the next home visit. This can be another home visitor, a supervisor, or another resource person who may be able to offer other solutions after viewing the home visit. Be sure to obtain the parent's permission before having another person visit. If the problem cannot be solved within your own staff, use community resources to assist the family and you.

The informal staffing procedure should be the main activity of the staff meeting. Don't be so concerned with announcements and general information that there is limited time to discuss concerns relating to children and families. Remember this may be the only opportunity you have to discuss common concerns with fellow home visitors. Additional staff meeting activities which could follow informal staffing include:

Sharing materials — A home visitor may have made teaching materials which could be shared with the group. Someone may have new ideas for using a familiar toy or material.

Speakers —

- Specialists who share ideas for stimulating language development.
- Staff from other agencies who could discuss their program and how services between programs could be coordinated.
- Local kindergarten teachers or school personnel who could discuss expectations of children entering their classroom.
- Qualified persons who discuss aspects of working with families and helping them to meet their own needs.

Films relating to child development or parenting.

Component coordinators discussing possible home visit activities.

Happy stories. . .End the meeting with everyone sharing something good that happened during the past week. It is easy to spend too much time concentrating on problems and to forget the good things.

Staff meetings should be scheduled the same day each week. If there are center and home-based staff at the meeting, time should be allowed for each group to discuss concerns related to each option. Each group could conduct their own informal staffing.

The day scheduled for the staff meeting can also serve other purposes. Usually the informal staffing and other program business can be completed in half a day. The remainder of the day can provide time for the following activities.

- Complete weekly reports of home visits.
- Plan activities for next week's visits.
- Discuss each child's program in individual meetings with supervisor.
- Reschedule missed visits.

Training

Training is a key component in the success of a home-based program. Your program will be responsible for providing three types of training. The first type is an orientation to Head Start. This training will include information to familiarize you with your agency and its procedures, Head Start Performance Standards, your job responsibilities, and the identification and reporting of child abuse and neglect. This usually occurs the first week on the job.

The second type of training is more comprehensive. It helps you develop and increase the skills needed to feel secure and confident in your home visitor role. It will provide information on screening and assessing children and families, lesson planning, conducting home visits, working with adults, and documenting your home visits. This training is usually conducted by your supervisor, experienced home visitors, or an outside consultant.

The third type of training is on-going training. Its goal is to increase your skills and knowledge in working with families and in planning ahead for professional development. The content of on-going training is determined by the skills and knowledge with which you entered the program, the evaluation of your strengths and needs in on-the-job performance, and the individualized training plan that you and your supervisor have designed. This type of training can be conducted in a variety of settings and take on many forms, such as conferences, in-services, individual readings, discussion with your supervisor or peers, visits to other programs, or course work. The Child Development Associate (CDA) is a valuable training approach available to Head Start teachers and home visitors. CDA is a comprehensive competency based individualized training program. Check with your supervisor to determine how you can get started on your CDA credential!

Included in Figure 3 is a training needs assessment developed by a Head Start in Missouri for planning initial and ongoing training in a home-based program. Also, Figure 4a,b is a two-part personal learning plan which includes a self-assessment and a planning sheet. Following completion of the self-assessment, use the planning sheet to outline a plan to improve your competence in one weak area. During a program year you will work to improve several such skills.

Figure 3

KCMC CHILD DEVELOPMENT CORPORATION
HEAD START PROGRAM
STAFF NEEDS/EVALUATION
PART I

Name _____ DATE _____

Position _____

Center _____

Home Base _____

To facilitate the planning of future inservice sessions and determine professional goals of individual staff members, please complete the following questionnaire:

1. Please list your goals/classroom/home base objectives for the upcoming school year.

_____

_____

_____

_____

2. How will you accomplish the goals listed above, and what services will you need from the Head Start coordinating staff to accomplish these goals?

_____

_____

_____

_____

3. Are you currently enrolled in CDA training? Yes _____ No _____

   If yes, give date of enrollment _____
   If yes, give date of proposed readiness for LAT meeting _____
   If not, when do you plan to enroll? _____
   When do you propose applying for the LAT meeting? _____

4. If you are currently enrolled or plan to enroll in CDA training, list future assistance/training needed before assessment.

_____

_____

_____

_____

Figure 3 continued

5. List below possible topics/special interest ideas for future inservice CDA training classes.

TOPIC	SUGGESTED PRESENTER

6. List below the 1984–1985 inservice training sessions that were the most beneficial to you. (Put a star/suggested date, beside any session you would like to see scheduled again for the upcoming school year.)

INSERVICE TRAINING SESSION	SUGGESTED DATE

7. Please list any inservice training presenters, that were stimulating/effective speakers, that you would suggest for future workshops.

8. Please list any places/locations that you feel the inservice training sessions could be conducted.

Signature _____ Date _____

KCMC Child Development Corporation
1800 East Truman Rd.
Kansas City, MO 64127

Figure 4a

PERSONAL LEARNING PLAN

This personal learning plan has been developed to help you recognize your strengths in working with families and will also help you pinpoint areas in which you need additional competence.

Place an X in the box that most represents how you perceive yourself regarding each topic are:

1. I have little knowledge regarding this topic and do not feel comfortable with it.
2. I have some information in this area, but need additional training before I would feel comfortable about it.
3. I am somewhat familiar with this topic and could adequately apply what I know.
4. I have extensive knowledge in this area and can competently apply it with families.

	1	2	3	4
EARLY CHILDHOOD EDUCATION				
Child development	☐	☐	☐	☐
Child management	☐	☐	☐	☐
Learning theory	☐	☐	☐	☐
Serving children with handicapping conditions	☐	☐	☐	☐
Child assessment developmental screening	☐	☐	☐	☐
Planning activities in the home	☐	☐	☐	☐
Curriculum development and implementation	☐	☐	☐	☐
Art, music, and creative movement	☐	☐	☐	☐
Self-concept development	☐	☐	☐	☐
Problem solving	☐	☐	☐	☐
Promoting creativity	☐	☐	☐	☐
Transitioning to school	☐	☐	☐	☐
Group socialization experiences	☐	☐	☐	☐
ADULT EDUCATION				
Adult learning theory	☐	☐	☐	☐
Motivating adults	☐	☐	☐	☐
Learning strategies for adults	☐	☐	☐	☐
COMMUNICATION				
Communication skills	☐	☐	☐	☐
Problem solving techniques	☐	☐	☐	☐
Assertiveness training	☐	☐	☐	☐
Conflict management	☐	☐	☐	☐

	1	2	3	4
WORKING WITH FAMILIES				
Crisis issues for families	☐	☐	☐	☐
Family dynamics	☐	☐	☐	☐
Working with disadvantaged families	☐	☐	☐	☐
Cultural diversities	☐	☐	☐	☐
Helping families to meet their own needs	☐	☐	☐	☐
Child abuse and neglect	☐	☐	☐	☐
Home-based record keeping	☐	☐	☐	☐
Family needs assessment	☐	☐	☐	☐
PROFESSIONAL DEVELOPMENT				
Stress management	☐	☐	☐	☐
Time management	☐	☐	☐	☐
Organization	☐	☐	☐	☐
Managing specific home-based problems	☐	☐	☐	☐
Working with other professionals	☐	☐	☐	☐
Team Building	☐	☐	☐	☐
Burnout	☐	☐	☐	☐
HEAD START COMPONENT AREAS				
Knowledge of community resources	☐	☐	☐	☐
Nutrition counseling	☐	☐	☐	☐
Common childhood diseases	☐	☐	☐	☐
First aid	☐	☐	☐	☐
Health education for parents and children	☐	☐	☐	☐
Outreach, recruitment, and enrollment	☐	☐	☐	☐

Figure 4b

PERSONAL LEARNING PLAN

Learning Area _____

LEARNING OBJECTIVES	STRATEGIES	RESOURCES

Supervision

Supervision is the final piece of your support system. It is important that you are clear on who is your supervisor and what is his/her role. Know to whom you are to report and to whom you are to go with problems and requests.

Your supervisor will be required to accompany you on a minimum of two home visits per year. This is only a minimum, and it is strongly recommended that your supervisor observe your home visits more often—monthly during the first year of home visiting and less often, depending on your experience, after that. Do not hesitate to ask your supervisor to observe your home visits more often if you feel the need, especially if you are having difficulty with a family or if you are a new home visitor. Here are some suggestions to gain the most from your supervisor's observations.

- Be prepared when you take your supervisor on a home visit. Inform the family that you will be bringing your supervisor, and explain your supervisor's role during the visit. Make sure the family knows that your supervisor is looking at your performance, not theirs. Explain that the purposes of the observation are to help you fine tune your skills and to provide you with suggestions to increase parent involvement.
- Discuss what will be observed with your supervisor before you go on the home visit. Review the observation form that will be used. (Examples of home visit observation forms, Figures 5 and 6, are included.) If you do not presently use one, suggest that your program adopt or adapt one from the handbook. Evaluation forms will help keep observations objective and help provide you with specific feedback.
- Arrange to talk with your supervisor after the observation. Be open about receiving feedback. Do not let your supervisor tell you what she did not like without giving you suggestions for improve ment. Request that s/he provide you with specific examples. Then ask her/him to help you develop a personal learning plan for improving your skills. This should be a positive meeting. No matter how long you have been a home visitor or how excellent you are, there is always room to grow. Don't take the old attitude of ***You can't teach an old dog new tricks;*** remember instead, ***There are some tricks that only an old dog can learn.***

Because of the possibly limited availability of your supervisor, here are some additional ways you can get feedback and/or improve your home visits.

- ☆ Observe other home visitors.
- ☆ Have other home visitors observe you.
- ☆ Use the observation forms on yourself or have the parent fill them out.
- ☆ Tape record your home visit.
- ☆ Video tape your home visit and review it with a peer.
- ☆ Role play a home visit (especially a crisis or problem situation).
- ☆ Request periodic staffings on all families.
- ☆ Monitor your own personal learning plan and make sure you are gaining the skills you need; if not, revise your plan.
- ☆ Talk with other professionals in the field.
- ☆ Talk with other component staff and get their input.
- ☆ Talk with other home visitors; you are each other's best resources.
- ☆ Have a component specialist go on a home visit with you.

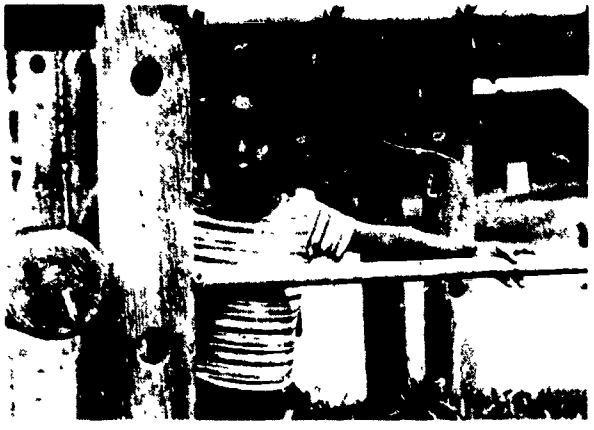


Figure 5

HOME VISIT OBSERVATION CHART

This may be used by a home visitor as a self-assessment tool or by a supervisor during observation of a home visit.

Self-Assessment Chart

1. I can do well.
2. I need a refresher.
3. I'm not sure, I need feedback.
4. I can't do this unless I get training.
5. I don't like to do this at all

Supervisor's Assessment

1. Can do well enough to train others.
2. Can do well.
3. Needs training (refresher).
4. Cannot do at all.

DURING EACH HOME VISIT, THE HOME VISITOR WILL:	1	2	3	4	5	EXAMPLES OR OBSERVATIONS
1. Review the previous week's objectives and activities with the parent(s).						
2. Use the home visit plan to remind the parent(s) of what is planned for the home visit and who will be expected to lead each activity.						
3. Explain what developmental concept is being taught by each activity.						
4. Work with parent(s) on the child(ren)'s individual developmental needs.						
5. Arrange seating so the Home Visitor does not interfere with the parent/child interaction.						
6. Involve the total family in the activities as much as they wish, and encourage involvement of those who are reluctant.						
7. Involve siblings in the planned activities.						
8. Adapt activities to each child's ability and developmental level.						
9. Encourage parent(s) to actually lead planned home visit activities with their children.						
10. Integrate all four Components into the home visit activities.						
11. Use materials found in the home in activities.						
12. Explain how the family's daily routine can be used as learning experiences for the child; encourage parent(s) to use these opportunities.						
13. Model new teaching techniques or activities for the parent(s) to use.						
14. Leave or suggest materials to be used in the home during the week that will reinforce the home visit objectives being worked on.						
15. Involve parent(s) in the assessment of home visit activities.						
16. Plan activities (with parents) for the next home visit based on each child's and parent's needs and interests.						
17. Promote positive interaction between parent(s) and child.						
18. Encourage family independence.						
19. Have positive interactions with the parent(s) both verbally and non-verbally.						
20. Recognize parents' strengths and actively support their efforts.						
21. Promote a home environment that is free of factors that contribute to illness.						
22. Assist family in providing a safe home environment that reduces and prevents accidents.						
23. Assist parent(s) in providing a stimulating home learning environment.						

Evaluation

HOME VISIT OBSERVATION REPORT

1. Who is the focal point of the home visit? _____

2. How would you describe the atmosphere between the home visitor and family during this visit? _____

3. How is the lesson plan utilized? Does it allow for individual needs? _____

4. How were all four components integrated into the home visit? _____

   Health: _____

   Education: _____

   Nutrition: _____

   Social Services: _____

5. How is the parent involved in planning? _____

6. How was the parent involved in evaluating the week's activities and/or the home visit? _____

7. How is the home environment used as a teaching tool? _____

8. What information about child development and parenting do you think the parent learned during this visit? _____

Supervision will not be limited to home visit observation but will also include monitoring your records. Record monitoring should take place monthly. A review of home visit records will indicate if:

- home visits are completed as scheduled?
- all component areas are incorporated into visits?
- child and parent are accomplishing goals?
- parents are involved in planning visit?

The purpose of monitoring should be not only to ensure that everything is complete and correct but also and more importantly, to help you improve your home visits. The third piece of home visitor supervision is an Individual Conference to help the home visitor increase skills and set goals for improvement. The forms for this feedback are included in Figure 7.

Job Descriptions

Your job description is a road map to perform your job responsibilities. It describes your duties as a home visitor. The specificity of these duties will be determined by your program and will depend upon factors such as: the size of your program, the number of direct service staff, number of families served, service delivery to the families, component coordinators roles in the delivery of services, etc. The sample job description included is representative of those collected from around the country. Look it over and share it with your supervisor if you see ways to clarify or improve your own job description. Your job description should reflect a clear and detailed description of your responsibilities as a home visitor.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Supervision ideas from exemplary programs

Our home visitors are provided with two hours of training each Monday.

We assess our training needs with a questionnaire.

We provide our teachers with an intensive week preservice in the fall.

Each lead home visitor has a caseload of 4-6 families. In addition to their caseload, they supervise 3 home visitors. Lead home visitors meet with their home visitors weekly and observe them monthly. The home-based supervisor supervises the four lead home visitors, meets with them weekly, observes them monthly, and meets with total home-based staff monthly. In addition, the home-based supervisor is responsible for providing training for home-based staff and meets with the educational coordinator weekly.

Two full-time home-based supervisors each supervise 6 home visitors. Home-based supervisors are also the Educational Coordinators and make monthly observations.

Home-based supervisor supervises four home visitors, making a total of 4 observations per year. She is also the Education/ Handicapped Coordinator.

Our home visitor supervisor also serves 5 families. We think this is a very valuable experience.

☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆☆

Figure 7

INDIVIDUAL CONFERENCE

I. Record Monitoring Observations Discussed yes no

II. Home Visit Observations Discussed yes no

III. Supplementary Responsibilitties Dicussed yes no

IV. Monthly Objective

A. Outcome of Previous Month's Objectives:

1. achieved _____ continued work recommended _____
2. achieved _____ continued work recommended _____
3. Comments: _____

_____

_____

_____

B. Objectives for Coming Month:

1. _____

Resources required Person Responsible for Supplying Resources

a. _____

b. _____

2. _____

Resources required Person Responsible for Supplying Resources

a. _____

b. _____

Home Visitor's Comments: _____

_____

_____

_____

_____

_____

_____

Signature of Supervisor/Date Signature of Home Visitor/Date

JOB DESCRIPTION
CLASSIFICATION HOME VISITOR

QUALIFICATIONS

1. Minimum age 18.
2. High School diploma or G.E.D.
3. Must have valid driver's license, insurance, working automobile with seat restraints for use on the job, willingness to drive Head Start vehicle.
4. Experience in working with adults and preschool children for at least 1 year, or a 2 year degree in related fields.

SKILLS/CHARACTERISTICS

a. Adaptable
b. Non-judgmental
c. Resourceful
d. Energetic
e. Dependable
f. Communication
g. Friendly
h. Confident

PREFERENCES:

1. Low income Head Start parent (past or present)

REPORTS TO: Head Start Supervisor
WORKS CLOSELY WITH: Parents, County CAA, Other Head Start Staff, Agencies.

I. GENERAL:

a. Assists families in identifying family resources and needs.
b. Works with families and children on a scheduled one-to-one weekly basis in their homes for at least 60 minutes.
c. Maintains confidentiality of family records and information.
d. Encourages and promotes the family's achievement of self-sufficiency.
e. Is accompanied by the home-based supervisor on home visits as well as resource staff when deemed necessary.
f. Participates in all appropriate training and meetings.
g. Encourages parents to attend parent meetings and transports when necessary.
h. Integrates all Head Start components during each home visit.
i. Maintains and periodically up-dates Family Profiles with each family throughout the program year.
j. Works with parents to develop weekly home visit and weekly activity plans based on each child's assessment and identified family need.
k. Responsible for providing monthly records for the home-based supervisor: time sheets, mileage records, home visit plans, family service forms, flex-time sheets, petty cash expenditures, etc.; and maintaining with parents designated records on an on-going basis: participant's cards, health forms, in-kind, volunteer sheets, and volunteer mileage.

II. PARENT INVOLVEMENT:

a. Assists parents in developing and fostering healthy self-concepts for themselves and having begun this effort, will begin assisting parents in becoming the prime family educator(s).
b. Fosters the belief in parents that they are their child's best teachers and reinforces this concept with practical suggestions for its development.
c. Assists and assures accurate recording for all parent and Policy Committee meetings.
d. Provides guidance and leadership in the planning of and participation in parent meetings scheduled at least once per month.
e. Encourages families to keep an on-going file of weekly home visit plans.

III. SOCIAL SERVICE.

a. Recruits families following current recruiting procedures.
b. Makes referral and transports families when necessary to community services such as family planning, food stamp offices, employment security, health services, vocational rehabilitation, psychological services, etc.
c. Recruits volunteers from the community and guides their involvement.
d. Assists parents in utilizing fully all available community resources.
e. Acts as a liaison and advocate between community resources and Head Start families.

IV. EDUCATION:

a. Assists parents in developing ways of using household resources for use in educational activities with their children.
b. Provides children with a group socialization experience at least once a month, of 3 hour duration (min.)
c. Provides on-going assessment with parent of enrolled Head Start children with appropriate assessment tool.

V. HEALTH:

a. Assists families when necessary in the arrangement and transportation of medical and dental appointments as required by Head Start, including designated follow-ups.
b. Offers families health information and educational experiences routinely.
c. Initiates one food preparation activity at least once each month during a home visit.
d. Conducts health checks on each home visit.

Follow-up Activities

1. Role play with another home visitor how to present and discuss the Parent/Home Visitor Agreement. Include the rationale for the agreement, stressing the partnership nature of the home- based program.
2. Prepare an agenda for a Parent Orientation Meeting. In addition to the time frame, place, and content for the meeting, specify babysitting arrangements, transportation, refreshments or potluck, planning committee, presenters and hosts, and posters or decorations, etc. Be creative! To rate your plans ask yourself: *Would I want to attend this meeting?!*
3. Design a blank weekly work schedule. Duplicate at least three copies. Fill in work hours, scheduled weekly activities, planning time, and finally home visits. Try several combinations until you find one that is reasonable.
4. Invite experienced home visitors to lunch and ask them to share the secrets of their success.
5. Collect magazine, newspaper, and journal articles about working with parents. Make a file of useful ideas.
6. List at least eight routine activities in the home. Think of five skills a parent could teach his/her child during those routines.
7. Study one of the suggested parent oriented texts on parent and behavior management. For further information, try *Guidance of Young Children* by Marian Marion, published by C. V. Masby Company in 1981. This paperback is based on the assumptions that adults want to help children learn to control themselves, to like and value themselves, and to be humane, caring, competent, and helpful. Based on sound theory and research, it also offers a great variety of practical suggestions. Plan how you could incorporate some of these ideas into your group socialization experiences.
8. Do additional reading on child abuse and neglect. (See Resource section for materials.) Develop lesson plans incorporating prevention activities for your families on a regular basis.
9. Review your job description. Does it reflect a clear and detailed description of your responsibilities as a home visitor? If not, look for ways to clarify or improve it and share your ideas with your supervisor.
10. If your program does not use the informal staffing process, arrange a role play situation with your colleagues. Choose a facilitator. This person will ask for additional clarification of questions and solutions already tried, encourage active brainstorming, discourage "yes—buts," and record solutions to be tried next week. During role play describe problems in a concise, objective way.
11. Stress is a part of everyday life. Sometimes it can be distressful. Pick one of the many popular stress management books on the market and evaluate your stress level. If it is considered too high, develop a personal action plan to help keep you a productive and healthy home visitor! (Some suggestions: *Kicking Your Stress Habits* by Donald A. Tubesing, *Personal Strategies for Living With Less Stress* by Richard A. Steen, *How to Manage Stress in Your Life and Make It Work for You* by Rosalind Forbes.)
12. Refer to the Personal Learning Plan. Complete the Self-Assessment section and choose one area in which you would like to improve your competence. Using the planning sheet, outline how you can reach that goal. Be sure to include people as resources.

Appendix A

Criteria for a Successful Home-Based Program

The following are guidelines which will help insure quality in a parent-focused, home-based program:

- Eighty percent of scheduled home visits should be completed. On the average, a home visit of 60-90 minutes must be scheduled a minimum of 3 times a month for each family.

- Grantees should develop a policy for parents and staff regarding completion of weekly scheduled visits in the home; including provision for cancellation by staff, make-up of missed visits, evening and weekend visits.

- A minimum of one nutritious food preparation activity, coordinated with meals and snacks, must be provided monthly during a home visit.

- There must be a minimum of 3 hours of group socialization experience per month provided for parents and their children.

- The plan for the group socialization experience for the children should be developmentally appropriate and focus on social development.

- Group socialization opportunities for parents should be scheduled. The plan for socialization for parents may include:
  - Interaction with the children during their socialization time,
  - Interaction with other parents through discussion groups, networks, training activities, and other opportunities to associate with adults.

- The home-visitor staff should be:
  - Able to communicate with the family, preferably in the language preferred by the parents;
  - Responsive listeners;
  - Knowledgeable about human development, family dynamics, and needs of children;
  - Willing to learn about Head Start components;
  - Knowledgeable about community resources;
  - Sensitive to and appreciative of other people's values; and
  - Able to work with adults.

- The grantees should plan for staff development by including in their training plans:
  - Specific training on the Home-Based Option with emphasis on approaches to and techniques for working with parents, and
  - Training in all component areas as they apply to home-based delivery.

- The staffing pattern should be such that:
  - The number of families that a home visitor serves is 9 to 12, based on a 40 hour work week.
  - Each week, 20% of the home visitor's time must be allotted for reporting, planning, consultation, and/or training.
  - The grantee should provide a systematic plan of supervision for home visitors and each home visitor will report to a designated supervisor. This supervisor:
    - coordinates with component staff for the delivery of services;
    - regularly reviews written plans and reports;
    - observes and evaluates the home visitors on at least 2 home visits during each program year; and
    - schedules regular meetings with the home visitor to provide feedback and support.

- Home-based families should be proportionately represented on the Policy Council at the grantee level.

The following are guidelines for delivering home-based services in all component areas.

Education

The education component plan states how services will be individualized for each child and family and how it will support the parents as primary teachers of their child(ren).

To support the home as the learning environment, emphasis must be placed on the use of materials easily acquired or readily available in the home and community.

Special consideration is given to the developmental needs of preschool children for peer socialization in group situations. A balanced approach to learning social skills might include field trips, small groupings of children in a home or larger group of children in a community facility. Parents should also be a part of the socialization experience because the activities provide opportunities for them to increase their understanding of child growth and development.

Health

Since parents are the focus of the home-based delivery system, preventive health education and the total family's health needs will be addressed.

Medical and Dental: Children in home-based programs are to receive all of the medical and dental Head Start health services as established in the Performance Standards.

Mental Health: The Head Start Performance Standards for mental health will be met in the home-based option. Periodic mental health observations may occur during group socialization sessions.

Nutrition: A priority emphasis on nutrition education aimed at helping parents learn to make the best use of existing food resources through food planning, buying, and cooking should be incorporated regularly in home visits.

Whenever child socialization sessions are held, a snack and/or meal is to be served. When food preparation occurs during home visits or socialization, emphasis should be on high quality nutrition.

When food is not available to a family, the home-based program should make every effort to put the family in touch with whatever community organizations help in supplying food. In addition, parents need to be informed of all available family assistance programs and encouraged to participate in them.

Nutrition education recognizes cultural variations in food preferences and supplements and builds upon these preferences rather than attempting to replace them. Thus, food items which are a regular part of a family's diet should be a major focal point of nutrition education.

Food preparation activities that occur during home visits must build on utilization of family resources.

Social Services

The Head Start Performance Standards for Social Services must be met in the home-based option. An individualized Family Assistance Plan (FAP) based on a family needs assessment must be developed by the parent and home visitor together and updated regularly.

Grantees will assure confidentiality of written and verbal information about children and families.

Parent Involvement

The Head Start Performance Standards for parent involvement apply to the home-based option. The home-based option reflects the concept that the parent is the first and most influential "educator" of his or her own children. Thus, home-based programs emphasize developing and expanding the parenting role of parents. The home visitor and the parent work as a team to plan, implement and evaluate the home visit, follow-up activities, and the socialization sessions.

Home-based programs give parents an opportunity to learn about various approaches to child rearing, ways to stimulate and enhance their children's total development, ways to turn everyday experiences into constructive learning experiences for children, and specific information about health, nutrition, and community resources.

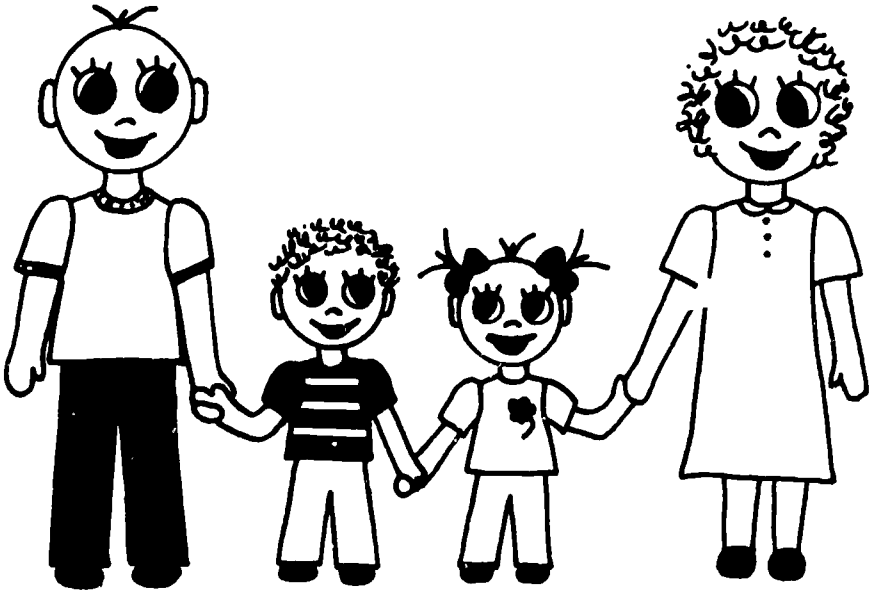
Grantee/delegate agencies must provide opportunities for parent participation in decision making, program planning, and operations.

A home-based program must make every possible effort to identify, coordinate, integrate, and utilize existing community resources and services in providing nutritional, health, social, and psychological services for its children and families. In summary, the same services which are available to children served in a center-based Head Start program must be provided to children served by a home-based program.

Appendix B

Together We Can

A full year's curriculum for
preschool children and their parents



by
Pat Nichols and Margo Koehler

Illustrated by Lori Urdiales

SEPTEMBER - 1st week

OBJECTIVES:

1. To explain the program to the family.
2. To get acquainted with the family.
3. To set up a visit time.
4. To explain the lesson plan.
5. To help the family make a "special" box for each child.
6. To discuss bus and street safety.

LEARNING EXPERIENCES:

SAFETY:

Discuss bus safety.
Discuss street safety. (Handout)

HEALTH:

Discuss health aspects of the program (physicals, dental exams, visual exams, immunizations).

NUTRITION:

Explain what food experiences are and why we use them.

SMALL MOTOR:

Explain what small motor skills are and why they are important.

LARGE MOTOR:

Explain large motor skills and their importance.
Explain that we will be doing large motor activities on home visits.
Practice crossing the street.

COGNITIVE:

Explain the lesson plan and how it is used.

LANGUAGE:

Describe the use of a language activity - a book, story, finger play, puppet story or flannel board story - during each visit. (Handout)

CREATIVE:

Decorate the child's "special" box.
Encourage parent to decorate his/her materials folder.

SEPTEMBER - 1st week (continued)

SELF CONCEPT:

Say a finger play using child's name.
Talk about using the child's name when you talk to him. (Handout)
Discuss the importance of encouraging the child to answer her name herself if she is asked.
Make a "special" box together.

INDIVIDUAL STRENGTH:

Encourage parents and child to decorate the "special" box.
Explain the importance of having a special place for the box so that the child can put his own things away.

SOCIAL:

Discuss the importance of the family in the development of social skills.
Talk about the center, the center schedule, and the importance of volunteering at the center.

BEHAVIOR GUIDANCE:

Explain the purpose of the "special" box. Discuss materials that can be kept in the box, and suggest setting limits for its use.
Help the parent to begin to feel comfortable with letting the child use the materials. (For example: colors, paper)

SOCIAL SERVICE:

Discuss children's responsibilities and safety routines.
Encourage attendance at parenting classes.
Encourage participation in all parent activities.

PARENT INVOLVEMENT:

Discuss schedules and set home visit day and time.
Explain goal setting and the importance of doing the activities during the week with the child.
Give each parent the monthly activity calendar and explain its use.
Give parent a family notebook and explain its use.
Ask the parent to go over the bus rules with the child.
If the child colors a picture, ask the parent to write the child's name on it and find a place to hang it.

S A F E T Y

Start now to talk about stop signs and stop lights.

Be sure you and your child look both ways before crossing the street.
Talk to your child about the cars. Say "Do you see any cars coming down the road? We will wait until they go by us."
Children do not have the same distance perception as we do.
They are poor at judging how far and how fast the cars are coming.

Remember to always cross at corners. This may take extra time, but it is a good safety habit to encourage.

Be sure your child does not play near traffic.

Keep reminding your child not to talk to strangers.

Red says STOP

And green says GO.

Yellow says WAIT,

You'd better go SLOW.

STOP, LOOK and LISTEN

Stop, look and listen when you cross the street.

Use your eyes,

Use your ears,

Then use your feet.

FINGER PLAYS

Finger plays are simple poems children recite while acting out motions. Finger plays are quite short, easy to learn, and are the first poems preschool children learn.

The small muscles of the hands and fingers are less well developed than the larger muscles of the body such as the arms and legs. (Children's large muscles develop before their small muscles.) Practicing finger plays helps children learn to use their fingers and handle things more easily. Finger plays also give children an opportunity to identify the thumb and fingers, to listen, to be listened to, to respond to words and to combine rhythm and movement.

Try the following finger play with your child:

"M E"

THESE ARE MY FINGERS;
(wiggle fingers)

THIS IS MY NOSE.
(point to nose)

THIS IS MY MOUTH,
(point to mouth)

AND THESE ARE MY TOES.
(point to toes)

Artwork by Lori Urdiales.

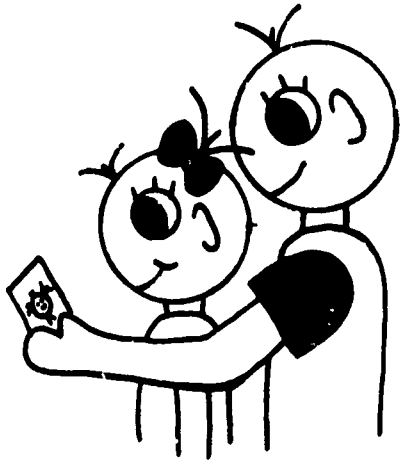
Terry Jennifer Maria Carlos

NAMES NAMES NAMES

To help your child get used to hearing his first name, always use it when you talk to him. For example, in the morning say, "Good morning, Charlie".

Use the child's first name at the beginning of a sentence such as, "Maria, please come here".

Have your child look at himself in the mirror; then point to him and say his name. Have the child say his name after you have said it.

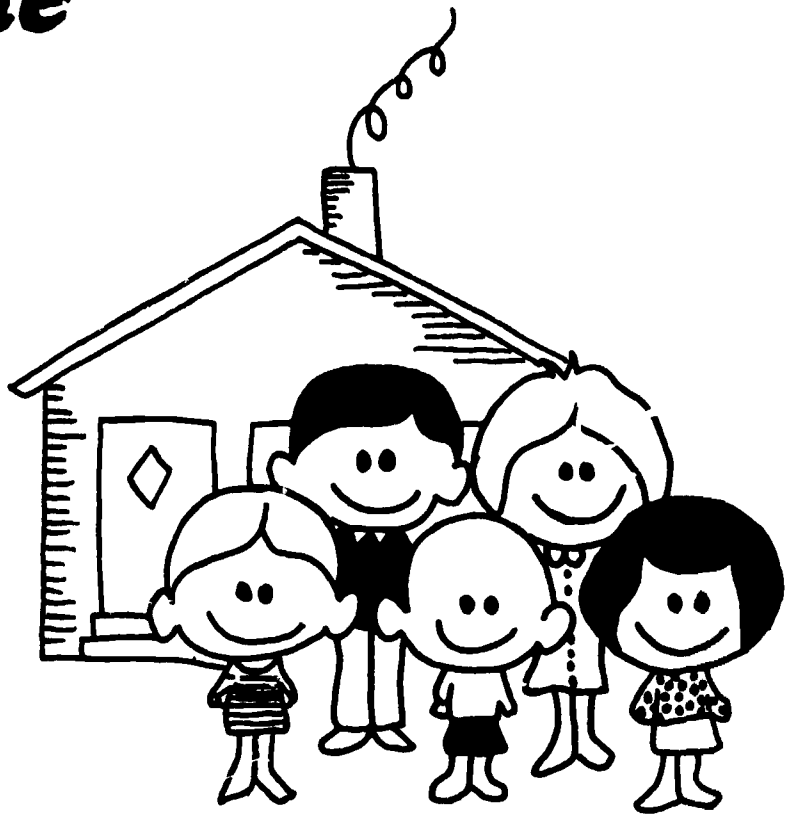


Show your child a picture of herself and ask her who it is.

By Pat Nichols and Margo Koehler. Artwork by Lori Urdiales.

HOME START

Curriculum Guide



Millville Home Start Training Center
Logan, Utah

MARCH - 3RD WEEK

Unit Title: Taste/Smell and Fruits

Justification: The ability to distinguish differences in tastes and smells enhances the enjoyment of eating. It also helps warn us of danger. (Such as spoiled foods, poisons, smelling fire.) Also being able to distinguish different smells helps us to learn about our environment. Fruits are essential for adequate nutrition. Families need information on how to prepare, store and preserve fruits.

Specific Objectives:

1. To teach parent to help their children to be aware of the differences in taste/smell.

2. To help parents teach their children about the sense of danger in regard to smell.

3. Reinforce the importance of eating fruit for good nutrition/ Basic 4.

Activities:

1. Discussion.
   A. Importance of smell to taste (enhances the taste).
   B. Stress cleanliness in food handling.
      1. Wash foods.
      2. Wash hands.
   C. Not everything that looks good, tastes or smells good, or is good for you and visa versa.
   D. Importance of eye appeal to meals.

2. Taste foods that look alike.
   A. Salt.
   B. Baking powder.
   C. Sugar.
   D. Powdered milk.
   E. Flour

3. Take bottles containing various smells - match smells.
   A. Vanilla.
   B. Lemon.
   C. Vinegar.
   D. After shave.
   E. Spices.
   F. Rubbing alcohol.

4. Pop popcorn.

5. Make applesauce (*p. 134)

6. Fry bacon.

MARCH - 3RD WEEK (Continued)

7. Field trip to bakery.
8. Field trip to greenhouse.
9. Compare real flowers to artificial flowers/smell.
10. Take snack. Reinforce nutrition, cleanliness in food handling, dental health.
11. Have child identify food tastes while blindfolded.
12. Provide handout "Fruit Recipes".
13. Find pictures in magazines of things that smell good or taste good.
14. Look at taste buds with a magnifying glass and mirror.
15. Make a fruit salad. Discuss color, shapes, textures, whole, half, inside, outside, peeling, etc.
16. Taste fruit samples--compare tastes, smells.
17. Taste salty and sweet crackers--compare tastes, smells.
18. Compare clean and dirty smells (laundry, grooming products, ammonia).
19. Smell spring smells - earth, young plant growth, rain etc.
20. Provide handout "Fruits".

Follow-up Activities for Positive Reinforcement:

1. What did you cook that was new to your family?
2. Did you fix a familiar food in a different way? What happened?
3. Ask the child what he smelled and tasted during the week.

MARCH - 4TH WEEK (Continued)

11. Make Easter bunnies from little bottles (glue cotton on baby food jars, glue on paper eyes and ears).

12. Egg rolling.

13. Table decorations out of egg shells. (*p. 129)

14. Make penguins from eggs, carrots, olives, toothpicks (*p. 134)

15. Provide handout on "Soybeans".

16. Provide handout on "Protein".

17. Provide handout on "Egg Recipes".

18. Provide handout on "Meat--Storage and Preparation."

19. Take advantage of community egg hunts.

20. Cut out and decorate colored paper in egg shape. Hang on branch for "Easter tree".

21. Eggs--how they look inside/outside, what they are, other birds' eggs, other animals' eggs.

22. Make an egg dish--eggnog (*p. 135), boiled eggs, omelet.

23. Plant seeds in egg shell.

24. Make an Easter egg lotto/matching game.

25. Story, How Chicks Are Born (by Bruce Grant, illustrated by Mary Thilldin, Rand McNalley and Company, Chicago, Ill.)

26. Large motor activities: hop like a bunny, roll like an egg, walk like a chicken or duck.

27. Make flowers from egg carton and pipe cleaners.

Follow-up Activities for Positive Reinforcement:

1. Ask if family tried any egg recipes.

2. Ask to see the flannel board story.

3. Find out special activities family did on Easter.

HOME GROWN

a home-based curriculum guide for parents and Head Start Home Visitors

ARVAC, Inc. Home Based Training
Russellville, Arkansas

JoAnn Braddy Williams
Child Development Division Director

Linda Reasoner
Home Based Training Coordinator

November, 1982

DATE:
THEME: Self Concept
TOPIC: Learning About Me

GOAL: To bring about a positive self-concept through helping the child become aware of his body and his name.

BACKGROUND INFORMATION

1. A good feeling about one's self is the beginning point for learning. Your child is "special" and should be accepted at whatever level of development he has reached in his physical, mental, social and emotional development. You should always remember "I am me, I am special. There is no one else just like me."

VOCABULARY WORDS TO STRESS:

body	self	picture
crayons	paper	special

SKILLS:

eye/hand coordination
language development

CONCEPTS:

self-image

LEARNING ACTIVITIES & EXPERIENCES

DRAWING

1. Give your child a sheet of paper and crayons. Ask him to draw a picture of himself. Tell your child to draw himself as he feels he looks to other people.

As you tell your child about drawing his picture, do not mention body parts or suggest looking in a mirror. You are trying to see if your child will include these without your help.

This picture is the first of many that your child will be doing. Save it to see how your child will be growing and learning. Put the date on it. Later you can tell how old your child was when he drew it, or how long since the last drawing.

Let your child tell you about his drawing. Tell him it is special because it is his picture.

LANGUAGE DEVELOPMENT FUN:
TALL-SMALL

Sometime I am tall,
Sometime I am small,
Sometime I am very, very small,
Sometime I am very, very tall,
Guess how I am now.

(This may be used as a guessing game. Let one child close his eyes and turn his back and guess the position of another person in the family.)

BACKGROUND INFORMATION

2. It is important that your child see his physical self. Have him look in a mirror before your child draws his facial features and clothes. If possible, look in a full-length mirror, or move the mirror up and down.

Questions you might ask are: What color is your hair? eyes? What clothes are you wearing? What color is your shirt or dress? Think of others.

VOCABULARY WORDS TO STRESS:

tallest	big	colors	facial features
shortest	little	name	

SKILLS.

cutting eye/hand coordination observation
language development

CONCEPTS:

Each child looks different from other children.

LEARNING ACTIVITIES & EXPERIENCES

LIFE SIZE PAPERDOLL

2. Use a sheet of paper as large as your child is tall. Have your child lay on the paper. With a pencil or crayon, draw around your child.

Let your child draw in his facial features and clothing. For older children, if you wish, use actual pieces of fabric or clothing, real buttons, colors, belts and other things that can be glued to the life size paperdoll. He can dress "himself." You could further assist your child in cutting out his life size picture. Print his name and hang with the picture.

If you do this activity with several family members, talk about who is the tallest, the shortest. If you wish, hang the pictures in order of size, the tallest to the shortest.

LANGUAGE DEVELOPMENT FUN:

FACES

I painted a face
That was angry
I painted the mouth
In a frown.

I painted a face
That was curious
I painted the eyes
Large and bright.

I painted a face
That was puzzled
I painted the head
Upside down.

I painted a face
That was sad
I painted in tears
And lips tight.

I painted a face
That was proud
I painted the chin
Straight and high.

I painted a face
That was happy
I painted a gleam
In the eye.

BACKGROUND INFORMATION

2. Take the children with you to the grocery store. Talk about the different jobs in the grocery store such as checking groceries, putting groceries in the bag, putting the items on the shelves, etc.

   If there is a bakery in your area, visit there. When you are in the grocery store, look at the counter where the bakery goods are kept.

   VOCABULARY WORDS TO STRESS:

   Grocery store Buy Bakery

   CONCEPTS:

   Money Buying things

   SKILLS:

   Small Finger Muscle Sequence Coordination
   Language Development

3. Children can develop number concepts in measuring the ingredients for recipes. They learn the name for cup, teaspoon, tablespoon. Also, by kneading the dough, they develop their arm and finger muscles.

   VOCABULARY WORDS TO STRESS:

   Cup Teaspoon Mix
   Knead

LEARNING ACTIVITIES & EXPERIENCES

2. Field Trip

   Go on a field trip to see where these people work.

   Ask the child to draw a picture about what she saw on her trip.

FINGER PLAY FUN

Going to the store

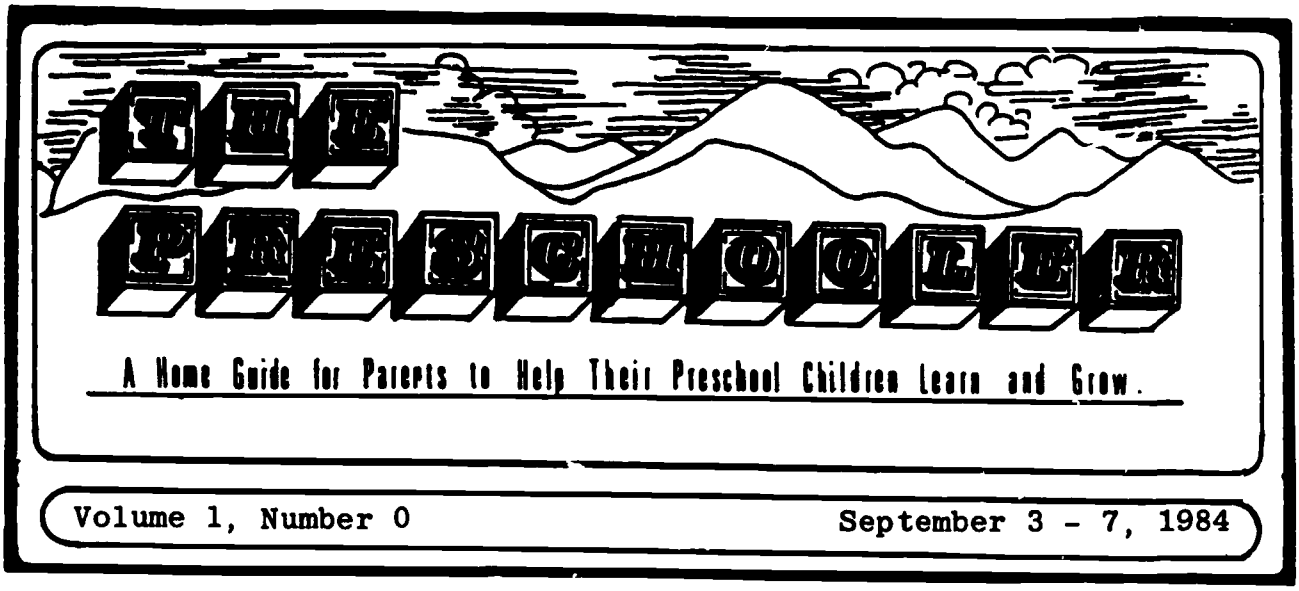
Let's open the door, go to the store
(Open door)
Let's buy some bread
(Make motion of picking up from shelf and placing in cart)
Let's buy some milk
Let's buy some meat
Let's buy some fruit
Our cart in now full! So push it thru
(push)
Pay the money and head for home.
(pay)
Yum, yum, yum, yum,
I'm glad stores sell food, aren't you?
(rub tummy)

3. **MAKE HOMEMADE ROLLS**

ROLLS OR WHITE BREAD

2 pkgs. or 2 cakes active dry yeast	1/3 cup sugar
2/3 cup warm water	2 teaspoons salt
1 1/4 quarts all-purpose flour	1/3 cup shortening
1/4 cup non-fat dry milk	1 cup water

Note: All ingredients and utensils must be at room temperature.



Volume 1, Number 0 September 3 - 7, 1984

YOUR CHILD AND SELF ESTEEM

Your preschool child's feelings about himself begins forming at a very early age. A child that has developed motivation and formed a good self-image of himself will perform better in all areas of his life.

You as a parent play a big role in the development of this "I like me" feeling. You can enhance your child's positive self-image by allowing him to be involved in some of the decision-making that affects his daily life. There are many other ways you can assist your child in building a better positive self-image such as allowing him to be independent and do for himself whenever possible, making him feel a part of the family, paying attention to what he has to say, making sure that he succeeds in activities that you provide for him and praising him when he deserves it. Allowing your child this sense of control will help him develop motivation, self-assurance and discipline.

MONDAY

ACTIVITY: Mirror, Mirror on the Wall

WHY: To help your child develop a positive self image by accepting his own and others' physical appearance.

WHAT TO DO: Have your child stand in front of a mirror and tell you what he sees. While standing in front of mirror, ask him questions such as: What color are your eyes? Where is your nose? How many thumbs do you have? Where is your elbow?

EASIER THING TO DO: Look at pictures in magazines, catalogs, or newspapers and discuss why people may have different expressions on their faces.

HARDER THING TO DO: Help the child accept his body size by discussing with him the fact that you too were small when you were his age.

WHAT YOU NEED: Mirror

INDIVIDUALIZED ACTIVITY: _____

_____

_____

_____

TUESDAY

ACTIVITY: Making Different Faces with Paper Bag Masks

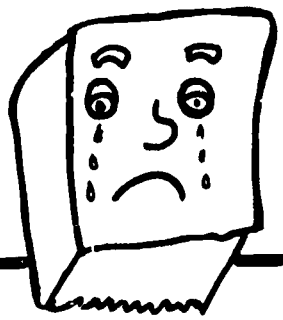
WHY: To help your child understand that it is normal to have both happy and sad feelings.

WHAT TO DO: Cut holes for eyes in several paper bags and use a magic marker to draw faces that express different feelings such as happiness, sadness and fear.

EASIER THING TO DO: Talk to your child about different ways to express feelings.

HARDER THING TO DO: Encourage your child to express different feelings by changing the tone of his voice.

WHAT YOU NEED: Paper bags, magic marker, mirror.



INDIVIDUALIZED ACTIVITY: _____

_____

_____

_____

WEDNESDAY

ACTIVITY: This Is Your Life Storybook

WHY: To help your child feel good about himself, his family, friends and surroundings.

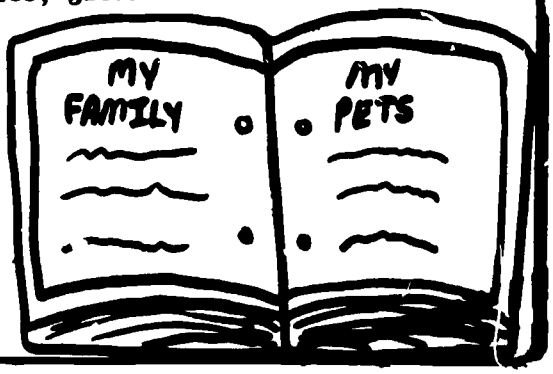
WHAT TO DO: Have your child make a storybook by folding several sheets of construction paper in half and stapling at the fold. Paste pictures of your child on the front page and write "A Story of _____'s Life."

EASIER THING TO DO: As the book is being made, discuss the different points of the child's life.

HARDER THING TO DO: Encourage your child to read his "picture" book to you, his teachers, and friends.

WHAT YOU NEED: Construction paper, scissors, pictures, glue.

INDIVIDUALIZED ACTIVITY: _____



THURSDAY

ACTIVITY: Expressing Good Feelings and Love for People in Different Ways

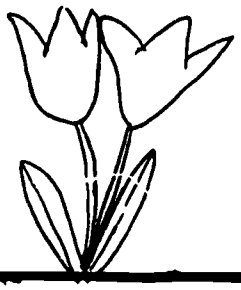
WHY: To show your child the importance of expressing good feelings and love toward others.

WHAT TO DO: Make a "picture flower" for Mom. Cut 2 or 3 cups from styrofoam egg cartons t use for blossoms, glue the cups to colored construction paper, use pipe cleaners for stems and add green construction paper for leaves.

EASIER THING TO DO: Talk to your child about how love can be expressed through touching other people

HARDER THING TO DO: Have your child to name several ways that show his love and feelings for others. Examples: touching with hands, hugging and kissing, helping with household chores, saying "I like you."

WHAT YOU NEED: Styrofoam egg cartons, glue, construction paper, pipe cleaners, scissors.



INDIVIDUALIZED ACTIVITY: _____

FRIDAY

ACTIVITY: To Show Respect for Life by Giving Proper Care and Affection for Pets

WHY: To make children aware that animals as well as people have physical differences and feelings.

WHAT TO DO: Heat a pan of animal fat, dip pine cones in hot fat and then in birdseed. Tie a string to the pine cone and hang them outside for birds to eat.

EASIER THING TO DO: Discuss with your child the different things animals do that make him feel good.

HARDER THING TO DO: Discuss the different moods and feelings of animals when they are playful, hurt, sick, mad, etc.

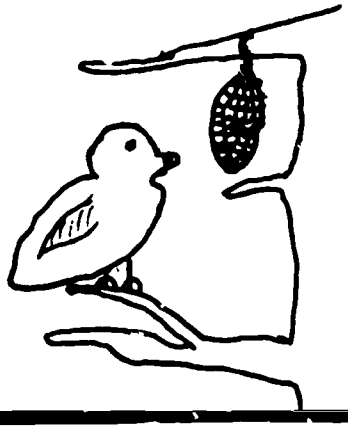
WHAT YOU NEED: Birdseed, fat, pinecones.

INDIVIDUALIZED ACTIVITY: _____

_____

_____

_____



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Preschool Associates, P. O. Box 24464, Johnson City, TN 37614

a parent's guide to early education

Portage Guide To Early Education

The following materials are available from the Portage Project.

PORTAGE GUIDE TO EARLY EDUCATION

ENGLISH	COMPLETE KIT	
	ADDITIONAL CHECKLISTS (15)	
SPANISH	COMPLETE KIT	
	ADDITIONAL CHECKLISTS (15)	
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TOTAL AMOUNT DUE _____

The Portage Project

SEND TO:
PORTAGE PROJECT MATERIALS
CESA 5
626 EAST SLIFER STREET
P.O. BOX 564
PORTAGE, WI 53901

Age	#	Behavior	Entry Behavior	Date Achieved	Comments
	55	Uses articles the, a in speech		/ /	
	56	Uses some class names (toy, animal, food)		/ /	
	57	Says "can" and "will" occasionally		/ /	
	58	Describes items as open or closed		/ /	
3-4	59	Says "is" at beginning of questions when appropriate		/ /	
	60	Will attend for five minutes while story is read		/ /	
	61	Carries out series of two unrelated commands		/ /	
	62	Tells full name when requested		/ /	
	63	Answers simple "how" questions		/ /	
	64	Uses regular past tense forms (jumped)		/ /	
	65	Tells about immediate experiences		/ /	
	66	Tells how common objects are used		/ /	
	67	Expresses future occurrences with "going to," "have to," "want to"		/ /	
	68	Changes word order appropriately to ask questions (can I, does he)		/ /	
	69	Uses some common irregular plurals (men, feet)		/ /	
	70	Tells two events in order of occurrence		/ /	
4-5	71	Carries out a series of 3 directions		/ /	
	72	Demonstrates understanding of passive sentences (boy hit girl, girl was hit by boy)		/ /	
	73	Can find a *pair* of objects/pictures on request		/ /	
	74	Uses "could" and "would" in speech		/ /	
	75	Uses compound sentences (I hit the ball and it went in the road)		/ /	
	76	Can find *top* and *bottom* of items on request		/ /	
	77	Uses contractions can't, don't, won't		/ /	
	78	Can point out absurdities in picture		/ /	
	79	Uses words sister, brother, grandmother, grandfather		/ /	
	80	Tells final word in opposite analogies		/ /	
	81	Tells familiar story without pictures for cues		/ /	

PortageGuide

language 66

AGE 3-4

TITLE: Tells how common objects are used

WHAT TO DO:

1. Show the child an object (hammer, ball, thread, scissors, etc.) and ask, "What do we do with this?"
2. Using the same procedure, present pictures instead of object.
3. If the child does not know the answer, tell it to him. Then ask the question again. "What do we do with this?"
   a. We cook on a stove, what do we do on a stove? We cook on it.
   b. What do we do with a car, cup, pencil, and chair?
4. Talk to the child as you carry out daily activities naming what you're doing with specific objects.
5. As the child goes about his daily activities ask what he's doing with objects and be sure to praise appropriate answers.

PortageGuide

Appendix C

Resources for Chapter 1
Foundations of a Home-Based Program

Adult Education Theory and Practice, Reiko T. Sakata, Technical Assistance Development System (TADS), Outreach Series Paper, Frank Porter Graham Child Development Center, University of North Carolina at Chapel Hill.

This paper examines seven areas that need to be considered in working effectively with adults. The areas are: adult education philosophy, andragogy, assumptions about adult learning, learning styles, noncognitive factors that affect learning, group process, and elements of an ideal learning environment. Each area is examined in detail and provides a conceptual and theoretical basis upon which educational activities with adults can be developed.

Help: When the Parent is Handicapped, developed and edited by Stephanie Parks, VORT Corporation, Palo Alto, California, 1984.

Parents with disabilities have often been left out or inadequately served by traditional parent training programs. This book is intended to help close this critical gap and to ameliorate parent training barriers resulting from the parent's disability or our own lack of knowledge and understanding. Alternative parent training activities are included for parents who are mentally retarded, deaf, blind, and physically disabled. These activities facilitate the development of children who are developmentally within the birth to twenty-four month age range.

Parent Effectiveness Training, Thomas Gordon, David McKay Co. or the New American Library, New York, 1970.

Parents who are having trouble communicating with their children or who find themselves in a power struggle with them are presented with methods for dealing with these problems. The book describes the Parent Effectiveness Training course developed by Dr. Gordon, in which parents learn techniques for dealing with their children so that solutions that are acceptable to both can be found. The skills are taught in a workshop or seminar course, which stresses the uniqueness of each individual, his/her relationships and needs, and the importance of a preventive approach to handling potential problems. Parent Effectiveness Training offers parents new methods for establishing mutually satisfying relationships with their children.

Parents Are Teachers, Wesley C. Becker, Research Press, Champaign, Illinois, 1971.

Parents Are Teachers has been designed to help parents be more effective teachers of their children. The program is based on teaching methods growing out of the science of behaviorism. It shows parents how to systematically use consequences to teach children in positive ways.

Partners with Parents: The Home Start Experience With Preschool Children and Their Families, compiled and edited by Kathryn Hewett, et. al. of Abt Associates, Inc., Administration for Children, Youth and Families, Washington, D.C., 1977.

This book, a compliment to the final evaluation of the Home Start project, shares experiences with families and observations of evaluators on a more subjective basis. It includes material

on management and planning issues as well as practical operations. It is geared primarily to administrators of Head Start and similar programs who are considering expansion into home-based activities, and secondarily, to child development specialists.

Teaching Parents to Teach, A Guide for Working With the Special Child, edited by David L. Lillie and Pascal L. Trohanis with Kenneth W. Goin, Walker and Company, New York, New York, 1976.

This book offers a framework for planning, organizing, and implementing parent involvement activities in early childhood programs. Its topics include: the scope of parent programs, the operation of parent programs, and resources for parent programs.

A Systematic Guide for Planning or Improving Your Family Oriented Home-Based Program, Claire Heffron and Jerry C. Johnson, Human Dynamics, Incorporated, Kendall/Hunt Publishing Company, Dubuque, Iowa, 1981.

The suggestions and insights in this manual are intended to help programs understand the complexities of the home-based program and the necessary steps leading to quality. Topics covered include: first steps in starting a home-based program, staffing, program implementation (recruitment, assessment, record-keeping), and management factors.

Specialists within each of the following OHDS Regional Offices can be of assistance in developing and operating the home-based program.

Region I

Administration for Children, Youth and Families
OHDS/DH & HS
Room 2000 Federal Building
Government Center
Boston, Massachusetts 02203
(617) 233-6450
(Connecticut, Maine, Massachusetts, New Hampshire, Vermont, Rhode Island)

Region II

Administration for Children, Youth and Families
OHDS/DH & HS
Room 3900 Federal Building
26 Federal Plaza
New York, N.Y. 10007
(212) 264-2974
(New York, New Jersey, Puerto Rico, Virgin Islands)

Region III

Administration for Children, Youth and Families
OHDS/DH & HS
3535 Market Street
P.O. Box 13716
Philadelphia, Penn. 19101
(212) 596-6676
(Delaware, Washington, D.C., Maryland, Pennsylvania, Virginia, West Virginia)

Region IV

Administration for Children, Youth and Families
OHDS/DH & HS
Room 358 Peachtree—Seventh Building
50 7th Street N.E.
Atlanta, Georgia 30323
(404) 221-2134
(Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Region V

Administration for Children, Youth and Families
OHDS/DH & HS
13th Floor
300 South Wacker Drive
Chicago, Illinois 60606
(312) 353-1781
(Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Region VI

Administration for Children, Youth and Families
OHDS/DH & HS
20th Floor
1200 Main Tower Building
Dallas, Texas 75202
(214) 767-2976
(Arkansas, Louisiana, New Mexico, Oklahoma, Texas)

Region VII

Administration for Children, Youth and Families
OHDS/DH & HS
Room 242 Federal Building
601 E. 12th Street
Kansas City, Missouri 64106
(816) 374-3282
(Iowa, Kansas, Missouri, Nebraska)

Region VIII

Administration for Children, Youth and Families
OHDS/DH & HS
Room 7417
1961 Stout Street
Denver, Colorado 80202
(303) 837-3106
(Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Region IX

Administration for Children, Youth and Families
OHDS/DH & HS
Room 143 Federal Building
50 United Nations Plaza
San Francisco, California 94102
(415) 556-7460
(Arizona, California, Hawaii, Nevada, Pacific Trust Territories)

Region X

Administration for Children, Youth and Families
OHDS/DH & HS
Third and Broad Building
2901 Third Avenue
Seattle, Washington 98121
(206) 399-0482
(Alaska, Idaho, Oregon, Washington)

American Indian Programs

Head Start Bureau, ACYF
Department of Health and Human Services
P.O. Box 1182
Washington, D.C. 20013
(202) 755-7715

Migrant Programs

Head Start Bureau, ACYF
Department of Health and Human Services
P.O. Box 1182
Washington, D.C. 20013
(202) 755-8065

Resources for Chapter 2
Framework for the Home-Based Program

Assessment of Child Progress, edited by Joan Danaker, Technical Assistance Development Systems (TADS), Frank Porter Graham Child Development Center, University of North Carolina, Chapel Hill, 1985.

In this paper four experts in the areas of assessment, curricula, and efficacy of early intervention respond to three questions: What is child progress; how can child progress be measured; and what designs or procedures should be used to determine if progress has been made?

Early Childhood Assessment: Recommended Practices and Selected Instruments, Illinois State Board of Education, Department of Specialized Educational Services, 100 North First Street, Springfield, Illinois, 1982.

This book will acquaint professionals with a variety of assessment instruments, assist them in understanding how to adapt instruments to a child's unique disability, facilitate the active involvement of the parents in the assessment process, and provide guidance for the written presentation of assessment data which is meaningful to the planning and educational process. Included is an annotated listing of selected assessment instruments (0-5 years), an annotated listing of parent assessment instruments, and guidelines for interviewing parents and for assessing young children.

Head Start Linkages—Establishing Collaborative Agreements, Parents in Community Action, Inc., Minneapolis, Minnesota, 1983.

This manual describes procedures for developing linkages with child care, health, and social service providers. Formal and informal linkages are defined. Many helpful worksheets and exercises are included to assist programs.

Screening and Assessment Tools: A Manual Discussing Appropriate Tools for Use in the Home Setting, Ohio State University, Columbus, Ohio, Herschel W. Nisonger Center, 1980.

This manual describes seven tools for use in screening and assessing the developmentally disabled infant and young children in the home. Instruments are said to have met four criteria (easy adaptation to the home setting; minimum training required to administer; speed of administration; and minimum equipment needed). Five categories of information are addressed for each instrument: basic information, administration and scoring, time required for administration, training required for administration and interpretation, and advantages/disadvantages of the tool.

Screening, Growth and Development of Preschool Children: A Guide for Test Selection, Sharon R. Stangler, Cathee J. Huber, and Donald K. Routh, McGraw-Hill, New York, 1980.

This book presents a systematic approach to the assessment of developmental screening tests which will help screeners compile information essential to knowledgeable test selection. The book is not designed to teach how to administer individual tests; its intent is to demonstrate how professional accountability can be exercised in the selection of screening tests.

Resources for Chapter 3
Construction of the Home-Based Program

An Activities Handbook for Teachers of Young Children, Doreen J. Croft and Robert D. Hess, Houghton Mifflin Company, Boston, 1985.

Activities in this handbook are grouped into the following areas: art and woodworking, music, drama and movement, math experiences, language arts, the physical world, health and safety, cooking and nutrition, computers for preschoolers, and themes. Each activity includes relevant background and discussion material, activity format, helpful hints, a bibliography, and an art program.

Building Families. A Training Manual for Home-Based Head Start, Mary Ellen Spockman, Home Start Training Center, Logan, Utah, 1985.

This manual explores the home-based option from start to finish including: philosophy, recruitment, development of a partnership, problem solving, record-keeping, and supervision.

A Guide for Operating a Home-Based Child Development Program, U.S. Department of Health & Human Services, Publication No. 85-31080, 1985.

This guide offers tested ideas and procedures helpful to organizations wanting to offer home-based services. Included are suggestions on various factors that should be considered before deciding to offer home-based services, the major components of a comprehensive program, and recommendations concerning such important matters as involvement of related community resources and selection and training of home visitors.

Get a jump on kindergerten, A. Frohman, K. Wollenburg, Portage Project, CESA #5, Portage, Wisconsin, 1983.

A compilation of activities which will facilitate transition into kindergarten. This booklet is designed for parents and contains many helpful suggestions.

Head Start Home Visit Curriculum, Out Wayne County Head Start, Wayne, Michigan, 1981.

The focus of this curriculum is developmental in nature, addressing the total child in areas of physical, intellectual, social, and emotional growth. Twenty-seven home visits are outlined plus outlines for birthdays, Halloween, Thanksgiving, Christmas, and Valentine visits. A bibliography, sample forms, materials and supply lists are also included.

Home Grown—A Home-Based Curriculum Guide for Parents and Head Start Home Visitors, ARVAC, Inc., Home-Based Training, Russellville, Arkansas, 1982.

This curriculum guide provides home visitors ideas and information to assist in preparing for home visits. Twenty-seven topics are included with activities appropriate for 3-4-5 year olds. The lesson plans are designed to teach health, nutrition, and educational skills.

Home Start Curriculum Guide, Lori Roggman, Carol DeBolt, Jo Davis, Joyce Wagner, Pauline Glance, and Joyce Stokes, Millville Home Start Training Center, Millville, Utah.

This curriculum guide represents the collective efforts of the home visiting staff of the Millville, Utah Home Start Training Center, formerly one of the 16 national Home Start demonstration programs funded by the Office of Child Development (now Administration for Children, Youth, and Families). These home visitors, or family educators, have pooled knowledge and experience gained during a 5-year period to present numerous activities for implementing yearly goals relative to the four Head Start components—education, health, social services, and parent involvement—and for staff training. This manual contains a week-by-week plan on how to achieve these goals and objectives by suggesting numerous activities for weekly home visits. The appendix lists additional activities such as art ideas, recipes, fingerplays, stories, songs, etc.

How to . . . A Handbook for Head Start Home-Based Visitors, Home Start Training Center, Parkersburg, W. Virginia.

This handbook based upon years of experience with home-based programs is written for home visitors. It includes: recruitment, the home visit, totable materials, dealing with family problems, record keeping, parent activities, and group socialization.

Mainstreaming Preschoolers Series, The Administration for Children, Youth and Families, Washington, D.C.

The Administration for Children, Youth and Families has developed a series of eight program manuals detailing the procedures and techniques for mainstreaming handicapped preschoolers into Head Start classrooms. These manuals are distributed free of charge to local Head Start programs, and individual copies are available to Head Start parents with a handicapped child. Copies to local Head Start agencies or parents are available through the Resource Access Projects. Other agencies desiring copies of the manuals to help them mainstream preschool handicapped children should order the manuals directly from the Government Printing Office.

On Your Mark . . . Get Set . . . Go! (An Orientation Process for New Home Visitors), Home Start Training Center, Parkersburg, W. Virginia.

This booklet is written for supervisors to assist them in orienting new home visitors. It describes a three week orientation process with daily activities.

Out of the Nest: Instructional Strategies to Prepare Young, Exceptional Children for the Mainstream, John Melcher, Jenny Lange, Jim McCoy, and Al Kammen, Wisconsin State Department of Public Instruction, Madison, Wisconsin, 1979.

This list of skills and strategies is the result of two workshops held in Wisconsin in the summer of 1979, which focused on issues and concerns related to mainstreaming young handicapped children. The survival skills compiled here are not concept-oriented ("can name five farm animals") or perceptually-oriented ("knows under, over, and behind") or reading-oriented

("recognizes three lower-case ':tters"). While concepts, perceptual skills, and reading readiness are important, they are not sufficient for kindergarten success. It is not so much what a child is taught but how the child perceives him/herself as a learner that can make the difference.

Parent-Focused Home-Based Head Start Handbook for Home Visitors, edited by Jordana D. Zeger, Portage Project, CESA #5, Portage, Wisconsin, 1984.

This handbook provides home visitors the information and skills necessary to successfully plan and implement home visits. It is based on the Portage Model for Home Teaching and is divided into three parts: General Content (parent-focused programming, planning and implementing the home visit); Skill Development (developmental checklists, behavioral objectives, task analysis, activity charts, home visit reports); and Training Handouts.

A Parent's Guide to Early Education, S. Bluma, M. Shearer, A. Frohman, J. Hilliard, Cooperative Educational Service Agency #5, Portage, Wisconsin, 1976.

The *Parent's Guide to Early Education* is a special edition of the *Portage Guide to Early Education*, designed especially for use by parents in teaching their own children. Parents have always been the primary educators of their children, and this curriculum assists them by providing an outline of skills acquired by children during the preschool years and suggestions for teaching these skills. Detailed instructions tell parents how to complete the checklist, choose a behavior, teach the skill, and maintain the child's interest.

A Planning Guide to the Preschool Curriculum, Anne R. Sanford, et. al., Chapel Hill Training—Outreach Project, Chapel Hill, North Carolina, 1983.

This guide offers forty-four curriculum units. The lessons in each unit include a group lesson, music, art, snack, fine motor activities, games, storytelling, gross motor activities, cognitive activities, enrichment activities, and a field trip. Also included are chapters on curriculum development, the unit approach, methods and principles, specific skills, and charting unit group lessons.

Portage Guide to Early Education, CESA #5, Portage, Wisconsin, 1976.

The *Portage Guide to Early Education* is the complete developmental curriculum used by the Portage Project in working with handicapped and/or normal children of mental age up to six years. The curriculum is presented in three parts: (1) a Checklist of Behaviors, which includes 580 developmentally sequenced behaviors divided into six areas (infant stimulation, socialization, self-help, language, cognition, and motor). Each area is color-coded to match cards and includes an information log for listing additional child information; (2) a Card File containing 580 cards which are color-coded to match the checklist and divided into the same six developmental areas, and suggestions for teaching the behaviors (cards come in a vinyl carrying case); and (3) A Manual of Instructions describing the use of the Portage Guide and ways to develop and implement curriculum goals. Each guide contains 15 checklists. Additional checklists can be ordered in packets of 15.

Portage Parent Program, Richard Boyd, Kathleen Stauber, and Susan Bluma, CESA #5, Portage, Wisconsin, 1977.

The *Portage Parent Program* was designed to help parents of preschool and primary-grade children acquire effective child management and teaching techniques. Topics such as setting objectives for the child, reinforcing behaviors, recording information, and encouraging family involvement are included in the comprehensive parent readings. An instructor's manual delineating topics such as how to present the parent program, various strategies for initiating and maintaining parental discussions, and ways to assure maintenance of the parental skills developed provides information for the teacher working with parents and children in the program.

The Preschooler, Preschool Associates, Box 24464, Johnson City, TN 37614.

The Preschooler is a weekly guide designed to be used by parents, home visitors, teachers, and aides. Each weekly guide consists of two parts: a Home Guide for Parents to Help Their Preschool Children Learn and Grow, and a Home Guide of Activities for Home Visitors, Teachers, and Aides to Help Preschool Children Learn and Grow. It is published for 36 consecutive weeks beginning in September of each year.

Resources for Creative Teaching in Early Childhood Education, Bonnie Mack Flemming, Darlene Hamilton, and JoAnne Hicks, Harcourt Brace Jovanovich, Inc., New York, 1977.

This resource handbook deals with a variety of subjects grouped under the general headings of Self-Concept, Families, Family Celebrations, Seasons, Animals, Transportation, and The World I Live In. The practical, scannable format includes teacher resources, additional facts the teacher should know, methods for introducing each subject, center ideas, and an extensive bibliography.

Serving Handicapped Children in Home-Based Head Start, DHHS Publication No. (OHDS)82-31169, 1980.

This manual is for home visitors working with children with special needs. The manual describes procedures for recruiting, screening, assessing, diagnosing, and implementing a home-based program for children with handicapping conditions.

Together We Can—A Full Year's Curriculum for Preschool Children and Their Parents, Resources for Children, Youth and Families, P.O. Box 1469, Scottsbluff, Nebraska.

The intent of all home visits and consequently of this curriculum is to help parents learn better parenting skills and enable them to be better teachers of their own children. Activities in the curriculum place a strong emphasis on incidental learning, teaching through everyday interactions, and activities of parents and children.

Without Spanking or Spoiling: A Practical Approach to Toddler and Preschool Guidance, Elizabeth Crary, Early Childhood Bookhouse, Portland, Oregon, 1979.

Without Spanking or Spoiling adapts information from several major child-raising philosophies specifically for use by parents of toddlers and preschoolers. It deals with: why scolding and spanking may increase the very behavior you want them to decrease; how to avoid common pitfalls when praising children; how to substitute an acceptable behavior for an unacceptable one; how to build an effective consequence for unacceptable behavior; and how some day-to-day decisions may sabotage long-term goals for your child.

Workjobs, Mary Baratta-Lorton, Addison-Wesley, Menlo Park, California, 1972.

Workjobs are learning tasks in the form of manipulative activities built around a single concept. Activities fall into the categories of Language (perception, matching, classification, sounds, letters) and Mathematics (sets, number sequences, combining and separating groups, relationships). Each activity includes getting started, ideas for follow-up discussion, and materials needed.

Resources for Chapter 4
Finishing Touches for the Home-Based Program

Child Abuse and Neglect: A Self-Instructional Text for Head Start Personnel, DHEW Publication No. 77-31103, Department of Health and Human Services, October, 1977.

Although not a recent publication, this self-instructional text provides basic information about child abuse and neglect. It simplifies the technical language found in the professional journals and is specifically written for Head Start personnel who come from a variety of training backgrounds and experiences. A reference source is provided for personnel who wish more information.

Child Abuse and Neglect: Everyone's Problem, Shirley O'Brien, Association for Childhood Education International, Wheaton, Maryland, 1984.

This 32-page book gives an informational overview of child abuse and neglect: definitions, scope of the problem, types of abuse and neglect, reporting responsibilities, and long-term solutions.

Exploring Parenting, DHEW Pub. No. (OHDS) 79-31137, Administration for Children, Youth and Families, Head Start Bureau, Washington, D.C., 1978.

The *Exploring Parenting* program is designed to help Head Start staff work with parents to help them become more aware of the parenting skills they possess, to enhance these skills, and to expand the choices which parents have in their parenting roles. Twenty content sessions represent a step-by-step process through which parents can examine themselves as individuals and as parents.

Guidance of Young Children, Marian Marion, C.V. Mosby Co., St. Louis, Missouri, 1981.

This paperback is based on the assumption that adults want to help children learn to control themselves, to like and value themselves, and to be humane, caring, competent, and helpful. Based on sound theory and research, it also offers a great variety of practical suggestions.

Living With Children, Gerald R. Patterson and M. Elizabeth Gullion, Research Press, Champaign, Illinois, 1968.

All children misbehave—even in the best of families. But problem behavior can make life miserable for both parent and child. This book was written by two behavioral scientists to give every parent and teacher a practical technique to deal with children's misbehavior. It is written in down-to-earth language and was tested with many families before publication.

Nurturing Program for Parents and Young Children Birth to 5 Years Old, Stephen Bavolek and Juliana Dellenger Bavolek, Family Development Resources, Inc., 767 Second Avenue, Eau Claire, Wisconsin.

This is a validated home-based program to teach parents and their children appropriate parenting and nurturing skills. It includes 45 individual home-based sessions, an activities manual, and a family resource handbook. All sessions can easily be adapted for group meetings and children 2-1/2 years and older. Supplemental materials available include audio-visuals, games, books, and dolls.

100 Ways to Enhance Self-Concept in the Classroom, Jack Canfield and Harold Wells, Prentice-Hall, Englewood Cliffs, N.J., 1976.

Excellent list of activities designed to enhance one's sense of identity and self-esteem. Each activity has been classroom tested and is practical. The authors suggest that anyone who works with people will find the book a valuable resource of ideas that will help them in the creation of learning environments that are positive, caring, supportive, and growth promoting.

Perspectives on Child Maltreatment, DHHS Publication No. (OHDS) 84-30338, U.S. Department of Health and Human Services, April, 1984.

Perspectives is a collection of 19 articles about child abuse and neglect written by experts in the field. Also included are reporting responsibilities and procedures, and a list of bibliographic information and brief annotations on manuals, reports and other publications of the National Center on Child Abuse and Neglect that deal with various aspects of child maltreatment.

Talking About Touching with Preschoolers, Committee for Children, 172 20th Avenue, Seattle, Washington, 1984.

This self-contained preschool personal safety curriculum uses laminated drawings with accompanying lessons to teach young children about touching, saying no, and telling. It is designed for children ages 3-5, but many of its lessons and concepts can be used with younger children.

The following organizations can provide additional information and resources on child abuse and neglect:

National Committee on Child Abuse and Neglect
P.O. Box 1182
Washington, D.C 20013

National Committee for Prevention of Child Abuse
332 South Michigan Avenue
Suite 1250
Chicago, IL 60604-4357

National Center for the Prevention and Treatment of Child Abuse and Neglect
University of Colorado Medical Center
1205 Oneida St.
Denver, Colorado 80220

American Humane Association
Children's Division
P.O. Box 1266
Denver, Colorado 80201

Parents Anonymous
National Office
2810 Artesia Boulevard
Redondo Beach, California 90278

National Committee on Child Abuse and Neglect
P.O. Box 1182
Washington, D.C. 20013

American Humane Association
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