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ABSTRACT

This guide provides ideas and procedures to help agencies in providing services to children and families through the home-based program option of Head Start. It is designed to assist program administrators who are beginning Head Start Home-Based programs for the first time as well as those seeking to strengthen existing programs. The chapters are: (1) "Planning for the Delivery of Services," including home visits, community outreach, meeting home-based requirements, staffing, and budgeting; (2) "Program Implementation," describing the activities of the director, home visitors, and supervisor along with aspects of group socialization such as facilities, transportation, environment, appropriate practice, and parent participation; and (3) "Program Review and Monitoring." Appendices include sample job descriptions, sample forms, and a listing of community and training resources. (BGC)

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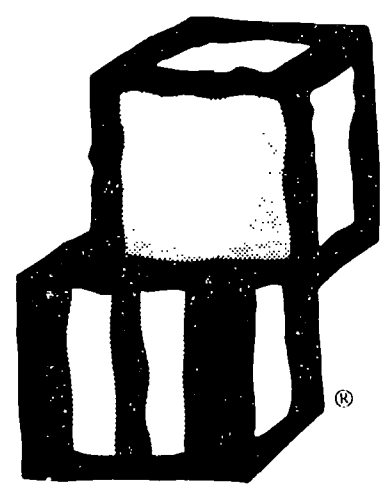
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A Guide for Operating the Head Start Home-Based Program Option

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INTRODUCTION

A Guide for Operating the Head Start Home-Based Program Option represents years of experience and the best practices of Head Start programs across the country. Its purpose is to offer the guidance derived from those years of experience: effective and successful ideas and procedures that may be helpful to agencies providing Head Start services to families through the home-based program option.

Specifically designed to assist administrators, this Guide provides essential information to support and guide the local grantee through planning, implementing, and evaluating the Head Start Home-Based Program Option. This information should be considered seriously when planning to provide Head Start services through the home-based option. The sequence of topics has been chosen to support the grantee in the process of developing and submitting the grant application package.

In Chapter 1, a description of the unique features of the Head Start Home-Based Option is followed by specific suggestions for a careful planning process.

Chapter 2 discusses program implementation with regards to the activities of the director, the home visitors, and the home-based supervisor. These include the integration of the option into the totality of the Head Start program as well as into the greater community. Also included is a discussion of record keeping and all necessary documentation.

Program evaluation is the topic for Chapter 3 as it provides a brief look at program review and monitoring. Details about the use of the On-Site Program Review Instrument (OSPRI) are provided with the special concerns that home-based programs have in the monitoring process.

The Guide contains several helpful Appendices. Sample job descriptions and sample forms ease the administration's burden of start-up by providing an initial point of departure. Community and training resources list suggestions for reaching beyond the grantee level.

The Guide is intended to assist program administrators who are beginning a Head Start Home-Based Program for the first time as well as those who may be seeking to strengthen an existing program. These successful ideas and effective procedures can help administrators in their daily operation of this Head Start home-based program option.

GLOSSARY

Center-Based Program Option	Head Start services provided to children primarily in classroom settings.
Child Development Associate (CDA)	An individual who has successfully completed a CDA assessment and has been awarded the CDA Credential. A CDA is a person who is able to meet the specific needs of children and who, with parents and other adults, works to nurture children's physical, social, emotional, and intellectual growth in a child development framework. The CDA conducts himself/herself in an ethical manner. The CDA has demonstrated competence in the CDA competency goals through his/her work in a home environment.
Combination Program Option	Head Start services provided to children in both a classroom setting and through intensive, regularly scheduled visits with the child's parents and family in the home.
Community Needs Assessment (CNA)	Gathering information about the geographical area in which Head Start services would be provided, and analyzing the information for implications for Head Start services.
Family Action Plan (FAP)	A tool used to help the family decide what specific actions or strategies need to be taken to resolve their needs and to achieve their goals based on the Family Needs Assessment.
Family Needs Assessment (FNA)	A tool for collecting information efficiently and effectively and for helping the Head Start program plan and provide services to enrolled families.
Group socialization activities	Sessions in which children and parents enrolled in the home-based or combination program option interact with other home-based or combination option children and parents in a Head Start classroom, community facility, or parent's home, or on a field trip.
Home-Based Program Option	Head Start services provided weekly to children primarily in the child's home, through intensive work with the child's parents and family as the primary factor in the growth and development of their child.
Home-Based Supervisor	Provides direction and support to home visitors through positive reinforcement, training, feedback, new information, and evaluation to ensure that programmatic tasks are carried out smoothly.
Home visits	Visits made to a child's home by a home visitor to assist parents in fostering the growth and development of their child.
Home visitor	The staff person assigned to work with parents to provide comprehensive services to children and their families, primarily in the child's home through home visits.
In-service training	Generally refers to support of skill development for groups of staff. This training should be interactive between learning and practice, delivered on or close to the grantee site, and reinforced over time.

OSPRI	On-Site Program Review Instrument.
Parent education	Opportunities for Head Start staff and families to increase their skills in education and parenting, as well as in other areas.
Policy Committee	Set up at the delegate agency level when the program is administered in whole or in part by such agencies.
Policy Council	Decision-making body at the grantee level made up of parents of Head Start children enrolled in the grantee program, plus representatives of the community, that must approve the home-based program.

CHAPTER 1

Planning for the Delivery of Services

A program is only as good as the planning that precedes its implementation.

Since 1965, Head Start has played an important role in addressing the changing needs of children and their families. Head Start believes gains made by the children in the program are enhanced through family and community involvement. The Head Start Home-Based Program Option facilitates this involvement by offering greater opportunities for meeting the needs of families and children within the child's primary environment, the home.

Head Start home-based services began in 1972 to demonstrate approaches to providing comprehensive Head Start services to parents as the most important educators of their children. In 1973, the Head Start Home-Based Program Option became available to all Head Start programs. Since then, the Head Start Home-Based Program Option has provided an opportunity for parents to influence the education and development of their children. Some advantages of home-based services are:

- Emphasis is placed on supporting and encouraging family goals and objectives, strengthening self-sufficiency;
- Parents are directly involved in the development and education of their children;
- Parents are strengthened in their capacity to support the general development of their own children;
- Greater continuity in children's experiences enhances the likelihood that children will grow to their maximum potential physically, cognitively, emotionally, and socially; and
- Broader opportunity for families to learn about strategies and resources that can increase their potential as a functioning unit.

In the Head Start Home-Based Program Option, home visitors serve as facilitators, educators, and support systems for parents and families, and as important links to the local community. There are several basic features upon which an effective home-based program depends:

- Commitment by the staff to the philosophy of parent participation, parents as partners, parents as prime educators of their children;
- Regular and consistent contact with parents;
- Effective and appropriate information exchange;
- Cultural sensitivity and respect; and
- Honest, interpersonal relationships.

Evaluation results show that the home-based program option is effective for both parents and children. Conditions which assure success in home-based programming include:

- ***Individualized instruction.*** Serving each child and family at home enhances the chances for individualization. Individualization is encouraged by setting goals and objectives for the child and family and by the one-to-one attention that is given during home visits. The home visitor and parent use their knowledge of the family and the child to plan appropriate activities.
- ***Learning occurs in the natural environment.*** The home offers the right setting for learning basic self-help skills. This is the environment where the child's basic needs must be met. Therefore, a program that emphasizes the parent's-role-as-teacher helps the parent to meet these needs and use all aspects of the home environment for the child's benefit.
- ***Opportunities to observe parent-child interaction.*** Working with the child and parent at home makes it possible to observe and enhance parent-child interaction. The home visitor is in a good position to help parents become effective teachers and managers of their child's behavior.
- ***Parents can generalize learned skills.*** The child management techniques that parents learn to use with the enrolled child can be applied to other children in the family.
- ***Direct parent involvement.*** Parent involvement is required in the home-based program option. The parent learns to teach the child whenever and wherever the opportunity arises. A home visitor shares teaching skills and activities with the parent for use in daily activities and interactions with their children. The Head Start Home-Based Program Option is parent-focused as the parent is trained to deliver services to the child.
- ***Family involvement.*** Home-based programs have the advantage of total family involvement. Parents, siblings, and other household members can participate. Providing family members with positive, growth-enhancing experiences can create a healthier emotional climate for the whole family.
- ***Developing home-school linkages.*** Parents who have learned to successfully teach their child at home are more likely to continue working with their child once she/he enters school. Skills taught are reinforced and expanded upon by parents in the home. Home-based service gives parents confidence in their teaching and parenting ability.

KEY ELEMENTS OF THE HEAD START HOME-BASED PROGRAM OPTION

Head Start agencies must address and integrate all Head Start program component areas—education, health, social services, and parent involvement—through a combination of weekly home visits and group socializations. Trained home visitors apply their knowledge about child development, appropriate childrearing, community resources, and health education when planning activities with families. They support the philosophy that children learn about themselves, each other, and the world around them primarily through play and interacting with each other and the adults in their lives.

Services are delivered through the combination of four basic strategies:

Home Visits

Home visits are conducted weekly by skilled home visitors. The home visit is planned the previous week jointly by the home visitor and the parents. The content is based on the identified needs and interests of the child and family. (See description of Family Needs Assessment and Family Action Plan in Chapter 2 of this guide.) Home visitors and parents must conduct the home visit with the participation of the legal guardian or other primary caregiver in the home. Home visits may not occur with only babysitters or other temporary caregivers in attendance.

The purpose of the home visit is to help parents in fostering the growth and development of their child using the home as the child's primary learning environment. The home visitor works with parents to help them provide learning opportunities that enhance their child's growth and development. The

home visit must, over the course of a month, contain elements of all Head Start program components. The home visitor is the person responsible for assuring that comprehensive services are available.

Group Socialization Activities

These activities are planned for the parents and children. They take place in many settings such as classrooms, community facilities, homes, and field trips. Parents and children benefit from getting to know each other while engaged in a variety of learning experiences. Parents watch their children playing with other children and discuss the developmental issues observed. Peer group interaction is always emphasized, tailored to children's interests in developmentally appropriate ways. Children can develop friendships and social skills. Parents interact with each other as they observe children in the same age range as their own, and interact with the children. The Home Visitor is in charge of these groups rather than a teacher or other stranger.

Focus on Parent Education

Head Start parents are offered many opportunities to increase their understanding and skills in parenting young children. Head Start component areas addressed in parent education may include child development, parenting, medical, dental, and mental health, social services, and parent involvement. This information is often discussed during home visits, group socialization activities, parent meetings, and/or parent training sessions.

Parents are encouraged to participate in the agency's decision making through the center committee (delegate agency) or policy council (grantee agency). Additionally, parents plan and conduct other social and educational activities for themselves.

Community Outreach

Community Outreach enhances home-based services by establishing cooperative agreements and relationships with numerous local agencies. These agencies provide direct or indirect help to families in home-based programs. Assistance is provided to families in all component areas—education, social services, health, and parent involvement. Families learn how to access community resources. The home visitor and the Head Start program serve as the supportive link between the family and the community agencies. Appendix C describes Community Resources in detail.

Head Start requires considerable planning, both in selecting the program option that matches community needs and in administering it after the decision is made. The next section describes the process of reaching the decision to offer the home-based program option.

SELECTING THE HOME-BASED PROGRAM OPTION

The Policy Council of the Head Start agency—administrators, parents, and community members—undertakes the task of considering whether the home-based program option is appropriate for the community. The Policy Council or Committee evaluates its local feasibility by taking these steps:

- Conduct and analyze a Community Needs Assessment, according to 45 Code of Federal Regulations (CFR) Part 1305.3;
- Consider geographic and other factors, such as parent needs and interests; and
- Assure that community members, policy groups, staff, and parents understand the three Head Start Program Options.

It is important that services are tailored to meet the needs of families involved in Head Start by focusing on the main issues. The videotape *Head Start at Home*, available from the Head Start Bureau, provides an excellent overview of the home-based program option and is of value in the decision-making process.

The questions raised in Figure 1-1 (below) should be reviewed:

**FIGURE 1-1: KEY QUESTIONS FOR ANALYZING
THE LOCAL NEEDS ASSESSMENT FINDINGS**

Solid, positive answers to these key questions should be considered before effective home-based services can be provided.

1. Does the Community Needs Assessment show clear community interest and need for home-based Head Start services?
2. Are there enough eligible families interested in participating in a program that emphasizes home visits and the role of parents?
3. Can staff be hired who already have the skills and interests to work effectively with parents in their homes? If not, does the agency have, or can it get, the training necessary to prepare staff for new roles? Are staff members culturally and linguistically compatible with the families?
4. Can transportation be arranged?
5. How can a staff get full and regular involvement of parents? How can family members who are away from home during the day be involved in a home-based program?
6. How would this option affect those involved? Children? Families? Staff?
7. Which type of program option best addresses the community needs as well as individual needs of families and children? Is a home-based program the most effective for the entire family?
8. What obstacles or barriers are known? What else might arise?

A number of individual family considerations are of prime importance in determining whether a family should participate in the program. Among these are:

- Working hours for family members may require special scheduling of home visits.
- Child care needs may create complications for working families.
- Responsibilities for care of others in the household may make it difficult, if not impossible, to devote blocks of time for home visits.
- Children's ability to function well in group settings for extended periods of time vary. Is the child better served in the home? Parents may have strong preferences for their children.
- The stress level of the family, such as the stress of being a new arrival to the United States, may indicate a need for the home-based option.
- For some cultures and in some families, home visits are thought of as an invasion of privacy. Families may feel they have enough "official visitors" already. Others might worry that the home visitor will report them to the public assistance department, for example.

Any decision to pursue the Head Start home-based program option includes whether to offer only the home-based option, a combination model, or the center-based option.

Grantees may decide to carry out a Combination Program Option which includes center-based class sessions and home visits. The amount of contact with children and families must be, at a minimum, equivalent to the services provided through the Center-Based Program Option or the Home-Based

Program Option. Acceptable combinations of minimum number of class sessions and corresponding number of home visits are outlined in Head Start Staffing Requirements and Program Options, (45 CFR Part 1306), with examples of various configurations of program operations. This Guide does not provide guidance for programs operating the Combination Program Option.

The home-based option should not be selected because it appears to be more economical per child since parents carry out most child development efforts. Although there may be only one child enrolled in the program, siblings, neighbors, and friends may benefit from the services to the family as well. Other savings may be realized on rent, utilities, and food services. Staffing costs may change. Any projected savings in these areas, however, may be offset by increased transportation costs, expenses to assure the safety of home visitors, or increased insurance expense.

EFFECTIVE PLANNING

Effective planning, based on the Home-Based Program Option philosophy, is key to launching the program and assuring that the community and the families are receptive to the option.

Involve as many knowledgeable people as possible in designing and developing the local plans and policies that guide operation. To increase the likelihood of community acceptance and support of the home-based option, solicit input from:

- Parents;
- Staff;
- Policy Council members;
- Governing and advisory board and community agency representatives; and
- Consultants.

The earlier the program receives their input, the more supportive they will be in implementing the program.

Adopting Head Start Program Goals and Objectives

The success of a home-based program is enhanced by careful design and a clear statement of goals and objectives. As part of the planning process, goals and objectives are selected and stated, within the context of the *Head Start Program Performance Standards* (45 CFR 1304) and the "Suggestions for Strengthening the Home-Based Program Option" (see Appendix A in the *Head Start Home Visitor Handbook*).

Goal setting as a three-tier process reflects outcomes from:

- The Community Needs Assessment;
- Individual family needs assessments; and
- Individual child screenings and assessments.

An essential aspect of this process is the involvement of parents, and the development of a partnership between the home visitor and parents (see the *Head Start Home Visitor Handbook* for specific ideas).

Clear and concise goals and objectives help staff, parents, and community members understand the program. Accomplishing some objectives, and establishing new ones, systematically moves the program toward its goals.

Evaluation of home-based services helps to determine the degree to which the program is moving satisfactorily toward its stated goals and accomplishing the agreed upon objectives.

As you plan to implement the Home-Based Program Option, keep in mind that the four Head Start components—education, health, social services, and parent involvement—must be addressed in a

FIGURE 1-2: EXAMPLES OF HEAD START HOME-BASED PROGRAM GOALS

- To bring about a greater degree of social competence in the children.
- To assist parents in fostering the growth and development of their children.
- To enhance the sense of dignity and self-worth within all family members.
- To establish patterns and expectations of success for the child and all family members.
- To improve the family's attitude toward health care and the development of wellness habits.
- To increase the ability of all family members to relate to each other and to others.
- To increase the family's understanding of child growth and development.
- To support and encourage the family's goals and objectives, attaining and/or strengthening self-sufficiency.

balanced way. No single component is emphasized at the neglect of others. The following are examples of appropriate long-range program goals for each of Head Start's four components.

Education services. In the home-based program option, emphasis is placed on helping parents enhance their children's intellectual and physical development. Parents have the major responsibility for carrying out the home-based option with the assistance of the home visitor. Therefore, there is an important and continuing need to motivate parents to support their young children toward the overall goal of social competence.

An assessment of each child's and family's status assists home visitors and parents to select objectives to match individual and family needs. Appendix C lists community resources that may support education goals.

FIGURE 1-3: EXAMPLES OF EDUCATION COMPONENT GOALS

- To increase parents' awareness of how to make the most of daily activities (doing laundry, travel, shopping, meal preparation) as learning experiences for children.
- To assess the educational strengths and needs of family members.
- To provide families with information and materials on developmentally, individually, and culturally appropriate educational experiences for young children.
- To add to parents' knowledge and understanding of early childhood development.
- To identify items in the home that can be used for learning toys and games.
- To increase the ability of parents and children to use their own resources (language, time, money, space, energy) to their best advantage.
- To help parents encourage their children's appropriate behaviors.
- To encourage families to relate to their children in positive ways that support children's development of self-control.

Health services. Head Start's health component includes a full range of services covering physical and mental health, dental health, nutrition, and family safety. Home visitors make an important contribu-

tion by sharing health information. This enables the family to become more self-sufficient and healthy. Appendix C lists community resources that relate to these sample health goals.

FIGURE 1-4: EXAMPLES OF HEALTH COMPONENT GOALS

- To assure that children have regular, comprehensive physical, mental, and dental health examinations.
- To identify specific health concerns in the family (such as early identification of possible disabilities, detection of dental caries) and to help family members get needed services.
- To provide information, advice, and help as necessary to assure that all family members are immunized.
- To support families' desires to follow through with treatment and services to maintain good health according to their culture.
- To stimulate community health resources to be more responsive to the needs of young children and their families.
- To link families with community health resources which are responsive to the needs of young children and their families.
- To provide health education materials and discussions that benefit all family members.
- To assess with parents the nutritional needs of family members, and to provide information and referrals as needed to develop healthy eating practices.

Social services. Social services include all social and human services such as public assistance and adult education. Approaches toward linking families to these services stress positive child development and prevention. Providing services families need and want encourages a productive home atmosphere. Home-based programming services develop from a thorough assessment of individuals. All families want success for their children and may need to seek community resources such as those identified in Appendix C.

FIGURE 1-5: EXAMPLES OF SOCIAL SERVICES COMPONENT GOALS

- To increase family awareness of community, social and psychological services—employment, counseling, housing, drug abuse prevention, job training, diagnostic testing.
- To help in finding and/or providing transportation to and from these resources.
- To encourage isolated families to increase their social ties within the community.
- To help families identify their own needs and seek services on their own.
- To enhance parents' understanding and encouragement of their children's social and psychological development.
- To intervene appropriately during a crisis.

Parent involvement. In the home-based option, parents are expected to play an active role in all activities. As the program develops, parents exercise their role as decision makers on the Policy Council as well as in other meaningful ways. The program must provide for the continued involvement of the child's parent.

Home visitors and parents plan weekly activities to meet the individual needs of each family served.

FIGURE 1-6: EXAMPLES OF PARENT INVOLVEMENT COMPONENT GOALS

- To add to parents' knowledge and understanding of child development, early childhood education, and community resources.
- To increase parents' planning and problem solving skills as regards family issues.
- To stimulate parents' to take an active role in planning, implementing, and evaluating their home-based program.
- To help parents reach career goals and get basic educational skills.
- To strengthen parents' self-esteem through participation in social activities.
- To increase parents' knowledge and appreciation of their cultural heritage.
- To provide opportunities for parents to solve problems and decide about their home-based program, as outlined in *Head Start Program Performance Standards*, Appendix B, 1-30-70.2.

Overlap among the four component areas is encouraged and should occur naturally with culturally appropriate activities.

The *Head Start Home Visitor Handbook* and training resources included in Appendix D offer further ideas for planning home visit activities.

Meeting Home-Based Program Requirements

All Head Start agencies must provide comprehensive services, as defined in the *Head Start Program Performance Standards*.

The *Head Start Program Performance Standards* (45 CFR 1304) document contains information about the overall goals and objectives of the Head Start program. These standards are the basis for providing quality individualized services to families; however, agencies must recognize and understand the following points:

- The *Head Start Program Performance Standards* are written from a center-based program option perspective. Head Start agency staff and policymakers must translate the *Performance Standards* into a more parent-focused, family-centered approach for use with the home-based program option. The *Suggestions for Strengthening the Head Start Home-Based Program Option*, Appendix A in the *Head Start Home Visitor Handbook* (Thomas & Pizzolongo, 1993) provides extensive directions for developing a parent-focused, family-centered program.
- Home visitors should use the *Head Start Program Performance Standards* to develop the service activities needed for each family. Many of the *Performance Standards* objectives call for agencies to provide services when needed (such as crisis intervention, help with housing). Home visitors and parents identify goals, objectives, and activities that are appropriate for the family in support of the *Performance Standards* objectives as the need arises. Some of the objectives call for services to be provided to all families or children (for example, encouraging children to solve problems, hearing testing). Home visitors and parents can adjust plans and goals as changes take place.

As with other Head Start program options, the home-based program option must provide comprehensive, coordinated services in education/child development, medical and dental health, nutrition, mental health, social services, and parent involvement. Component plans should reflect an integration of services.

In addition to the *Head Start Program Performance Standards*, there are specific requirements for the home-

based program option. Administrators should refer to the Head Start Staffing Requirements and Program Options (45 CFR Part 1306) for information on meeting these home-based requirements.

Specific minimum requirements for the Home-Based Program Option include the following:

- Provide one home visit per week per family lasting for a minimum of 1 1/2 hours each.
- Provide, in a variety of settings, a minimum of two group socialization activities per month for each enrolled child.
- To meet the above-stated minimums, make up planned home visits or scheduled group socialization activities that the grantee or program staff canceled. Medical or social service appointments may not replace home visits or scheduled group socialization activities.
- Allow staff enough time on the job to participate in training, to plan and set up the program at the start of the year, to close the program at the end of the year, to maintain records, and to keep component and activities plans current. These activities should take place when no home visits or group socializations are planned.
- Maintain an average caseload of 10 to 12 families per full time (40 hour work week) home visitor with a maximum of 12 families for any home visitor.

Incorporating the Multicultural Principles

Grantees are expected to include the *Multicultural Principles for Head Start Programs* (IM-91-03) which are especially applicable to the home-based program option. These 10 principles are to guide all component services for Head Start children and families. The implications of these principles for working with speakers of languages other than English are especially valuable.

FIGURE 1-7: MULTICULTURAL PRINCIPLES FOR HEAD START PROGRAMS (ACYF—IM-91-03)

1. Every individual is rooted in a culture.
2. The cultural groups represented in the communities and families of each Head Start program are the primary sources for culturally relevant programming.
3. Culturally relevant and diverse programming requires learning accurate information about the culture of different groups and discarding stereotypes.
4. Addressing cultural relevance in making curriculum choices is a necessary, developmentally appropriate practice.
5. Every individual has the right to maintain his or her own identity while acquiring the skills required to function in our diverse society.
6. Effective programs for children with limited English speaking ability require continued development of the primary language while the acquisition of English is facilitated.
7. Currently relevant programming requires staff who reflect the community and families served.
8. Multicultural programming for children enables children to develop an awareness of, respect for, and appreciation of individual cultural differences. It is helpful to all children.
9. Culturally relevant and diverse programming examines and challenges institutional and personal biases.
10. Culturally relevant and diverse programming and practices are incorporated in all components and services.

Among the major administrative tasks are staffing, recruitment of families, training for staff and current parents, locating office space for home visitor staff and space for socialization activities, budget and record keeping. Although budget setting precedes some of these steps in administrative planning, it is discussed last to build a more complete picture of the factors that must be included in the budgeting process for this option.

Staffing the Program

Staffing for the home-based program option is unique. Staff are not expected to be experts in a particular discipline, but generalists—persons who facilitate and work with adults in understanding and carrying out their roles as primary educators and facilitators of child growth and development.

Hiring a home-based supervisor. A person should be designated to supervise home visitors. Filling this position first makes it easier to proceed with staffing the rest of the program. A maximum ratio of one home-based supervisor per 10 full-time home visitors is suggested.

If five or fewer home visitors are needed, a half-time supervisor may be enough. Many agencies which operate successful home-based programs find that a ratio of one supervisor to six home visitors is a key to quality. The ratio depends on the capabilities of the home visitors, the number of families they serve and the kinds of problems they meet. Today's highly stressed families may present overwhelming challenges to home visitors who are not supported with adequate supervision and the strong skills of the supervisor.

Frequently, this position will be filled from within the ranks of Head Start staff. If no qualified staff is available, the process will follow local program procedures for recruiting and selecting supervisory staff.

When hiring a home-based supervisor, some important aspects to consider are:

- Knowledge of Head Start requirements specific to the Home-Based Program Option and the Head Start program in general;
- Supervisory skills;
- Knowledge of adult learning and family dynamics;
- Knowledge of child development and individual and cultural learning styles, health and nutrition education, and social services;
- Crisis intervention skills;
- Commitment to advocacy and parent involvement;
- Awareness of information-and-referral networks;
- Skills in human relations;
- Training skills; and
- Ability to communicate (including bilingually, if home visitors and clients speak a language in addition to or other than English).

The *Home-Based Supervisor's Guide* (Heffron & Noble, 1993) outlines specific responsibilities for this position. A sample job description is in Appendix A. Briefly, the home-based supervisor should take a leadership role in designing and implementing the program. As a member of the management team, the home-based supervisor coordinates her role and tasks with the appropriate staff. Among the administrative functions carried out by the home-based supervisor are:

- Budget recommendations;
- Staff selection and orientation;
- On-going training, supervision, and support of home visitors;
- Coordination with component coordinators to integrate all components;
- Facilitation of activities;
- Staff evaluation;
- Advocacy for families, staff, and volunteers;
- Assure that home-based parents are represented on the Policy Council; and
- Compliance with Head Start requirements.

Importance of supervision. Effective supervision cannot be accomplished solely from a grantee or delegate office. As noted in the next chart on the characteristics of an effective supervisor, a significant part of the program director's, supervisors', and coordinators' time is devoted to working with home visitors, reviewing reports, providing component overview, and assuring quality service. Proper supervision requires extensive supervisory preparation, including familiarity with the needs and strengths of each staff member, continuing familiarity with the home visitor's specific situations, and appropriate practice in early childhood, health education, nutrition education, mental health, and social services.

The supervisor observes home visits and group socializations on a regular basis to assure that quality services are delivered. Supervisors can see first-hand where additional training is warranted. They gain a realistic appraisal of difficulties encountered by home visitors. On-site supervision brings to light situations affecting the home visitor's accomplishments or need for supportive help.

Directors, component coordinators, and other agency specialists gain valuable insights from occasional home visits. These enable them to decide about the home visitor's training and evaluation. Discussions of achievements and accomplishments, as well as areas for improvement, can focus on first-hand, shared experiences. (Please refer to the *Home-Based Supervisor's Guide* for additional information on supervision in the home-based program option.)

Figure 1-8 outlines some responsibilities of an effective supervisor:

FIGURE 1-8: AN EFFECTIVE SUPERVISOR...

- Regularly and frequently observes staff in action.
- Provides support, feedback and required assistance or training.
- Organizes observations so performance feedback is useful.
- Encourages staff to develop their own plans, ideas, and solutions.
- Provides a self-assessment process for each staff member.
- Recognizes that when a staff member cannot or will not improve performance, termination is the most appropriate response.
- Resists pressures to adjust job standards when those standards are based on current early childhood theory and practices.
- Provides support to parents.

(Adapted from *A Guide for Education Coordinators in Head Start*, available from the Head Start Bureau)

Home-based supervisors are a critical link between home visitors and component coordinators. They assure that component coordinators regularly attend home visitor staff meetings. They support and guide home visitors in implementing the comprehensive services of the program.

Component coordinators provide quality input when they are familiar with the families being served and the capabilities of the home visitors. Thus, they should accompany home visitors, as appropriate, to get a better feel for the strengths and needs of the families and home visitors. As specialists they are a resource for engaging in mutual planning of activities tailored to each family. They help the home visitor assure that services are provided in each component. They also help home visitors keep abreast of the wealth of emerging information about education, health, social services, and parent involvement both within and beyond Head Start.

Regular two-way exchanges of information between component coordinators, supervisors, and home visitors assure the highest quality of services for families.

Recruit and select home visitors. The home-based supervisor should be included in the recruitment and hiring of the home visitors. When home visitor jobs are available, each job opening is announced on a sheet of paper suitable for posting. Ads in local newspapers also generate responses. Announcements need to include the following:

- **Program description.** Although earlier press releases may have described the home-based program, a clear, accurate description is repeated. People can then decide if they are interested in applying for a position.
- **Nondiscrimination policy.** Head Start is an Equal Opportunity Employer, and this information is stated clearly in all job opening announcements.
- **Nature of work, compensation, and opportunities.** A summary of the job description (see Appendix A), salary or salary range, benefits, and brief indication of training and career development opportunities are part of the announcement. Access to a licensed, insured car, in good working order, will make a visitor's work much more efficient. If a valid driver's license and access to a car are job requirements, contact your local or state employment services agency for assurances that these requirements follow Equal Employment Opportunity and Human Rights Regulations.
- **Qualifications.** Briefly state the qualifications required.

Characteristics of competent home visitors. There is much to learn about selecting people who can work effectively with the variety of situations they will meet as home visitors. In general, the emphasis in hiring has been on friendly attitudes, relevance of culture, and language backgrounds to those they will serve. Home visitors are usually selected because of exceptional personal qualities they have shown in their work, their reputation in the community, and the impressions they make in the hiring interviews.

Some qualities of successful home visitors are listed here in random order to guide hiring decisions. For further lists, see the *Head Start Home Visitor Handbook*.

- Personality;
- Ability to relate with many different people;
- Maturity;
- Flexibility;
- Empathy;
- Motivation;
- Sensitivity;
- Health;
- Education;
- Confidentiality; and
- Culture and language.

Head Start hiring practices and facilities must also be in compliance with the guidelines included in the Americans with Disabilities Act that took effect in 1992 and the Rehabilitation Act of 1973.

During the screening and interviewing process it is important to remember that people with professional training in health, education, and social services may be needed for some staff positions. However, highly motivated parents and others from the local community without such training but with related life experiences can be effective home visitors. The program may want to enroll staff in the CDA Home Visitor training as soon as possible. A home visitor's individual career development plan can incorporate improvement of reading and writing skills. Be cautious in hiring home visitors with

limited literacy skills who may need special help with planning their visits, finding and using resources, and record keeping.

Applicants should be aware that home visitors travel constantly and work with a variety of adults and children. Many families face serious challenges, so the work can be physically and emotionally demanding.

Serving Families in the Home-Based Program Option

New agencies, as well as those converting all or part of their center-based programs, must determine how many families can be served in the home-based option. Full-time home visitors can prepare for, visit, and follow-up on between 10 to a maximum of 12 families per 40 hour work week.

In setting up individual case loads, consider:

- Transportation;
- Likelihood of family turnover;
- Location of community resources including facilities for group socialization;
- Local and individual situations; and
- Distance home visitor must travel.

All Head Start staff, in addition to the home visitors, will need training in the Home-Based Program Option. Component coordinators, home-based supervisory staff, and Policy Council should be included. All will need to know the philosophy of the home-based option and understand the differences and similarities in center-based and home-based options. For specifics regarding training of all groups, see Chapter Four of the *Head Start Home-Based Supervisor's Guide*.

Recruitment. The Social Services component staff is responsible for recruitment of Head Start families. However, home visitors assist in the recruitment process by:

- Helping to develop the agency recruitment plan;
- Providing names of potentially eligible families; and
- Identifying siblings, relatives, or neighbors of current enrollees.

An effective promotional campaign emphasizes that both home- and center-based programs have different but equally valuable ways to deliver Head Start services. This campaign reaches the community in general, and target families in particular. The program's purpose, goals, and objectives—what can be expected of home-based Head Start—are of interest.

Parents who participated in home-based services in another grantee's program may be the most successful sales representatives for a new option. They could sit on a panel with other parents or child development specialists. They could conduct practical question-and-answer sessions with small groups of interested parents. Slide-tape or video presentations often generate enthusiasm. *Head Start at Home* and *Partnership With Parents* are videos to orient parents, staff, and the community.

Designing a Staff Development Program

Training has always been emphasized in the Head Start program. Training should include:

- Home visitors and component staff;
- Parents and volunteers;
- Orientation to the home-based option, emphasizing the focus on parents and the role of the home visitor as an adult educator;

A Guide for Operating the Head Start Home-Based Program Option

- Pre-service training, designed at the local level to include the Head Start components, program history, philosophy, and skills building prior to the beginning of the program year; and
- In-service training in all facets of the program: components, supervision, administration, financial management, program philosophy.

Training plans should be in writing and funds allocated to assure the proper implementation of the program option.

Staff development. The importance of training for the home-based option cannot be minimized. One of the keys to the success of the program is how well staff are trained for what they are to accomplish. Training is necessary for the self-image, confidence, and competency of the staff. Parents respond better to home visitors who are confident and competent. Viewing the video, *Partnership With Parents*, available from the Head Start Bureau, may enhance pre- or in-service training efforts. For the staff, nothing promotes success quite as much as feelings of competence.

Pre-service and in-service training are critical to staff development. Initial staff screening interviews identify strengths and weaknesses to address in training. After hiring new staff, orientation meetings familiarize them with Head Start's goals, objectives, and specific home-based strategies. Staff should attend workshops before the beginning of each service year to further their professional development. During the year, staff should attend local, state, and national professional conferences. They take part in other training opportunities at local agencies and colleges.

Staff professional development is encouraged both as individuals and as a group. Individual career development plans are outlined and maintained by the home-based supervisor. Technical assistance is available both to individuals and groups. Subscriptions to high quality professional publications and a library of books, videos, and brochures are maintained.

Staff training is competency based and incorporates concepts and skills from all Head Start component areas. Agencies conduct this training during pre- and in-service sessions as part of a career development program for home-based staff. Often, training encompasses the Child Development Associate (CDA) functional areas. Home-based supervisors and other resource persons support home visitors through observations, conferences, accompanying home visitors as often as needed, and through other forms of technical assistance. Head Start agencies also support home visitors by providing time and space for them to meet with each other, share concerns, problem-solve, and conduct other activities. Home visitors also visit other types of home visit programs, such as visiting nurses' programs and home visit programs for teen mothers (see the *Head Start Home Visitor Handbook* and *Home-Based Supervisor's Guide*). Each home visitor should have his/her own copy of the *Head Start Home Visitor Handbook*.

As stated in the Head Start Staffing Requirements and Program Options 45 CFR (1306.23), "all Head Start grantees must provide pre-service training and in-service training opportunities to program staff and volunteers to help them gain or increase the knowledge and skills they need to fulfill their job responsibilities. This training improves the ability of staff and volunteers to deliver services required by Head Start regulations and policies."

"Head Start grantees must provide staff with information and training about the underlying philosophy and goals of Head Start and the program options being implemented."

Parent education. Opportunities for parent training/education are on-going in the home-based program option through parent participation during home visits, group socializations, parent meetings, field trips, and grantee program activities. Specific parent education sessions are provided in all the Head Start component areas: child development/parenting, medical health, dental health, nutrition, mental health, social services, and parent involvement.

Parents are constantly learning as part of their participation in the program. Managers must anticipate parent needs and interests, and find ways to help families pursue their goals as parents and adults.

Head Start programs provide parent-information brochures, videos, and magazines. Current contact lists—for adult education programs, community workshops and services, cultural opportunities, and calendars of local events—are some of the items included in Head Start's resource bank for families. Through parent involvement and educational activities, parents develop leadership, social, and other skills.

It is important that the supervisor meet with the home visitor on a regular basis to ensure that the home visitor is working with each family on the broad issues of self-sufficiency.

The administrative staff, with input from home visitors and parents, design the agency training plan for staff, parents, and volunteers to meet the broad programmatic goals and the more specific individual objectives.

The work environment for the home-based staff is unique. The discussion that follows should help administrators in their planning.

Arranging the Work Environment

Office space is required for all Head Start staff, and this includes home visitors whose needs are unique and whose schedules are tight. Home visitors cannot be expected to equip their cars or homes to conduct business and make telephone calls. Therefore, the following needs should be considered when providing for home visitor office space. Home visitors need access to:

- Work space;
- The component coordinators;
- Their supervisor;
- Other home visitors;
- A telephone;
- A copy machine;
- A computer;
- A private conference area;
- Group meeting space;
- Storage space for:
 - Professional resource materials (books, audio tapes, and videos)
 - A few toys (the regular use of commercial toys is discouraged)
 - Materials and resources not found in the home
 - Equipment (camera, tape player, video tape machine); and
- Confidential file space for records:
 - FNAs (Family Needs Assessments)
 - FAPs (Family Action Plans), including referral and follow-up information
 - Child health and education records
 - Home visit plans
 - Group socialization plans
 - Volunteer records.

Each agency devises its own system for maintaining records and limiting access to assure that

confidentiality is maintained for staff and the families they serve. The section titled "Documenting the Head Start Home-Based Program Option" offers some suggestions.

Preparing a Budget

Budgets respond to local needs. Among the items included in budgets are:

- Salaries and benefits;
- Training for staff, parents, and volunteers;
- Insurance;
- Transportation costs;
- Safety assurances;
- Equipment and materials;
- Office expenses; and
- Group socialization expenses.

Each section is described in detail.

Salaries and benefits. Salary and benefit packages for home visitors should be in line with comparable local positions and at least equal to center-based teacher salaries with similar education and training. Starting pay schedules may vary according to experience, background, education, and other factors, but there must be sound reasons for salary decisions and differences, including recognition that home visitors' salaries may be even higher than those of teachers with similar credentials because home visitors must be responsible for all components.

Individual career development plans make it possible for employees to improve their capabilities, upgrade their responsibilities, and increase their salaries. Like most employees, Head Start staff usually view pay raises as signifying they are doing their jobs well. Appropriate raises and expected increases in benefit costs are included in each year's budget.

Training for staff, parents, and volunteers. Funds for orientation, pre-service and in-service training must be included in the budget. Expenses will need to be set aside for consultants, registration fees, training facilities if needed, copying materials, travel per diem and miscellaneous expenses. Remember to budget funds for parents, staff, and volunteers to attend local, regional, and national training conferences.

Insurance. Insurance is essential. The home-based program option staff are included in the typical agency health insurance, retirement, and unemployment package. However, providing adequate coverage becomes far more complicated for home visitors, especially when staff use their personal cars to transport families. Ask home visitors to check with their insurance company about securing additional vehicle insurance to use their car for transporting families.

Liability insurance for the Head Start staff who visit homes can protect the program against potential law suits that might arise from any staff member's actions or activities. Liability insurance also may be required to qualify the program to use or rent space for group socializations.

Worker's Compensation Insurance is important to protect employees who may be injured in the line of duty, and to limit the program's liabilities in such cases.

Home visitors may face peril in nearly any neighborhood, from inner cities to rural areas. Insurance coverage for home visitors, program materials, and vehicles is essential. All Head Start agencies should develop and follow program policies to assure home visitor safety.

Head Start grantees should work with insurance companies to determine whether group or joint policies might be helpful, to specify which types of insurance are needed, and to get the best coverage for the expense.

Transportation costs. Travel is a major expenditure in home-based programs. Grantees should keep the following expenses in mind:

- Transportation for weekly home visit and group socialization activities;
- Reimbursement for consultants' travel expenses; and
- Transportation to attend local, regional, and national training meetings.

One significant result of so much daily travel that may be overlooked is the wear and tear on home visitors' cars. Grantees might consider the purchase of four-wheel drive vehicles to reach families whose homes are in difficult to reach areas.

Safety assurances. Safety is another issue that could have cost ramifications. Therefore, grantees should consider the following:

- Two-way communication system (radio or phone) for cars of home visitors. This will help locate assistance, if necessary, and locate home visitors who are not required to report to the central office daily.
- A prominent HEAD START HOME VISITOR sticker.
- Tote bags with the Head Start logo. This conveys a distinctive message.

Home visitors who live in the neighborhood may have practical ideas about their daily travel. Some home visitors have regular personal contact with law enforcement officers to build security. Police can help identify areas that are potentially dangerous. A few grantees provide cellular phones or beepers so home visitors can stay in touch with program headquarters in case of an emergency. The home-based supervisor must have a schedule of every home visitor's whereabouts (see the *Head Start Home Visitor Handbook*).

Each agency needs to develop a plan for assuring staff safety. Mandatory training on personal safety should be a part of that plan. Resolving issues around liability is another critical aspect. Developing safety policies in the planning period insures a proactive stance before a crisis arises.

Equipment and materials. Operating a home-based program may require the purchase of expensive items like cameras, tape recorders, and videotape players. These will be used frequently so usage will dictate how many of each item is needed. The grantee should ensure that enough equipment and materials are available for each home visitor to efficiently carry out the objectives of the program.

Some standard consumables such as paper and art materials will be required. You can keep down costs for some popular items like puzzles by encouraging home visitors and their supervisor to scout thrift shops, and/or to ask for specific donations from businesses and service groups. Incorporating homemade teaching materials can provide parents with important information about using resources in the home as well as reduce costs.

Food items are needed for snacks and meals when appropriate. Most recipes used for nutrition education should focus on food and ingredients that the family has in the home. Programs should supplement as necessary.

Office expenses. Each visitor will need office work space, with a desk and access to a telephone, copier, and computer. Though home visitors spend much of their time on the road, each needs a spot to call his/her own. Housing home visitors together will foster peer exchange and a feeling of ownership for the program.

Group socialization expenses. Occasionally there are expenses associated with conducting the group socializations. Typically, these expenses are for space to house the group, snacks and meals provided during the group socialization, and additional transportation costs.

Developing the Grant Package

Careful planning of each category in the budget insures that the home-based program begins with a firm foundation. Plans made in developing the grant package to meet the *Head Start Program Performance Standards* and the Home-Based Program Option requirements will ease the change from program planning to program implementation. Putting a lot of time and effort into effectively planning the details of the Head Start Home-Based Program Option will increase the chance of its success.

Developing the grant package to submit to the Regional Office for Head Start funding provides an opportunity to reach consensus on how to deliver services in an interdisciplinary way. One of the first steps is to contact the Head Start Regional Office to get copies of Regulations and all Information Memos related to the home-based program option. The Program Specialist may suggest a nearby agency that can serve as a mentor to an agency beginning the home-based program option. Getting to know the neighbors can be a big help.

Regardless of your experience level with the Home-Based Program Option, keep it simple when developing your grant package. Write component plans and objectives that define the delivery system you have chosen—the home-based program option. If this is the first time you are submitting a home-based program option grant package, a detailed description of the plan's goals and objectives is needed. If this is a refunding/update year, the grant package can be less detailed. Referring to "Suggestions for Strengthening the Home-Based Program Option" can help you at any stage in developing a simple grant package.

CHAPTER 2

Program Implementation

Every day, staff strive to help families reach the goals they set for themselves and their children.

When all the administrative pieces of the plan are in place, and staff have completed their pre-service training, the program is ready to get underway. In this chapter, we consider the basic components of the program from an administrator's point of view.

THE HOME VISIT PROCESS

Home visits allow parents and staff the opportunity to form a partnership. The major purpose of home visits is to help parents improve their parenting skills and assist them in the use of the home as the child's primary learning environment. As parents learn to understand their children better, they begin to understand themselves better. This reciprocal learning sets the stage for family change.

Home visits must be well-planned with a definite purpose for each family. Advance planning is done by the parents and home visitor based on the Family Needs Assessment (FNA) and Family Action Plan (FAP) and other documentation as well as weekly discussions. Helping families select clear goals and plan activities is one of the first things home visitors learn to do, and needs to be a training priority.

Supervisors work closely with each home visitor to help him/her focus on reasonable, achievable goals that include the objectives of:

- The Family Needs Assessment;
- Family interests; and
- Program objectives.

The goals/objectives determined by the parents and home visitors become the curriculum. The first home visit is usually informal, but it sets the stage for all future visits. The objectives of the first visit are to:

- Verify the family's eligibility, if necessary;
- Observe the family's general home environment;
- Begin to establish rapport and put the family at ease;
- Reinforce/clarify information about program implementation parents may have received through recruitment or orientation; and
- Introduce the *Head Start Program Performance Standards*.

Screening and Assessment

An essential aspect of the home-based option is the screening and assessment process. The Family Needs Assessment enables Head Start agencies to determine the needs of the families and children served. A Family Action Plan, developed jointly by the home visitor and parents, serves as the dynamic "master plan" from which each home visit is planned. The *Head Start Home Visitor Handbook* describes

these processes in detail. In combination, these plans establish the background for the program's meeting the needs of the community and the families served. Appendix B: Sample Forms includes sample Family Needs Assessments and Family Action Plans. The Model Family Needs Assessment is available from the Head Start Bureau.

Although many elements of home visits are the same, such as the focus on parents and integration of the four Head Start components, each is also different. The differences depends upon family needs and interests. Flexibility is essential in planning and carrying out the plans. To know how to tailor the Family Action Plan and specific activities, home visitors constantly learn more about the families they serve. Information collected about adults and children during the first few visits will be supplemented with that gathered through shared experiences.

With every contact, home visitors become better acquainted with the learning environment in each home and with community resources. In time, other insights develop. They witness how families cope with daily problems, and how, with the right kind of support, they can reach the goals and objectives they have established.

Screening and assessment of children's health and development are essential to provide individualized information. This information is used for determining whether referrals for further evaluation are recommended, and for planning purposes. The home visitor and the parents help the children prepare for, and take part in, the screening and assessment process.

Health screenings must be completed within 45 days after a child's entry into Head Start. Home visitors work with the health coordinator and parents to arrange and schedule screenings. Some require the expertise of specialists, such as dental and physical exams. Others, such as vision and hearing screenings, are conducted by professionals or by trained home visitors and parents.

Developmental screening. Developmental screening provides an overview of children's skills. Such evaluations, short and limited in scope, show whether further assessment is advised.

Any instrument selected by a program should be reliable, valid, and suitable for the children (see Meisels, 1985).

Developmental assessment involves regular systematic observation and documentation of what a child does and says. The assessment should be complete—addressing all areas of child growth and development, as well as including children's daily activities. The areas of child development normally addressed in the assessment process are:

- Fine and gross motor development;
- Self-help skills;
- Language development;
- Cognitive development;
- Creativity;
- Self-discipline;
- Self-concept; and
- Social development.

Unlike screening instruments, assessment instruments are usually criterion-referenced (see National Head Start Bulletin, Number 43, January, February, 1993). Rather than being compared to a hypothetical "norm," the child is compared only to himself or herself as he or she is assessed on mastery of each skill. The sequence of skills used in developmental assessment procedures generally is based on a normal progression of skills learned by children.

Home visitors use a variety of methods to conduct developmental assessments. As with other elements of the Home-Based Program Option, this process involves parents. Home visitors work with parents to get information from them about their children's developmental status and to include them in observation and documentation procedures. (See Chapter Two of the *Head Start Home Visitor Handbook* for further information.)

Family Action Plan. After the Family Needs Assessment and child health and developmental

screenings are complete, home visitors work in partnership with the family to outline a Family Action Plan. Parents and home visitors are jointly responsible for the design, implementation, and evaluation of the plan. Head Start coordinators each contribute in their areas of expertise.

These are some of the elements typically included in Family Action Plans:

- Determining and building on family strengths;
- Realistic goals, listed in order of priority;
- Dates to achieve each goal;
- Resources within community and neighborhood;
- Steps to take toward goals;
- Who is responsible for carrying out each step;
- Actions taken;
- Progress record; and
- Assessment of outcome.

Weekly plans are designed to address specific goals identified by the family and home visitor. Each visit is scheduled and planned by the parents and home visitor. Activities are selected, materials are collected (from within the home whenever possible), and arrangements are made to get together at a convenient, regular time each week. Information is recorded on the appropriate planning form for parents and for the visitor.

FIGURE 2-1: RECOMMENDATIONS TO KEEP HOME VISITS PARENT-FOCUSED

These recommendations, derived by J. Ronald Lally from home visitors' experiences, are helpful in guiding supervisors who evaluate and direct the day-to-day operations.

- Work primarily with the parents, not the child.
- View emotional and cognitive development as integrated, rather than separate.
- Plan mostly informal activities, rather than formal "lessons."
- Concentrate on helping parents and siblings find enjoyment in the activity. (Children will naturally enjoy developmentally appropriate experiences.)
- Broadly define the home visitor's role to be that of parent advocate.
- Keep home visitors focused on the goal of helping parents to become more independent and self-sufficient.
- Stress that home visitors help families select the childrearing style that matches the family situation and builds on family strengths.
- Help home visitors realize that evaluation is a tool to help them keep track of their accomplishments and thus to do a better job.
- Encourage home visitors to share their ideas for in-service training topics.
- Define the limits of the program well enough so that home visitors can help families find the services most suited to their needs.

Head Start Components

The success of the Head Start program is due, in part, to its provision of comprehensive services. These are provided through the four Head Start components: education, social services, health, and parent involvement. The integration of these components is a coordinated effort with other Head Start staff.

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An occasional brief review of the *Head Start Home Visitor Handbook* (1993), and the *Head Start Program Performance Standards*, either individually or as part of in-service training, is a valuable way to keep daily program plans on target. In addition, supervisors and component coordinators should review home visit plans to assure that all four Head Start components are covered during a month. This helps to assure program quality as well as meet the *Head Start Program Performance Standards*.

Although home visitors are not expected to be experts, they are informed sufficiently to identify problems, or potential problems, facing families and what steps to take to help families solve problems. For example, they should know when to involve component coordinators for assistance and when to make referrals.

Education services. The principal purpose of home visits is to build parental skills in fostering their children's development. The education component includes learning activities that involve both adults and children.

Family literacy plays a dominant role in planning and carrying out the home-based program. Literacy issues affect Head Start families. For example, one issue pertains to English speakers who have limited skills in reading and writing. These families will undoubtedly require advocacy efforts from their home visitors in filling out forms and seeking information.

Another issue involves families who speak languages other than English. These families are best served by a home visitor who speaks the language preferred by the family. "Introducing English too early may be done at the expense of children's language development, cognitive development, and even their relationships with their families" (*Everyone Counts*, 1993). Whenever possible, children's home languages should be strengthened so children understand ideas first in the language most familiar to them. When families understand the importance for giving children a good foundation in their first language, they support this approach.

Health services. Head Start broadly considers children's medical/dental/nutrition and mental health in this component. Many home visitors serve families who are dealing with multiple sources of stress that overlay Head Start's health and social services areas. Domestic violence, child abuse and neglect, substance abuse, alcoholism, AIDS and other chronic illnesses are among these many sources of stress.

Mental health. Parenting is in many ways a primary mental health effort. Therefore, when home visitors model sound parenting techniques and work with families to carry out a positive discipline approach, they are providing mental health services. *Mental Health in Head Start: A Wellness Approach* (Hansen, 1990), provides home visitors with guidelines in this area.

Activities listed below can be involved in promoting good mental health:

- Note signs of abuse or neglect of any family member, and reporting possible concerns to the supervisor. 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 (*Head Start Prevention, Identification, and Treatment of Child Abuse and Neglect Revised Policy Instruction, 1984, and Transmittal Notice 77.1*).
- Suggest that families participate in parent support groups sponsored by Head Start or other community agencies.
- Help parents become familiar with the prenatal effects, and effects on adults, of various substances—encourage families to enroll in substance abuse prevention program.
- Follow agency procedures for reporting and referring partners involved in domestic violence situation.
- Seek support for families dealing with catastrophic illness (AIDS, cancer), alcoholism, and children with special needs, etc.

Social services. Social services are all the services and facilities that a community provides for its citizens—recreation, libraries, counseling, housing, legal aid, education, as well as public assistance. Head Start provides services for low-income families within specific income guidelines, so many will already be receiving some form of financial assistance. Nearly all families, however, are dealing with the multiple stresses that affect contemporary families, especially those living in or near poverty. During the first few weeks, home visitors and families will identify specific needs to include in the Family Action Plan. These needs and subsequent plans become the individualized “social service” aspect for each family.

Parent involvement. Some parents are highly involved with their children’s development and with their communities, but they may still urgently need the many resources home visitors can help them access. Each family’s needs are different, are identified during the first few weeks of the program, and are addressed on an on-going basis throughout the year.

Parent involvement is expected of families participating in the home-based program option. At a minimum, parents are expected to:

- Be present and involved during the home visit;
- Help plan and evaluate the home visit;
- Attend group socialization activities with their enrolled child;
- Attend parent meetings; and
- Promote the child’s development by completing follow-through activities in between home visits.

Planning Home Visit Activities Together

Planning forms should include an evaluation section to insure that the home visitor and the family review their accomplishments at the end of each home visit. Parents talk about the day’s successes and difficulties. Parents discuss and/or write about how the activities went, what they and their child learned, what they liked about the visit and what they would change. The home visit form should be prepared in duplicate. The document can be simultaneously used by:

- Parent;
- Home visitor; and
- Home-based supervisor.

The videotape *Partnership With Parents* shows various strategies and techniques to use with parents to plan, conduct and evaluate individualized home visits. In addition, the *Head Start Home Visitor Handbook* discusses in further detail specific elements of home visits.

Regardless of the home visitors’ levels of skill and training, their performance depends in large part on the support they receive from administrators, especially their immediate supervisor. The home-based supervisor and the component coordinators help visitors include all four Head Start components in each month’s activities. They observe home visits, foster coordination with community agencies, and resolve any difficulties that might arise.

Building Rapport With Families

Building and maintaining rapport with families is one of the most important—and sometimes most difficult—tasks that a home visitor does. Rapport often develops slowly! The parents and home visitor work as a team—planning, conducting, and evaluating each home visit together. Home visitors who are partners with parents have good rapport with families. This partnership will evolve throughout the year. Home visitor training must address building rapport and working with adults.

Supervising the Home Visitor

Supervision is continuous throughout the year and incorporates constructive feedback and support. To meet the *Head Start Program Performance Standards*, a supervisor should make a minimum of three home visit observations per home visitor during the course of the year. The supervisor also reviews written plans and home contact records on a regular basis. Some agencies now use videotapes both to record observations and as a training tool. Photographs also can help document activities and may capture expressions that reveal how well the visits are progressing.

The home visit is a focal point in implementing the home-based program option. It is central because of:

- The planning that has occurred before the visit;
- The intense interaction that occurs during the visit;
- The joint evaluation of the visit by both parent and home visitor; and
- The joint planning of follow-through activities for both families and agency staff.

The home visit is key to planning the other modes of service delivery: group socializations, community outreach, and parent education. The next section discusses group socializations in more detail.

GROUP SOCIALIZATION

Getting together with other Head Start home-based families meets a basic human need to socialize. Parents learn from talking together, through seeing their own and other children interact, and by sharing information. Children learn from each other, a variety of adults, and from activities in which they take part. Most of all, these events should be fun for everyone, and be a time to relax. Group socialization should provide opportunities for parents to:

- Develop greater belief in themselves and their worth as individuals;
- Discover that they have feelings, ideas, and goals in common with others and help each other from feeling isolated or lonely;
- Increase self-motivation, self-help, and self-direction; and
- Become active members of their neighborhood and community.

Group socialization activities should be planned to:

- Have parents or a responsible person in the household accompany their children at least twice a month. They observe, participate as volunteers, or engage in activities designed specifically for the parents.
- Emphasize peer group interaction through age-appropriate activities supervised by the home visitor with parents observing at times and actively participating at other times.
- Follow nutritional requirements specified in 45 CFR 1304.3-10(b)(1) and provide appropriate snacks and meals.

The director must assure that the home-based option plan includes group socializations twice a month. The length of time for each group socialization session is flexible, depending upon the type of experience planned. A field trip to a horse farm might well take longer than a video presentation to parents on well-baby care. However, allow ample time to assure that children have time to play productively, especially in small groups.

Programs choose dates far in advance to provide Head Start activity calendars to families. Home visitors remind families on the home visit day about the socialization session so participation is as high

as possible. Plans for the specific group socialization experience include a schedule of activities. Parents and children know what to expect during each gathering.

Planning is essential in managing the logistics of regular socialization for children and families together. The Head Start agency is responsible for finding suitable facilities and community experiences. The agency's policies about transportation arrangements and the provision of snacks and/or meals should be followed (45 CFR 1304.3-10(6)(1)). Planning the group socialization activities requires input from the parents. To achieve maximum interaction between adults and children, plans focus on small group activities.

Facilities and Transportation

The facilities used by Head Start grantees for home-based group socialization activities must comply with state and local requirements concerning licensing. In cases where licensing standards are less comprehensive or less stringent than Head Start regulations, or where no state or local licensing standards apply, grantees are required to assure that their facilities are in compliance with *Head Start Program Performance Standards* related to health and safety found in 45 CFR 1304.2-3 (Subpart C—Head Start Program Options). Supervision of children and the safety of all participants in group socialization experiences are of utmost importance.

Small groups may meet in families' homes for activities such as story telling, gardening, or playing games on a nearby playground. Arrangements to meet in homes occur only when the parents volunteer and are involved in all planning for the group socialization activity.

Field trips are another way of meeting the group socialization requirement. They usually require additional attention, such as providing maps if parents are driving. Program policies should address all phases of field trip planning to assure that home visitors can make the most of these excellent learning opportunities for children and families. Program policies for field trips should cover:

- Adequate insurance coverage for all participants, en route as well as at the field trip site;
- Use of safety seats and belts for all participants when private vehicles are used; and
- Travel reimbursements for staff and families.

Transportation arrangements might include use of Head Start vans or buses, contracts with local public transportation, or parent car pools. The Head Start agency is responsible for assuring that all vehicles, drivers, and passengers are adequately insured.

Occasionally, two home visitors and their families might plan a special group socialization together. One home visitor works with some of the parents while the other home visitor helps the rest of the parents and the children carry out the planned activities. Later the groups of parents switch responsibilities so both groups achieve the goals of the joint group socialization.

The needs, strengths, and interests of the families and their children should guide the types of playful experiences that take place during group socialization. The focus is on fostering children's development through group interactions and activities that promote cooperation between and among parents and children. Therefore, children engage in a wide variety of self-directed play as well as some structured learning experiences.

Well-trained supervisors and home visitors keep abreast of the latest professional developments in early childhood education. Basic principles for program planning enable administrators to offer guidance to supervisors and home visitors. The *Head Start Program Performance Standards* that address adults and children in group settings, including education, nutrition, and safety, are excellent references in planning these activities.

Environment

Much care is taken in Head Start to ensure that the environment is safe and inviting for the abilities or

A Guide for Operating the Head Start Home-Based Program Option

disabilities, ages, and interests of the children. Group socialization experiences may include infants, toddlers, and other siblings as well as the enrolled children. The environment must be tailored to meet a wide range of developmental needs.

Knowledgeable adults select equipment and materials and arrange them in ways that promote children's self-sufficiency and inquiry. These are a few basic considerations for children in group socializations:

- Children with varying abilities/disabilities can find many opportunities that challenge and promote success. Materials are available so children can make choices.
- The atmosphere and materials are culturally relevant for the children. Providing materials that appeal to children and that can be used in creative ways to promote play.
- Times are planned for large group activities, small-group experiences, and individual time.
- A flexible schedule sets reasonable amounts of time for activities. Children move smoothly from one type of activity to another without waiting.
- Children are encouraged to cooperate and resolve disagreements by talking with each other. They learn self-control, conflict resolution, and problem-solving techniques through experience.
- Within the structure of the experience, adults guide and observe children as they play, seeking ways to extend their knowledge and level of involvement.
- A nutritious snack is served that supports good nutrition habits.

Appropriate Practice

Appropriate activities are those which best match young children's development and abilities (physical, social, emotional, and cognitive), culture, individual learning styles, and interests. "Mindful curriculum enables children to make sense of what they are learning and to connect their experiences in ways that lead to rich conceptual development...[it] engages children in the challenge of learning" (Bredenkamp and Rosegrant, 1992, p. 29).

Characteristics of developmentally appropriate experiences for children used in implementing group socialization activities are:

- Children carry out most activities independently, with little adult direction. Adults provide materials for children to use in their own safe ways.
- Children are deeply involved in learning. They are free to move about, to talk with each other, to determine the direction of their play.
- Group times are typically brief and designed to keep children actively involved. Children are participants, not observers.
- Socializations build upon children's real experiences. Learning takes place in context of the family, and community.
- Children have many opportunities to be successful. They learn primarily in their home language, and learn to solve problems themselves.
- Adults encourage play by observing the action, making supportive comments, asking a few open-ended questions, and occasionally offering suggestions or additional materials. They may play with children for a bit, but soon move to another group, and are constantly alert to children.

Parent Participation in Group Socialization

Parent participation is required in all activities planned for the home-based option. This includes home visits and group socialization activities. During all group socialization experiences, parents play with the children and discuss activities with other families. A balance of the two types of experiences is part of the group socialization activity. Parents look forward to a chance to talk with each other. The parent involvement component staff may help the home visitor with group experiences.

The agency should conduct an orientation meeting to discuss the home-based option, including the group socialization aspect of the Head Start home-based program option. This helps parents feel more at home. It gives them an idea about what they and their children can expect. In addition, specific training about Head Start's goals, components, and appropriate ways to interact with children, may be useful. This assures that children benefit the most from the experience. If other volunteers take part in the group socialization, they must be trained to work with children and their families.

Whenever parents get together, they share feelings and ideas that might not come up when they meet with home visitors. A lot can be learned by talking with each other informally, as well as in formal groups. Time is set aside for both during group socialization experiences.

More formal adult contacts also arise during group socialization experiences, depending on the interests of parents. At first, leadership comes from the home-based staff, then it gradually shifts to the parents.

During the first group socializations, home visitors concentrate on modeling appropriate interactions with groups of children and helping parents feel at home in the surroundings. The children, too, will benefit from a consistent leader who helps them know what to expect while they play together.

Parents can be gradually asked to participate more fully as home visitors match involvement with each parent's level of comfort and confidence. Clear explanations about expectations help facilitate this process.

Parents review the group socialization experience and document what they learned. The plans and evaluations of group socializations are maintained as part of the agency records.

DOCUMENTING SERVICE DELIVERY IN THE HEAD START HOME-BASED PROGRAM OPTION

Documentation of all home-based services is an essential part of the program. When record keeping procedures are set up well in the beginning, they promote an efficient, responsible operation. The program will have the appropriate records and documentation to ensure that families have received necessary and appropriate services based on program requirements.

Records are extremely valuable because they:

- Aid in daily planning;
- Contribute to continuity for families;
- Make it possible to locate families and services;
- Point out problems and needs;
- Document the value of the program for the community; and
- Are required by federal regulations.

The most helpful forms and record keeping procedures are those unique to the local program and specific to the home-based option. Sample forms for the Head Start Home-Based Program Option are in the *Head Start Home Visitor Handbook* (1993), and the Appendices to this *Guide*. These may be adapted to meet local program needs.

Figure 2-2 provides an overview of the record keeping procedures:

FIGURE 2-2: AN OVERVIEW OF RECORD KEEPING PROCEDURES

RECORD TYPE	PERSON RESPONSIBLE	PURPOSE	INFORMATION RECORDED
Family Needs Assessment	Home visitor, parent	Planning	Identifies strengths, needs, interests. Sets goals. Plans ways to meet goals.
Family Action Plan	Home visitor, parent	Planning	Outlines steps to reach goals. Contains dates when goals reached, names of providers of services.
Children's Health	Home visitor	Baseline information	Dental, physical, vision, hearing, referrals.
Child Development Profile			
a. Screening	Home visitor, parent	Identifies possible at-risk child	Health, parental records, screening instruments: screening language, cognition, fine and gross motor, self-help skills, perception, socio-emotional.
b. Assessment	Home visitor, parent	Individualization to meet child's needs	Observations of child's behavior, samples of child's work, checklists; goals.
Weekly Home Visit Plans and Reports	Home visitor, parent(s)	Individualization of component services	Names, dates, times, components addressed, home visit activities, materials/persons responsible, evaluation, follow through activities, parent signature.
Group Socialization Experiences	Home visitor, parent(s)	Planning and documenting group activities for children and parents	Location, transportation, schedule, parent activities, children's activities, meals and/or snack refreshments
Referrals and Outcomes	Component specialists	Monthly reports	Referral results.
In-Kind Contributions	Supervisor	Administrative	Date, source, donation, market value.

As part of typical record keeping, grantees should maintain documentation of on-site home visits by component coordinators and home-based supervisors, attendance at regular supervisory meetings, training, and other meetings such as family staffings or community collaborations. This documentation records agency progress and is needed for monitoring visits.

The record keeping system (forms, etc.) needs to be developed with input from home visitors. It should be changed as needed to facilitate efficiency in gathering information.

PARENT AND VOLUNTEER PARTICIPATION

Parents and community volunteers are involved in home-based programs. Parents attend parent meetings, take part in educational and social experiences, and serve as Head Start volunteers.

Community volunteers serve meaningful roles in the home-based program option. Orientation to the Head Start home-based program's goals and objectives, as well as to Head Start's four components, is essential. Training about roles and responsibilities empowers parents and volunteers.

Parents in Policy-Making Groups

Home-based parents must be represented as decision makers on the Policy Council. Their decisions shape program expansion, recruitment, budget, evaluation, personnel policies and procedures, and program direction. Home-based parents are to be represented on policy-making bodies in proportion to the number of home-based children enrolled in the total Head Start program.

Parent Meetings

Meetings for parents are arranged, preferably at the parents' suggestion, to:

- Orient families to the program and Head Start components.
- Present activities that will enable them to become more skilled as educators of their own children.
- Discuss topics suggested by parents or that appear in several Family Action Plans or that are required in the *Performance Standards*.
- Plan a specific advocacy strategy within the community.
- Provide adult basic education courses. In each state, the director of Adult Basic Education at the State Department of Education can suggest where to get resources within the state. These classes may address literacy, bookkeeping, psychology, and many other areas.
- Put together a parent newsletter.

Parent Social Experiences

Sometimes parents choose to gather, without their children, to relax and have fun. These informal get-togethers help parents feel they belong to the Head Start family. Among the types of activities parents have enjoyed are trips to places of interest, potluck dinners, bingo, card parties, bowling, and dances.

Parents plan and carry through with their ideas for these social experiences. Agencies need to let parents know how they can support these activities.

Orientation and Training of Volunteers

Family members and others in the community are often eager to serve as volunteers within Head Start. In every instance, these volunteers receive an orientation to Head Start's philosophy, goals, and components. If volunteers are to help with the home-based program, they need training about the goals and unique features of the Home-Based Program Option. Among the topics are:

- Head Start philosophy and goals;
- Ways in which Head Start has proven effective;
- Policies and other information specific to the type of Head Start Home-Based Program Option;
- Basic elements of developmentally, culturally, and individually appropriate practice in working with children;
- Expectations for volunteer roles and responsibilities, time commitments, health policies; and
- Opportunities for personal and professional growth within Head Start and in the community.

CHAPTER 3

Program Review and Monitoring

Research substantiates the effectiveness of carefully planned home visiting programs.

In preparation for an on-site monitoring review, the "Suggestions for Strengthening the Head Start Home-Based Program Option" (Appendix A of the *Head Start Home Visitor Handbook*) can be a guide to assessing the program's strengths and needs.

The Head Start Regional Office will expect the program to present records about all the Head Start program options for monitoring purposes. In addition to the data obtained during application and enrollment procedures, the following records are needed for home-based review:

- Child screenings;
- Child assessments;
- Child health records;
- Home visit plans/reports;
- Group socialization plans/reports;
- Home-based parent meetings;
- Home visitor monthly schedule;
- Home visitor training;
- Supervisor's reports;
- Component coordinators' reports;
- Family Needs Assessments;
- Family Action Plans (including referrals and follow-up);
- Individual Education Plans for children with disabilities; and
- Documentation of home-based parent representation on the Policy Council.

In any of the On-Site Program Review Instrument's (OSPRI's) component sections where the involvement of parents is stated, the reference is made to all parents regardless of option. Thus there should be parents from the Head Start Home-Based Program Option represented on Policy Council, Policy Committees, Component Committees such as the Health Advisory Committee, and any other agency-wide committee.

The Parent Involvement section of the OSPRI addresses all options on pages 47-49 in asking questions about participation and training. The Social Services section mentions children who have been absent four days on page 43; this does not refer to the Head Start Home-Based Program Option since that would mean a family was absent for a month of visits. CFR Part 1306.33 of the Regulations provides information to be followed if the home visit is canceled by the program. The local agency must decide on visits canceled by parents. The schedule of home visits must provide for 32 home visits per family per year.

When the Review Team is on-site, they will make visits to homes with the regular home visitor assigned to those families. They also will review 10%, or not less than 20 records, in the case of only one option, depending upon the number of children served. When there are several options, 10% of the total records of children enrolled in each option are reviewed. See page 6 of the OSPRI Instructions.

Information in the OSPRI is very specific in providing information regarding the on-site documentation necessary for review and monitoring.

CONCLUSION

Operating a Head Start Home-Based Program is one option to meet the needs of families in your community. Your agency will make this decision after carefully analyzing the characteristics of the community and considering the program options available for Head Start Programs.

In carrying out the parents-as-partners philosophy, directors and home-based staff recognize they are not child educators. Home visitors are adult educators who work with the child through the parents. In this Head Start program option, agencies relying on this philosophy have far greater success passing new teaching and interactional skills on to parents and enhancing the family's self-sufficiency.

We hope this presentation of planning, implementing, and evaluating the Head Start Home-Based Program Option will be a useful tool. Operating the Home-Based Program Option can make a significant difference in the lives of families in your community.

APPENDIX A: SAMPLE JOB DESCRIPTIONS

JOB DESCRIPTION 1: HOME-BASED SUPERVISOR

MINIMUM DUTIES AND RESPONSIBILITIES:

1. Assist in the development and evaluation of home-based program policies, procedures, and curriculum.
2. Coordinate the daily operations of the home-based program option with other Head Start activities; work closely with component coordinator to resolve problems in this area.
3. Supervise home visitors through staffings, observations of home visits (at least three times annually per home visitor) and parent activities, group socializations, review of records and enrollment levels.
4. Evaluate home visitors annually; develop with home visitors improvement/training plans; make recommendations concerning continued employment status of home visitors.
5. Help identify training needs for home-based option and plan with Education Coordinator and other component coordinators the development and delivery of training to meet those needs. Provide on-site training through modeling of appropriate techniques. Provide program orientation and training for new home visitors.
6. Assist in the training of home-based observation teams for the annual program self assessment; assist in completing education self-assessment and grant application requirements.
7. Assist the program and home visitors in meeting or exceeding the *Head Start Program Performance Standards*.
8. Coordinate a resource library for use by home visitors.
9. Participate in the hiring process of home-based personnel.
10. Coordinate the ordering of home-based supplies, materials, and equipment.
11. Assist component coordinators in working with center parent groups and members of the Policy Council in relation to home-based and parent education.
12. Participate in workshops and continuing education as requested or as needed.
13. Provide training for home-based staff.
14. Follow all general staff responsibilities in addition to specific job responsibilities.

MINIMUM QUALIFICATIONS:

1. Associate of Arts or bachelor's degree in child development, community psychology, early childhood education, or related field.

2. Experience as teacher of preschool age children or as a parent educator in a program that emphasizes the parent's role in the child's development.
3. Experience with low-income families and in working with persons of varied experience and diverse backgrounds.
4. Experience supervising adults and facilitating groups.
5. Experience preparing written reports and making oral presentations.
6. Possess valid driver's license.

DESIRED QUALIFICATIONS:

1. Bilingual in English and Spanish, if appropriate.

JOB DESCRIPTION 2: HOME VISITOR

QUALIFICATIONS:

Experience/Education

Home Visitor Child Development Associate (CDA) credential, Associate of Arts, or Bachelor of Science degree in adult education, early childhood education, human development, child development, social work, or a related field. Previous experience providing direct services to low-income families. Must have a valid driver's license.

MAJOR DUTIES, FUNCTIONS, AND RESPONSIBILITIES:

1. Assist families in identifying family resources and needs.
2. Work with families and children weekly in their homes for at least 90 minutes.
3. Maintain confidentiality of family records and information.
4. Encourage and promote the family's achievement of self-sufficiency.
5. Access information and advice from home-based supervisor and component coordinators.
6. Participate in all appropriate training and meetings.
7. Encourage parents to attend parent meetings and transport them when necessary.
8. Integrate all Head Start components during home visits.
9. Maintain and periodically update Family Needs Assessment and Family Action Plans with each family throughout the program year.
10. Plan and evaluate with parents the activities for group socializations.
11. Meet or exceed the Performance Standards in delivering the home-based program option.

12. Work with parents to develop weekly home visits and weekly activity plans based on each child's assessment and identified family needs.

Parent Involvement

1. Assist parents in developing and fostering healthy self-concepts for themselves and, having begun this effort, begin assisting parents in fostering healthy self-concepts in their children.
2. Foster the view and practice in parents that they are their child's first teacher and reinforces this concept with practical suggestions for its development.
3. Guide in the planning of and participation in parent meetings scheduled at least once per month.
4. Assist families to keep an on-going file of weekly home visit plans and follow up activities.

Social Services

1. Make referrals and transport families when necessary to community service offices such as family planning, food stamps, employment, health services, vocational rehabilitation, and psychological services.
2. Assist parents in using all appropriate community resources.
3. Act as a liaison and advocate between community resources and Head Start families.

Education

1. Help parents develop ways of using household materials in educational activities with their children.
2. Facilitate planned and organized group socialization experiences twice a month.
3. Provide ongoing assessment of parents and enrolled Head Start children using appropriate assessment tools and techniques.
4. Help parents use activities which naturally occur in the home and other places as learning opportunities.

Health

1. Help families as necessary to arrange and keep medical and dental appointments as required by Head Start, including designated follow-ups.
2. Plan a minimum of one nutrition activity per month during a home visit.
3. Conduct health checks on each home visit.

Employee Acknowledgment/Date: _____

Program Director Acknowledgment/Date: _____

APPENDIX B: SAMPLE FORMS

(Figure B-1)

FAMILY NEEDS ASSESSMENT (FNA)

Parent's name _____ Home visitor's name _____

Child's name _____ Date _____

A. Ways parents would like to participate:

- | | |
|--|--|
| <input type="checkbox"/> Plan activities, field trips, educational experiences | <input type="checkbox"/> Prepare educational materials at home |
| <input type="checkbox"/> Help with newsletter | <input type="checkbox"/> Volunteer in Health Services |
| <input type="checkbox"/> Assist on field trips | <input type="checkbox"/> Volunteer in Social Services |
| | <input type="checkbox"/> Help in the Office |

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

- | | |
|--|--|
| <input type="checkbox"/> Child development, including disabilities | <input type="checkbox"/> Self-protection for women |
| <input type="checkbox"/> Child behavior management | <input type="checkbox"/> Singles groups |
| <input type="checkbox"/> Nutrition, gardening, canning | <input type="checkbox"/> Marriage, family counseling |
| <input type="checkbox"/> Family planning, birth control | <input type="checkbox"/> Home repairs, maintenance, decorating |
| <input type="checkbox"/> Weight control, grooming, dress | <input type="checkbox"/> Simple auto mechanics |
| <input type="checkbox"/> First aid, home safety | <input type="checkbox"/> Arts, crafts, hobbies |
| <input type="checkbox"/> Budgeting, wise shopping habits | <input type="checkbox"/> Alcohol, drug abuse |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> 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:

Is parent interested in:

- | | |
|--|---|
| <input type="checkbox"/> Employment counseling | <input type="checkbox"/> Vocational or college training |
| <input type="checkbox"/> Job skill improvement | <input type="checkbox"/> Obtaining driver's license |
| <input type="checkbox"/> Adult Basic Education/GED | <input type="checkbox"/> Assistance with day care when employed |

(Adapted from Child Inc., Austin, TX)

(Figure B-2)

FAMILY ACTION PLAN (FAP)

Family name _____ Date _____

Goal _____ Goal achievement date _____

TIME TABLE _____

PROGRESS REVIEW

Action Steps	Person Responsible	Target Date	Action Initiation	Date	Finding

(Figure B-3)

FAMILY ACTION PLAN

Family name _____ County _____

Review your answers to questions on the FNA. Use the space below to list the areas you would like to work on this year for yourself and your family.

Develop Action Steps and Target Dates for Completion

Assessment (date completed)

--	--	--

(Adapted from Family Development, Inc., Parkersburg, WV)

(Figure B-4)

FAMILY STRENGTHS AND GOALS

We feel good about our family because:

We would like our family to:

During the next three months, we would like to:

We should like our family to be able to:

Our family is having trouble with:

(Adapted from Panhandle Community Services, Scottsbluff, NE)

(Figure B-5)

HEAD START FAMILY SERVICES

Name _____ Phone _____

Address _____

Employer/School and Location _____

My strengths are:

- Patience
- Reliability
- Flexibility
- Discipline
- Teaching
- Experience
- Other _____
- _____

Immediate needs

- Emergency food
- Medical help
- Clothing
- Personal problems
- Legal help
- Other _____
- _____
- _____

Individual needs

- Transportation
- Child care
- Family counseling
- Parenting help
- Other _____
- _____
- _____

Material needs

- Housing
- Clothing
- Home repair/
improvement
- Food

To do my best as a person, I need to learn:

- Child growth and development
- Self-improvement
- Child behavior and development
- Nutrition
- First aid /CPR
- Home management
- Other _____
- _____

(Adapted from Lakes and Pines CAC, Mora, MN)

(Figure B-6)

INDIVIDUAL FAMILY PLAN

Parent(s) _____ Program _____

Child's name _____ Family advocate _____

NAME	EXPRESSED NEED	RESOURCE	FOLLOW-UP/ OUTCOME

(Adapted from Lakes and Pines CAC, Mora, MN)

(Figure B-7)

FAMILY ASSESSMENT PLAN

FAMILY SUPPORT AND HEALTH

Topic/ Issue	High/Low Priority	Introduced	Reviewed	Attained
HEALTH:				
___ Parent /child physical	___ CDC			
___ Parent /child dental	___ Well Child Clinic			
___ Immunizations	___ Doctor			
___ Disability	___ Medicaid			
___ Community Health Center	___ VT Association for the Blind			
___ UVM Dental Clinic	___ WIC			
SUPPORT:				
___ AIDS information	___ Parents Anonymous			
___ Family planning	___ AA / Alanon / ACOA groups			
___ Head Start	___ Parents Assistance Line			
___ Mental Health Consultant	___ Singles groups			
___ Family centers	___ Marriage/family counseling			
SAFETY:				
___ Mr. Yuk	___ First aid			
___ Poison prevention	___ Personal safety			
___ Fire safety	___ Home/outdoor safety			
___ CPR				
NUTRITION:				
___ Head Start Nutrition	___ Diet /weight control			
___ Consultant	___ Food commodities			
___ Nutrition pyramid	___ EFNEP			
___ Menu planning	___ Extension service			
___ Food budgeting	___ Food stamps			
___ Gardening	___ Food shelf			
___ Canning				

(Adapted from Champlain Valley OEO, Burlington, VT)

(Figure B-8)

HOME VISIT PLAN

Family _____ Date _____

Home visitor _____ Time started _____ Time ended _____

PI SS ED	Follow-up of previous week (reinforcement)	What is to be accomplished? (objective)	Activity (discussion, game, song, etc.)	Materials and person responsible	What was accomplished? (assessment)	Plans for next week

PI = Parent Involvement

SS = Social Services

H = Health

ED = Education

Parent's signature _____

(Adapted from Franklin County Head Start, Chambersburg, PA)

(Figure B-9)

PARENT/HOME VISITOR WEEKLY PLAN

Family _____ Date _____
 HV _____ Time started _____ Ended _____

PI ED SS	Objective (what do we hope will happen?)	Activity (discussion, handout, song)	Materials and person(s) responsible	What was learned? What was accomplished?

Objectives and activities parent(s) work on in home during week:

Parent's signature _____

(Adapted from the Home Start Training Center, Parkersburg, WV Core Home Visitor Training)

APPENDIX C: COMMUNITY RESOURCES

In every community, there are a surprising number of organizations, agencies, and associations that can directly or indirectly help staff and families in home-based programs. Even if there are no special difficulties, home visitors may want to try some new activities occasionally.

Most programs considering a home-based option will already have extensive relations and agreements with local agencies and organizations. However, as the Head Start focus is broadened or changed, these agencies should be involved in the planning. Agreements should always be in writing.

When home-based programs engage early in productive relationships with community services and resources, the ties pay great dividends after the program swings into operation.

- Families can be helped to use and feel comfortable in the library.
- Hospitals can be encouraged to provide family health and counseling services at nominal or no cost.
- Head Start and the public schools can share training workshops, libraries, resources, and space for group activities such as parent meetings.
- Head Start can work closely with soup kitchens, food banks, and clothing banks.
- Local cable television can include Head Start in its productions.

Many Chambers of Commerce, social services, or similar community groups publish lists of civic and social organizations. In some communities, the 4-C (Community Coordinated Child Care Council) or a similar agency is one of the most helpful organizations. The goal of 4-C is to facilitate coordination of services. Head Start programs may wish to compile their own specific resource lists for staff reference. These lists should be available to all home visitors and families.

Education

Libraries

- Opportunity for staff, parents, and children to obtain library cards and borrow books, paintings and prints, audio and video cassettes, and other items for use at home or in training.
- Periodicals may be accessed on site. These include newspapers and magazines.
- Weekly story hours, puppet shows, or activity times for children.
- Some libraries also lend toys.
- Seminars and discussion groups on a variety of topics for adults.
- Children's librarians are often willing to conduct training sessions on library use, children's literature.
- Librarians often conduct book discussions or review books of interest.
- Talking books, tape recorders, TTY, or other items for children or parents with diverse abilities.

- Bookmobiles for outlying areas.
- Librarians can help staff and family members select books and reference materials.
- Some libraries maintain job listings and training opportunities.

Programs for Children (schools, child care programs)

Teachers, students, social workers, and others can:

- Visit homes and work with children;
- Assist school-age children (tutor, counsel);
- Encourage student volunteers;
- Conduct Adult Basic Education classes in child care, education, and other subjects; and
- Sponsor courses in art, computer use, and other topics of interest to children.

Agricultural Extension Programs

The Home Economics Extension Service offers materials, workshops, newsletters, and consultants on a variety of subjects of interest to parents and children.

Colleges and Universities

Most institutions of higher education will have departments, schools, or colleges of education, social work, home economics, medicine, or nursing. They may offer programs in early childhood education as well as family life. Higher education faculty can:

- Place students in home-based Head Start to gain practical experience.
- Help identify and evaluate children with special needs.
- Assist staff members in obtaining training and/or college credit.

State Education Departments

- Adult Basic Education courses;
- Funds for training or support services for children with varying abilities;
- Counseling and testing for employment; and
- Consultation in education.

Community Protection Services: Police, Fire, Health

- Safety education consultants;
- Services designed to meet local needs; and
- Opportunities for field trips.

YMCAs, YWCAs, and Similar Organizations

- Recreational facilities and educational activities for children and adults.

Other Free or Inexpensive Resources

- Newspaper offices might provide paper end-rolls for children's art projects.
- Offices and printers can recycle paper that is clean on one side.
- Grocery stores, packing companies, shoe stores, and drug stores have all sizes and types of boxes and containers.

- Lumber yards, hardware stores, cabinet makers, and other crafters can provide scraps of wood, yarn, fabric, and other items.

Health

Special Clinics and Clinicians

Pediatric, public health, maternal and child health, well-baby, and neighborhood clinics, as well as local pediatricians, physicians, and public health nurses offer:

- Assistance to identify, evaluate, and diagnose general health conditions of children and adults;
- Referral of a child with special needs;
- Instruction and counseling for staff and parents;
- Consultation on health problems in the community or particular families; and
- Help to design preventive health activities.

Mental Health Centers and Child Guidance Clinics

- Diagnosis or identification of children with emotional problems;
- Therapy or counseling when necessary;
- Identification of children with various learning styles and disabilities;
- Consultation with staff on families with special needs; and
- Training for home visitors in basic counseling techniques, working with adults, or handling special problems.

Local Chapters of the American Red Cross

- First aid training;
- Safety courses;
- Child care courses; and
- A variety of other services that promote community health.

Medical Suppliers, Clinics, Pharmacies

- Donations of tongue depressors, toothbrushes, packing materials, and other supplies for health or art purposes.

Social Service Agencies, Community Action Agencies, Community Public Assistance Councils, Public Assistance Offices, and Neighborhood Centers

- Financial assistance to families or referral to other sources of financial aid;
- Funds for training and group socialization experiences;
- Family counseling services;
- Recreational programs;
- Referral to other community resources; and
- Homemakers, visiting nurses, or nutrition aides for families.

Civic Groups (such as Lions Clubs, American Legions, Rotary Clubs, Odd Fellows, Veterans, religious groups)

- Volunteers for program activities;
- Donation of equipment or help in building equipment;

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- Transportation for children and families;
- Glasses or other health aids for children and families;
- Recreational programs and activities for children and adults; and
- Fund raising.

Federally Funded Local Programs (such as Neighborhood Youth Corps and Work Incentive Program)

- Training and financial assistance to families and staff;
- Student aides or trainees to assist in the program; and
- Activities that might include staff, parents, and state scholarships for completing a CDA.

Parent Involvement

- Other local Head Start and early childhood programs;
- Home visitor programs within the community;
- Public schools, especially kindergarten teachers; and
- Parks.

APPENDIX D: TRAINING RESOURCES

Every Head Start program has a wealth of possible in-service education resources staff. In addition, local specialists, consultants, schools, professional networks, the Head Start Training Network, and the media are sources for training.

Who?

Head Start Staff

Within the program the home-based supervisor, component coordinators, other staff, home visitors themselves, and volunteers all have areas of expertise that can be drawn upon to support each other's, and parents' personal and professional growth.

Visits to other Head Start programs that operate the home-based option can provide many learning opportunities.

Specialists

The community may have many training resources, including personnel, who have expertise in areas such as:

- First aid;
- Techniques for working with individual children;
- A healthy diet;
- Public health issues;
- Food preparation and storage;
- Sanitation procedures;
- Fire safety; and
- Dental health.

Consultants

Plan to utilize the consultant's skills fully. Conduct an orientation and planning session upon the person's arrival to organize time and resources.

Follow-up by thanking the consultant for a job performed well.

Colleges and Universities

Colleges often sponsor free or low cost cultural events, symposium, and speakers that may be of interest to home visitors and families in the community.

The Child Development Associate (CDA) Credential is available for home visitors. College faculty from a variety of disciplines can contribute to the development of this training program.

Professional Associations

Affiliates of national professional organizations such as the National Association for the Education of Young Children and the National Head Start Association are excellent resources. Members of these groups often are leaders at local, state, and national levels who are pleased to share their expertise with

local programs. Benefits of professional membership (networking, local training, up-to-date information, advocacy) should be stressed to home visitors. It may be possible to draw from this pool of early childhood educators to find trainers, CDA advisors, and consultants.

Continuity of contact is important, and enables experts to keep informed about Head Start as well as offering insights into various child development efforts within the community. Sharing training with other local child development programs keeps costs low and builds links among people who are committed to working with children and their families.

Head Start Training Network

This training network has both staff and resources, films, pamphlets, and workshop ideas for use in home-based programs. Network staff are available to help plan and implement training efforts. Each program receives assistance through the resource network or regional training and technical assistance provider. Contact the Head Start Regional Office for details.

Media

Local and national print and electronic media help home visitors stay abreast of ideas and issues that affect them and the families with whom they work. Local papers, for example, are a good resource for identifying places or community events that might be of interest as group socialization experiences.

Cable television may offer correspondence courses on topics such as child development and family dynamics. Training videos are available from many professional groups and vendors.

What topics?

Training activities for home-based programs include:

- Child growth and development;
- Individually, culturally, and developmentally appropriate activities for children;
- Parent involvement;
- Family dynamics;
- Interpersonal relations;
- Communication skills;
- Nutrition education;
- Health and wellness education;
- Psychological and social services;
- Special needs of parents and children; and
- Community involvement.

For a more detailed listing of training resources, see *The Head Start Home-Based Resource Directory*, 1993, available from the Head Start Bureau.

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