

Approval of Head Start and Early Head Start (EHS) Policy Updates



HEAD START



2023-2024 Head Start Policy Index

Change
Required?

Description of Change made to current Policy

Education and Early Childhood Development

5	Development and Behavioral Screening	yes	change related to timeframe that allows completion eight weeks prior to enrollment
10	Lesson Plans	yes	clarification regarding lesson plans
11	Discipline and Guidance	yes	clarification regarding communication guidance
16	Learning During Mealtime	yes	Clarification regarding required procedures
18	Coaching	yes	Clarification regarding required procedures
21	Field Trips	yes	Updates to align with other policies

Environmental Health and Safety

1	Safe Environment	yes	Clarification regarding required procedures regarding a safe environments and lead
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Family and Community Services



2	Staff-Parent Communication System	Yes	Minor edit added wording from HSPPS 1302.50 and 1301.4
5	Parent Activities to Promote Child Learning and Development	Yes	Minor edit added wording from HSPPS 1302.51 (a)
7	Family Partnership Services & Community Partnerships	Yes	Minor edit added wording from HSPPS 1302.52 and 1302.53

Nutrition Services

2	Outside Food & Adult Meals	yes	Change name of policy. Provide clarification regarding meal service
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Program Design and Management (PDM)

7	Identification and Reporting of Child Abuse and Neglect	yes	Clarification regarding reporting requirements
9	Critical Incident Reporting	yes	Updates to align with guidance from the Office of Head Start
15	Staff Health Requirements	yes	Remove information regarding COVID vaccine mandate
18	Program Data- Access and Security	yes	Minor updates to clarify language
19	Management of Program Data	yes	Minor updates to clarify language

	DHS Head Start Program Policy		
EDUCATION 5			
SUBJECT	Development and Behavior Screening		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	4/6/2010		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program uses the Ages and Stages Questionnaire (ASQ-3) as the developmental screening and Ages and Stages Questionnaire: Social and Emotional, Second Edition (ASQ: SE-2) as the behavioral screening.

Education Service Providers will develop and implement procedures to ensure that developmental and behavioral screenings are completed in collaboration with each child's parent/guardian on or before the 45th calendar day after the child first attends the program or for any child that did not receive a developmental or behavioral screening the previous school year. Developmental (ASQ-3) and behavioral screenings (ASQ:SE-2) must be completed within this timeframe to identify early concerns regarding a child's developmental, sensory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills for appropriate referrals.

The ASQ-3 and ASQ:SE-2 should not be completed by the teacher. If the parent or guardian needs assistance completing the questionnaire, the teacher or other staff member may provide the most appropriate accommodations for completion. The developmental and behavioral screenings may be distributed by the teacher no more than eight weeks prior to the first day of a child's entry into school. To the greatest extent possible, the screening procedures must be sensitive to the child's cultural background and home language.

Education Service Providers will develop and implement procedures that include at a minimum:



- Identification of staff responsible for administering, scoring, follow-up, and referrals
- Monitoring the fidelity of the screenings
- Ensuring the appropriate version is utilized for child's age and language
- Ensuring proper completion of the screening tool

- Ensuring accurate scoring of the screening tool
- Establishing timeframes for follow-up, referrals, and documentation, including parent /guardian refusals.
- Following the *City of the San Antonio Benchmark Due Date Guide*, applicable *ChildPlus Data Entry Guide*, and the *Head Start File Scan Order and Process Guide*
- Completing routine internal monitoring of child files.

Education Service Providers will develop and implement procedures to address the use of the ASQ-3 and ASQ:SE-2 with children with an identified disability or IEP. A child is not automatically disqualified from receiving a developmental or behavioral screening if they have an identified disability or IEP. Sensitivity to the parent/guardian should always be a priority. Procedures may include a determination to complete only certain sections of the ASQ-3 or the ASQ:SE-2. If it is determined by the teacher or other early childhood professional that it is not appropriate for a parent/guardian to complete any section of the developmental or behavioral screening, the information supporting this determination must be documented in Child Plus according to the applicable *ChildPlus Data Entry Guide*.

Performance Standard:
1302.33

Additional Resources: <http://agesandstages.com/free-resources/articles/when-should-you-not-have-parents-complete-asq/>

	DHS Head Start Program Policy		
EDUCATION 10			
SUBJECT	Lesson Plans		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	9/13/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

Education Service Providers will develop and implement lesson plan procedures. Lesson plans should include teacher directed and child initiated, large group, small group, and one/one lessons and activities that support social, emotional, cognitive, physical development, and language skills. Lesson plans should include alignment to the Texas Prekindergarten Guidelines and documentation of individualized instruction, modifications, and accommodations for all children, including children with an Individualized Education Plan.



Current lesson plans must be posted for parents/guardians and other staff to review.

Performance Standard(s):

1302.31; 1302.32

Head Start Act:

Head Start Act Sec.641A. (a) (1)(B) (i) - (x)

	DHS Head Start Program Policy		
EDUCATION 11			
SUBJECT	Discipline and Guidance		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	12/13/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

Education Service Providers will develop and implement policies and procedures on discipline and guidance appropriate for children 3-5 years old. A copy must be provided to all parents/guardians, staff, volunteers, substitute teachers, and contractors. Documentation must be maintained showing receipt of the written discipline and guidance policies and procedures.

The policies and procedures must include positive methods that build self-esteem and support self- control and self-regulation such as:

- Praise and encouragement of developmentally appropriate behavior
- Frequent reminders of behavior expectations using clear and positive statements
- Redirection of behavior using positive statements

The policies and procedures must include guidance on appropriate communication with parents/guardians regarding a child's behavior.

Discipline must be constructive, individualized, and consistent for each child, appropriate to the child's level of understanding, and directed toward teaching the child developmentally appropriate behavior. Education Service Providers must prohibit or severely limit the use of suspension due to a child's behavior. The Education Service Providers must not expel or unenroll a child from Head Start due to a child's behavior, unless approved by the Head Start Administrator.



When appropriate, for the child's age and development, a brief supervised separation, or time away from the group, may be necessary, and should be limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following are prohibited:

- Corporal punishment or threats of corporal punishment
- Punishment associated with food, naps, or toileting
- Pinching, shaking, or biting a child
- Hitting a child with hand or an object
- Putting anything in or on a child's mouth
- Humiliating, ridiculing, rejecting, or yelling at a child
- Pointing a finger in a child's face
- Snapping fingers at a child
- Use of isolation to discipline a child
- Binding or tying a student to restrict movement
- Threatening phrases or sarcastic language
- Subjecting a child to harsh, abusive, or profane language
- Placing a child in a locked or dark room, bathroom, or closet with the door closed
- Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age
- Child restraint performed by staff not certified in proper restraint procedures
- Withholding outdoor free play
- Requiring a parent/guardian to pick up a child due to misbehavior

Performance Standard(s):

1302.17; 1302.31 (e)(2,4);1302.90 (c)(1-2)

	DHS Head Start Program Policy		
EDUCATION 16			
SUBJECT	Learning During Mealtime		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	6/18/2014		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program recognizes the importance of Family Style Meals during breakfast and lunch in supporting social, emotional, language, gross and fine motor learning, and development.

Education Service Providers must develop and implement procedures related to food availability for adults participating in mealtime.

Any adults actively participating with the class during mealtime should share the same food as the children, free of charge, including during field trips and other Head Start related activities. Any adult receiving food, paid for by the Head Start Program, must be involved in the meal with the students at some point during the scheduled meal service.

Ratio must be maintained during mealtime and at a minimum, one adult should sit with the children during the majority of the meal service.

Children are not required to sit at one table or all at the same table. However, children must not be isolated or sit alone during mealtime.



The current daily menu must be posted and made available to parents/guardians.

Each Education Service Provider will develop and implement procedures to address mealtime that includes the following:

- Role of adults, including teachers, teaching assistants, floaters, substitutes, volunteers, and parents/guardians
- Role of the children, including setting the table, passing out food, and helping with clean up
- Training for staff regarding learning opportunities during mealtime
- Outside food
- Mealtime during field trips

Performance Standard(s):

1302.31 (e)(2); 1302.44

	DHS Head Start Program Policy		
EDUCATION 18			
SUBJECT	Coaching		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	6/27/2017		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program will implement a researched-based coordinated coaching program for teaching staff including teachers and aides/instructional assistants/paraprofessionals. Education Service Providers will develop and implement procedures for coaching that must include the following:

- Assessment of staff to identify strengths and areas of needed support
- A system to determine staff in need of intensive coaching
- A system to share staff selected for intensive coaching prior to the start of the identified coaching time period
- Identification of qualified coaches
- A system that includes a cycle of observations, feedback, and goal setting and tools used to document the cycle
- Documentation of coaching consultations in Child Plus according to the *City of San Antonio Benchmark Due Date Guide* and applicable *ChildPlus Data Entry Guide*

Performance Standard:

1302.92 (c)

	DHS Head Start Program Policy		
EDUCATION 21			
SUBJECT	Field Trips		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2019		
Policy Council Approval: 4/23/19	Policy Council Revision: Pending	Governing Body Approval: 5/23/19	Governing Body Revision: Pending
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Policy:

Education Service Providers will develop and implement procedures related to field trips. The procedures should address the following:

- Opportunities for parents/guardians to participate/volunteer for the fieldtrip.
- A system to select attendees and ensure all parents/guardians are offered an equal opportunity to participate throughout the program year.
- Any parent/guardian or volunteer that is asked to attend must have all entrance fees paid for by the program.
- How field trips are funded and the process to ensure payment.
- A system to provide lunch for staff, children, parents/guardians, and volunteers during field trips.
- A system to ensure class ratio is maintained during field trips and ensure no child is left alone or unsupervised. Children may be placed in small groups to ensure safety. While a parent/guardian or volunteer may be used to maintain the required teacher/student ratio a parent/guardian or volunteer must never be left alone with children.
- All volunteers must sign the Head Start Standards of Conduct, pass a background check, and receive volunteer training. Education Service Providers must maintain documentation of volunteer training, background checks, and Standards of Conduct.
- Transportation of children, parents/guardians, volunteers, and staff during field trips. Vehicles that are not school buses, or do not meet the definition of an allowable alternative vehicle cannot be used for the purpose of transporting children for field trips.
- A parent/guardian cannot be required to attend a field trip. Every child must be offered the opportunity to attend the field trip regardless of parent/guardian attendance.
- Early release to a parent/guardian during a field trip.

Performance Standard(s):

1302.18; 1302.21(b)(1-4); 1302.47(5)(iii); 1302.90; 1302.94(b); 1303.71(a)

	DHS Head Start Program Policy		
EnvHS 1			
SUBJECT	Safe Environments		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	9/13/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

Education Service Providers will maintain indoor/outdoor environments and facilities to ensure they are safe, clean, and in quality condition so as to prevent injury to a child. Education Service Providers will develop and implement procedures to maintain safe environments, free from pollutants, hazards and toxins, including lead, that are accessible to children and could endanger children's safety, and correct issues identified as unsafe and/or hazardous through the monitoring process.

Education Service Providers will develop and implement procedures to ensure state-certified lead testing of water, soil, and paint once every three years. If lead test results are positive, the Education Service Provider must inform the Head Start Grant Recipient and provide a plan for abatement within 24 hours of notice.

Education Service Providers will also create an inventory replacement plan that ensures all furniture is routinely inspected and replaced.



Education Service Providers will submit all work orders from all sites as requested by the Head Start Grant Recipient with the current status and timeline of completion for each work order. The Education Service Provider will ensure that work orders are completed within 20 business days of creation. If the Education Service Provider requires additional time to complete a work order, they must submit a request in writing to the Head Start Grant Recipient. If an unsafe and/or hazardous risk is identified, the Education Service Provider will address the issue and submit a work order within 24 hours. The Education Service Provider will be monitored routinely to ensure that the work order is completed.

Performance Standard:

1302.47b(1)(2)

Information Memorandum:

ACF-IM-HS-23-01

	DHS Head Start Program Policy		
FAMILY 2			
SUBJECT	Staff/Parent Communication System		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: Pending	Governing Body Approval: 8/13/20	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop relationships with parents/guardians and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents/guardians to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community.

Head Start staff, to include Family and Community Support and Education Service Provider Staff, will ensure continuous communication with families is maintained. This will allow our families to develop a sense of knowledge, trust and respect for our staff members, thus allowing staff and parents/guardians to work easily together to ensure that each child and family are receiving the full amount of benefits that Head Start has to offer.



The Head Start Program will conduct family engagement services in the family's preferred language, or through an interpreter, to the extent possible, and ensures families have the opportunity to share personal information in an environment in which they feel safe.

The Head Start Grant Recipient will work with the Education Service Provider to ensure the establishment of a Parent Connection Committee (PCC) comprised exclusively of parents/guardians of currently enrolled children at each site/center as early in the program year as possible. At a minimum, procedures must include:

- Activities to ensure parents/guardians of currently enrolled children understand the process for elections to the Head Start Policy Council (HSPC) and other leadership opportunities.
- Opportunities for PCC members to advise staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families.
- A process for PCC members to communicate with the Head Start Policy Council (HSPC).
 - i. PCC agendas must dedicate time to allow for parent questions/discussion

Performance Standard(s)

1302.50(b)(2) & (5); 1301.4

	DHS Head Start Program Policy		
FAMILY 5			
SUBJECT	Parent Activities to Promote Child Learning and Development		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: Pending	Governing Body Approval: 8/13/20	Governing Body Revision: Pending
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Policy:

The Head Start Grant Recipient and the Education Service Provider will promote shared responsibility with parents/guardians for children's early learning and development and implement family engagement strategies that are designed to foster parental confidence and skills in promoting children's learning and development.

The Head Start Grant Recipient and Education Service Providers will develop and implement procedures that include, at a minimum, the following:



- Offering activities that support parent-child relationships and child development including language, dual language, literacy and bi-literacy development as appropriate;
- Providing parents/guardians with information about the importance of their child's regular attendance, and partner with them, as necessary, to promote consistent attendance, impact of attendance on learning outcomes;
- For dual language learners, information and resources for parents/guardians about the benefits of bilingualism and biliteracy.

The Head Start Grant Recipient and Education Service Providers must, at a minimum, offer opportunities for parents to participate in a research-based parenting curriculum that builds on parents' knowledge and offers parents the opportunity to practice parenting skills to promote children's learning and development.

The Head Start Grant Recipient and Education Service Providers will develop and implement procedures, including training for staff, to ensure all families are offered the opportunity to participate in the research-based parenting curriculum

Performance Standard(s):

1302.51(a)(b)

	DHS Head Start Program Policy		
FAMILY 7			
SUBJECT	Family Partnership Services		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program will engage in a process of collaborative and respectful partnership building with parents/guardians to establish mutual trust and to identify needed services, supports, family strengths, and family goals. This process must take into consideration each family's readiness and willingness to participate in the process and must be engaged in jointly with parents. Family services are to be individualized and focused on the achievement of identified outcomes as described in the Head Start Parent, Family, and Community Engagement Framework (PFCE).



Family and Community Support staff will offer:

- a Family Partnership Agreement to orient parents/guardians of the roles and responsibilities of Head Start parents/guardians and staff.
- a Family Strengths and Needs Assessment tool to identify each family's strengths, needs related to the family engagement outcomes in the PFCE.
- a Individualized family partnership services that off an opportunity to develop family goals. The goal setting process must include family goals, strategies for success, staff support to be provided, timeframes, and community resources that are available to assist families in meeting their goals.
- Existing plans and community resources that address family needs, strengths, and goals, in order to avoid duplication of efforts.

The Head Start Program will establish ongoing collaborative relationships and partnerships with community organizations. Relationships will be built by establishing joint agreements, procedures, or contracts and arranging for onsite delivery of services as appropriate. This helps to facilitate access to community services that are responsive to children's and families' needs and family partnership goals, and community needs and resources, as determined by the community assessment

Performance Standard:

1302.52; 1302.53

	DHS Head Start Program Policy		
NUTRITION 2			
SUBJECT	Nutritional Needs & Safety		
REFERENCE	Nutrition Services		
EFFECTIVE	6/18/2014		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

Education Services Providers will develop and implement procedures to address the following:

- The nutritional needs and safety of all children
- Policies and procedures regarding food not on the established menu. Education Service Providers may allow parent/guardians to send and bring food for lunch for their child to accommodate for family preference. Parents/guardians must follow campus/district guidelines and policies outlining foods not allowable and ensuring each child's health and safety.
- Education Service Providers must not require the parent/guardian to provide food to accommodate a doctor prescribed special diet.
- Parents/guardians may join their child for lunch, following campus/district guidelines and policies.
- Adults, including teachers, teacher assistants, parents/guardians, and/or volunteers actively participating during breakfast and lunch meal service must share the same meals as the children, to the best extent possible and free of charge. Staff, parents/guardians, and/or volunteers attending field trips will receive the same meal as the children free of charge.
- Education Service Providers should follow district policies and procedures in regard to celebrations and outside food. In an effort to promote healthy eating habits, ensure that all children receive a nutritious and balanced diet, and accommodate children with food allergies and/or other dietary restrictions, staff should work with parents to find the most appropriate way to celebrate.

Performance Standard(s):

1302.42(b) (4); 1302.44(a)

	DHS Head Start Program Policy		
PDM 7			
SUBJECT	Identification and Reporting of Child Abuse and Neglect		
REFERENCE	Program Design and Management		
EFFECTIVE	4/13/2010		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, must develop and implement procedures to respond to suspected or known child abuse whether it occurs at or away from the program.

All Head Start Program Staff, including Department of Human Services (DHS) Head Start staff, teachers, teacher assistants, and all other campus or site personnel, consultants, contractors, and volunteers must follow the Education Service Provider policies and procedures regarding child abuse and neglect.

The Head Start Program Administrator must be notified immediately, and no later than 24 hours of an allegation of abuse or neglect against a City of San Antonio DHS Head Start or School District/Child Care staff member, substitute, volunteer, consultant, or contractor. .

The Head Start Administrator must also be notified of any report that has been made for suspected child abuse or neglect occurring outside of the Head Start Program within 24 hours of reporting. Such official incident reporting must be provided in writing.

Additionally, when any DHS Head Start Program Staff, contractor, Education Service Provider, Child Care Center staff, or consultants, contractors, volunteer witnesses or suspects child abuse or neglect, they must make a report to the Texas Department of Family and Protective Services (TDFPS) within 48 hours. According to the State of Texas, Title 5, Chapter 261 of the Family Code, “child abuse is an act or omission that endangers or impairs a child’s physical, mental or emotional health and development.” Child abuse may take several forms including, but not limited to:

- Physical, mental, or emotional injury
- Sexual abuse
- Sexual exploitation
- Physical neglect
- Medical neglect
- Inadequate supervision

In filing a report, staff will follow state regulations regarding the timeframes that reports must be made, the information that must be reported, and confidentiality of reported information.

Education Service Providers will develop and implement procedures to notify the parents/guardians of any suspected or known child abuse incidents occurring within the Head Start Program.

All Head Start staff, including DHS Head Start staff, teachers, teacher assistants, and all other campus or site personnel, substitutes, consultants, contractor, and volunteers receive annual training on procedures for identifying and reporting child abuse or neglect. Head Start staff are expected to fully cooperate with TDFPS and other applicable agency personnel regarding an investigation of suspected abuse or neglect.

Performance Standard(s):



1302.47(b)(4)(i)(K); 1302.47(b)(5)(i); 1302.53(a)(2)(iii); 1302.90(b)(2); 1302.92(b)(2); 1302.102(d)(1)(ii)(A); 1303.22(c)(5)(iii); 1303.22(c)(8)

Office of the Texas Attorney General, “What Can We Do about Child Abuse Part 2”:

https://www.texasattorneygeneral.gov/ag_publications/txts/childabuse2.shtml

Family Code, Chapter 261. Investigation of Report of Child Abuse or Neglect

<http://www.statutes.legis.state.tx.us/Docs/FA/htm/FA.261.htm>

	DHS Head Start Program Policy		
PDM 9			
SUBJECT	Critical Incident Reporting		
REFERENCE	Program Design and Management		
EFFECTIVE	12/13/2011		
Policy Council Approval: 7/28/20	Policy Council Revision: Pending	Governing Body Approval: 8/13/20	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Grant Recipient and Education Service Providers, will develop and implement procedures for Critical Incident Reporting (CIR). All staff must be trained on incident reporting.

A critical incident includes, but is not limited to:

- Suspected child abuse/neglect which may or may not have occurred during Head Start hours.
- Allegations of child abuse/neglect or maltreatment against any Head Start staff member, volunteer, consultant, and or contractor, including, but not limited to grabbing, shoving, shaking, swatting, or dragging a child; spanking or any other type of corporal or physical punishment; binding, tying, or taping a child; terrorizing a child with threats or menacing acts; or any form of sexual contact.
- Incidents which may have placed a child, family member, or staff in danger.
- Any incident where a child is left unsupervised while in the care or under the supervision of program staff, which includes leaving a child alone anywhere on the grounds of a Head Start facility (e.g., in a classroom, bathroom, on a playground), as well as outside the facility in a parking lot, on a nearby street, or on a bus or another program-approved transportation or excursion/field trip.
- Inappropriate discipline, which is any type of conduct used to instill fear or humiliate rather than to educate a child, such as poking or pinching a child; making fun of or laughing about a child; using/withholding food or an activity as a punishment or reward; or isolating a child.
- Health incidents and illnesses, which include, but are not limited to:
 - Injuries that require urgent medical attention by a health-care professional, such as a broken bone; a severe sprain; chipped or cracked teeth; head trauma; deep cuts; contusions or lacerations; or animal bites
 - Child or staff member leaving by emergency medical transport.
 - Any reportable disease/illnesses, as indicated by the Centers for Disease Control and Prevention, State of Texas, the Texas Education Agency, the City of San Antonio Metro Health Department, or School District Health Department Child receiving outside medical attention at any point in time for an injury sustained during Head Start program hours.

- Unauthorized release where a child is released from a Head Start facility, bus, or other approved program transportation to a person without the permission or authorization of a parent or legal guardian and whose identity had not been verified by photo identification.
- Any incident which has the potential to generate negative media coverage.
- Any media inquiry/ coverage of the program.
- Unplanned interruption in Head Start Program services.
- Closure of any facility or part of a facility, including outdoor play areas.
- Accidents involving vehicles that transport children and families.



When applicable, parents/guardians must be notified of critical incidents within 24 hours of occurrence. Education Service Providers must also provide notification to the Head Start Administrator or designee within 24 hours.

Performance Standard(s):

1302.47(c); 1302.102(d)(1)(ii); 1304.12; 1303.79(b)(3)

Information Memorandum:

ACF-IM-HS-22-07

	DHS, Head Start Program Policy		
PDM 15			
SUBJECT	Staff Health Requirements		
REFERENCE	Program Design and Management		
EFFECTIVE	6/15/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: Pending	Governing Body Approval: 9/28/17	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop and implement procedures requiring identified program staff to submit a copy of their most recent physical exam or approved health document within 30 business days of hire to ensure that staff do not pose a significant risk to the health or safety of others in the program. The annual/physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.



Every five years after the initial hire date, staff must submit a copy of their most recent physical exam or approved health document. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop and implement procedures to ensure regular volunteers complete appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

Documentation of health exams, vaccination information, screenings, and/or tests must be kept on file.

Performance Standard(s):

1302.93; 1302.94

	DHS Head Start Program Policy		
PDM 18			
SUBJECT	Program Data - Access and Security		
REFERENCE	Program Design and Management		
EFFECTIVE	April 23, 2018		
Policy Council Approval: 1/22/19	Policy Council Revision: Pending	Governing Body Approval: 2/28/19	Governing Body Revision: Pending
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Policy:

The Head Start Grant Recipient and Education Service Providers must establish an internal procedure for proper access and security of program data for the City of San Antonio Department of Human Services Head Start and Early Head Program (DHS Head Start).

Procedure:

DHS Head Start utilizes ChildPlus as the secure database system for storing and tracking client information.

All user account holders are required to complete ChildPlus Access Request and ChildPlus User Security and Confidentiality Agreement forms. Upon completion, the forms are scanned and attached by the ChildPlus Administrator in ChildPlus under each respective user profile.

By accessing the database, staff understand and agree to abide by all terms of the ChildPlus User Security and Confidentiality Agreement and any applicable state and federal laws regarding Personally Identifiable Information (PII) and Protected Health Information (PHI).

- Education Service Providers are required to designate a staff member to complete the Personnel Profile for all staff members funded by the Head Start or EHS grant or anyone who works with children or families enrolled in the Head Start or EHS programs under the Management Module in ChildPlus. Designated staff is defined as preauthorized users in the Management/Personnel Module.
- Upon completion of the Personnel Profile, the designee will notify the ChildPlus Administrator if the user requires access to PII. Not all personnel require a ChildPlus user account.
- The ChildPlus Administrator will confirm with the designee the role of personnel and the types of access required.

- The ChildPlus Administrator will complete a User Security profile in ChildPlus, assign a login username and temporary password, restrict access by location, and designate User Security group(s).
- The ChildPlus Administrator will email the new account holder the login username and temporary password.
- The new account holder will log into ChildPlus and change the temporary password to a permanent password.

Authorized ChildPlus users are granted access under one of the following groupings:

- Staff: A ChildPlus personnel account will be created for all staff. ChildPlus user accounts and access is granted upon the approval of the ChildPlus Access Request Form and the completion of the ChildPlus User Security and Confidentiality Agreement Form.
- Education Service Providers: An assigned ChildPlus Super User for each Service Provider formally requests accounts via email for Service Provider Head Start Staff. Service providers are subject to the confidentiality provisions under the Family Educational Rights and Privacy Act (FERPA).
- Contracted Providers: A Special Projects Manager or designee will request user accounts for contractual providers via email or meeting with the ChildPlus Administrator. To meet the requirements of Health Insurance Portability and Accountability Act of 1996 (HIPAA), DHS Head Start requires any contract that include access to client information include an enforceable Business Associate Agreement (BAA). BAAs are documented in the professional services contract with the DHS Head Start.

Implementation of technical policies and procedures for electronic information systems that maintain electronic PII, PHI, and IDEA Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard HIPAA, FERPA, PHI, PII, and the Individuals with Disabilities Education Act (IDEA) Part B and C data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C electronically must follow encryption guidelines and ensure the receiving entity is an authorized recipient of the specific data being delivered

Staff may utilize a program issued computer or device to access ChildPlus.

Staff ensures the environment in which they are working is secure and only authorized

persons are within viewing distance of the authorized user's screen and/or confidential documents. Staff should use a privacy screen for all monitors and laptop screens as appropriate.

All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).

Disclosure of ChildPlus information to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

All DHS Head Start staff must successfully complete the following trainings:

- COSA Security Awareness Training
- HIPAA Training



Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department and/or the Training and Technical Assistance Team.

All DHS Head Start staff must acknowledge the of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and ensure all staff receive training on safeguarding FERPA, HIPAA, PHI, PII and (IDEA) Part B and C data.

Performance Standard:

1302.101(b)(4)

	DHS Head Start Program Policy		
PDM 19			
SUBJECT	Management of Program Data		
REFERENCE	Program Design and Management		
EFFECTIVE	April 23, 2018		
Policy Council Approval: 1/22/19	Policy Council Revision: Pending	Governing Body Approval: 2/28/19	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, must establish an internal procedure for proper management of program data for the City of San Antonio Department of Human Services Head Start and Early Head Start Program (DHS Head Start).

Procedure:

Implementation of technical policies and procedures for electronic information systems that maintain electronic Personal Identifiable Information (PII), Protected Health Information (PHI), and Individuals with Disabilities Education Act (IDEA) Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act of 1996 (HIPAA), PHI, PII, and the IDEA Part B and C related data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C information electronically must ensure the receiving entity is an authorized recipient of the specific data being delivered.

- Only computers and or device configured by the IT Department for use on the CoSA network or Education Service Provider network are authorized for the storage or transport of PHI, PII and/or IDEA Part B and C data.
- Staff may utilize a program issued device to access systems to view and maintain PHI, PII, and IDEA Part B and C files.
- Staff ensures the environment in which they are working is secure and only authorized persons are within viewing distance of the authorized user's screen. Staff should use a privacy screen for all monitors and laptop screens as appropriate.
- Disclosure of PII and/or PHI, and/or IDEA Part B and C to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

- Personal devices shall not be used to store or transmit unencrypted protected data.
- Any removable media or storage devices used to transfer PHI, PII, and/or IDEA Part B and C data must be encrypted.
- All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).
- If any PHI, PII, and/or IDEA Part B and C data is transmitted via email, the email must be encrypted
- Hard copies (i.e., paper) of any PHI, PII, and/or IDEA Part B and C data must be kept secured in a lockable file cabinet or other secured storage.
- In the event that PHI, PII, and/or IDEA Part B and C data, either hard copy or electronic, are transported between locations, staff must take all precautions to ensure the materials remain secure and must remain in the presence of staff at all times.

Facsimiles

Any documents received via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be uploaded or scanned into appropriate software (i.e., ChildPlus) as soon as possible. Any electronic copies of the facsimile should be saved to the user's desktop; once the upload is completed the file should be deleted and the deletion confirmed. Any hardcopies of the facsimile must be stored in a secure location or destroyed. Any hardcopies of the documents sent via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be either stored in a secure location or destroyed.

All DHS Head Start staff must successfully complete the following trainings annually:

- COSA Security Awareness Training
- HIPAA Training



Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department and/or the Training and Technical Assistance Team.

All DHS Head Start staff review and acknowledge review and acceptance of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and receive training on safeguarding FERPA, HIPAA, PHI, PII and IDEA Part B and C data.

Performance Standard:

1302.101(b)(4)

	DHS Head Start Program Policy		
EDUCATION 5			
SUBJECT	Development and Behavior Screening		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	4/6/2010		
Policy Council Approval: 7/25/17	Policy Council Revision: 5/24/22	Governing Body Approval: 9/28/17	Governing Body Revision: 8/4/22
PAGE: 1 of 2			

Policy:

The Head Start Program uses the Ages and Stages Questionnaire (ASQ-3) as the developmental screening and Ages and Stages Questionnaire: Social and Emotional, Second Edition (ASQ: SE-2) as the behavioral screening.

Education Service Providers will develop and implement procedures to ensure that developmental and behavioral screenings are completed in collaboration with each child's parent/guardian on or before the 45th calendar day after the child first attends the program or for any child that did not receive a developmental or behavioral screening the previous school year. Developmental (ASQ-3) and behavioral screenings (ASQ:SE-2) must be completed within this timeframe to identify early concerns regarding a child's developmental, sensory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills for appropriate referrals.

The ASQ-3 and ASQ:SE-2 should not be completed by the teacher. If the parent or guardian needs assistance completing the questionnaire, the teacher or other staff member may provide the most appropriate accommodations for completion. The developmental and behavioral screenings may be distributed by the teacher no more than ~~four~~eight weeks prior to the first day of a child's entry into school. To the greatest extent possible, the screening procedures must be sensitive to the child's cultural background and home language.

Education Service Providers will develop and implement procedures that include at a minimum:



- Identification of staff responsible for administering, scoring, follow-up, and referrals
- Monitoring the fidelity of the screenings
- Ensuring the appropriate version is utilized for child's age and language
- Ensuring proper completion of the screening tool

- Ensuring accurate scoring of the screening tool
- Establishing timeframes for follow-up, referrals, and documentation, including parent /guardian refusals.
- Following the *City of the San Antonio Benchmark Due Date Guide*, applicable *ChildPlus Data Entry Guide*, and the *Head Start File Scan Order and Process Guide*
- Completing routine internal monitoring of child files.

Education Service Providers will develop and implement procedures to address the use of the ASQ-3 and ASQ:SE-2 with children with an identified disability or IEP. A child is not automatically disqualified from receiving a developmental or behavioral screening if they have an identified disability or IEP. Sensitivity to the parent/guardian should always be a priority. Procedures may include a determination to complete only certain sections of the ASQ-3 or the ASQ:SE-2. If it is determined by the teacher or other early childhood professional that it is not appropriate for a parent/guardian to complete any section of the developmental or behavioral screening, the information supporting this determination must be documented in Child Plus according to the applicable *ChildPlus Data Entry Guide*.

Performance Standard:
1302.33

Additional Resources: <http://agesandstages.com/free-resources/articles/when-should-you-not-have-parents-complete-asq/>

	DHS Head Start Program Policy		
EDUCATION 10			
SUBJECT	Lesson Plans		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	9/13/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: 7/25/17	Governing Body Approval: 9/28/17	Governing Body Revision: 9/28/17
PAGE: 1 of 1			

Policy:

Education Service Providers will develop and implement lesson plan procedures. Lesson plans should include teacher directed and child initiated, large group, small group, and one/one lessons and activities that support social, emotional, cognitive, physical development, and language skills. Lesson plans should include alignment ~~with the five Central Domains of the Head Start Early Learning Outcomes Framework and to~~ the Texas Prekindergarten Guidelines, and documentation of individualized instruction, modifications, and accommodations for all children, including children with an Individualized Education Plan.



Current lesson plans must be posted for parents/guardians and other staff to review.

Performance Standard(s):

1302.31; 1302.32

Head Start Act:

Head Start Act Sec.641A. (a) (1)(B) (i) - (x)

	DHS Head Start Program Policy		
EDUCATION 11			
SUBJECT	Discipline and Guidance		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	12/13/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: 4/23/19	Governing Body Approval: 9/28/17	Governing Body Revision: 5/23/19
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Policy:

Education Service Providers will develop and implement policies and procedures on discipline and guidance appropriate for children 3-5 years old. A copy must be provided to all parents/guardians, staff, volunteers, substitute teachers, and contractors. Documentation must be maintained showing receipt of the written discipline and guidance policies and procedures.

The policies and procedures must include positive methods that build self-esteem and support self- control and self-regulation such as:

- Praise and encouragement of developmentally appropriate behavior
- Frequent reminders of behavior expectations using clear and positive statements
- Redirection of behavior using positive statements

The policies and procedures must include guidance on appropriate communication with parents/guardians regarding a child's behavior.

Discipline must be constructive, individualized, and consistent for each child, appropriate to the child's level of understanding, and directed toward teaching the child developmentally appropriate behavior. Education Service Providers must prohibit or severely limit the use of suspension due to a child's behavior. The Education Service Providers must not expel or unenroll a child from Head Start due to a child's behavior, unless approved by the Head Start Administrator.



When appropriate, for the child's age and development, a brief supervised separation, or time away from the group, may be necessary, and should be limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following are prohibited:

- Corporal punishment or threats of corporal punishment
- Punishment associated with food, naps, or toileting
- Pinching, shaking, or biting a child
- Hitting a child with hand or an object
- Putting anything in or on a child's mouth
- Humiliating, ridiculing, rejecting, or yelling at a child
- Pointing a finger in a child's face
- Snapping fingers at a child
- Use of isolation to discipline a child
- Binding or tying a student to restrict movement
- Threatening phrases or sarcastic language
- Subjecting a child to harsh, abusive, or profane language
- Placing a child in a locked or dark room, bathroom, or closet with the door closed
- Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age
- Child restraint performed by staff not certified in proper restraint procedures
- Withholding outdoor free play
- Requiring a parent/guardian to pick up a child due to misbehavior

Performance Standard(s):

1302.17; 1302.31 (e)(2,4);1302.90 (c)(1-2)

	DHS Head Start Program Policy		
EDUCATION 16			
SUBJECT	Learning During Mealtime		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	6/18/2014		
Policy Council Approval: 7/25/17	Policy Council Revision: 5/25/21	Governing Body Approval: 9/28/17	Governing Body Revision: 5/27/21
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Policy:

The Head Start Program recognizes the importance of Family Style Meals during breakfast and lunch in supporting social, emotional, language, gross and fine motor learning, and development.

Education Service Providers must develop and implement procedures related to food availability for adults participating in mealtime.

Any adults actively participating with the class during mealtime should share the same food as the children, free of charge, including during field trips and other Head Start related activities. Any adult receiving food, paid for by the Head Start Program, must be involved in the meal with the students at some point during the scheduled meal service.

Ratio must be maintained during mealtime and at a minimum, one adult should sit with the children during the majority of the meal service.



Children are not required to sit at one table or all at the same table. However, children must not be isolated or sit alone during mealtime.

The current daily menu must be posted and made available to parents/guardians.

Each Education Service Provider will develop and implement procedures to address mealtime that includes the following:

- Role of adults, including teachers, teaching assistants, floaters, substitutes, volunteers, and parents/guardians
- Role of the children, including setting the table, passing out food, and helping with clean up
- Training for staff regarding learning opportunities during mealtime
- Outside food
- Mealtime during field trips

Performance Standard(s):
1302.31 (e)(2); 1302.44

	DHS Head Start Program Policy		
EDUCATION 18			
SUBJECT	Coaching		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	6/27/2017		
Policy Council Approval: 7/25/17	Policy Council Revision: 4/23/19	Governing Body Approval: 9/28/17	Governing Body Revision: 5/23/19
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Policy:

The Head Start Program will implement a researched-based coordinated coaching program for teaching staff including teachers and aides/instructional assistants/paraprofessionals. Education Service Providers will develop and implement procedures for coaching that must include the following:

- Assessment of staff to identify strengths and areas of needed support
- A system to determine staff in need of intensive coaching
- A system to share staff selected for intensive coaching prior to the start of the identified coaching time period
- Identification of qualified coaches
- A system that includes a cycle of observations, feedback, and goal setting and tools used to document the cycle
- Documentation of coaching consultations in Child Plus according to the *City of San Antonio Benchmark Due Date Guide* and applicable *ChildPlus Data Entry Guide*

Performance Standard:

1302.92 (c)

	DHS Head Start Program Policy		
EDUCATION 21			
SUBJECT	Field Trips		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2019		
Policy Council Approval: 4/23/19	Policy Council Revision: 4/23/19	Governing Body Approval: 5/23/19	Governing Body Revision: 5/23/19
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Policy:

Education Service Providers will develop and implement procedures related to field trips. The procedures should address the following:

- Opportunities for parents/guardians to participate/volunteer for the fieldtrip.
- A system to select attendees and ensure all parents/guardians are offered an equal opportunity to participate throughout the program year.
- Any parent/guardian or volunteer that is asked to attend must have all entrance fees paid for by the program.
- How field trips are funded and the process to ensure payment.
- A system to provide lunch for staff, children, parents/guardians, and volunteers during field trips.
- ~~Food not on the approved menu is not allowed during field trips.~~
- A system to ensure class ratio is maintained during field trips and ensure no child is left alone or unsupervised. Children may be placed in small groups to ensure safety. While a parent/guardian or volunteer may be used to maintain the required teacher/student ratio a parent/guardian or volunteer must never be left alone with children.
- All volunteers must sign the Head Start Standards of Conduct, pass a background check, and receive volunteer training. Education Service Providers must maintain documentation of volunteer training, background checks, and Standards of Conduct.
- Transportation of children, parents/guardians, volunteers, and staff during field trips. Vehicles that are not school buses, or do not meet the definition of an allowable alternative vehicle cannot be used for the purpose of transporting children for field trips.
- A parent/guardian cannot be required to attend a field trip. Every child must be offered the opportunity to attend the field trip regardless of parent/guardian attendance.
- Early release to a parent/guardian during a field trip.

Performance Standard(s):

1302.18; 1302.21(b)(1-4); 1302.47(5)(iii); 1302.90; 1302.94(b); 1303.71(a)

	DHS Head Start Program Policy			
EnvHS 1				
SUBJECT	Safe Environments			
REFERENCE	Environmental Health and Safety			
EFFECTIVE	9/13/2011			
Policy Council Approval: 7/25/17	Policy Council Revision: 4/23/19	Governing Body Approval: 9/28/17	Governing Body Revision: 5/23/19	
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Policy:

Education Service Providers will maintain indoor/outdoor environments and facilities to ensure they are safe, clean, and in quality condition so as to prevent injury to a child. Education Service Providers will develop and implement procedures to maintain safe environments, -free from pollutants, hazards and toxins, including lead, -that are accessible to children and could endanger children's safety, including lead free drinking water; and correct issues identified as unsafe and/or hazardous through the monitoring process._



Education Service Providers will develop and implement procedures to ensure create a procedure that includes state-certified lead testing of water, soil, and paint once every three years. Should any testIf lead test results are be positive, the Education Service Provider mustwill inform the Head Start Grant Recipient and provide a plan for abatement within 24 hours of notice.

Education Service Providers will also create an inventory replacement plan that ensures all furniture is routinely inspected and replaced.

Education Service Providers will submit all work orders from all sites as requested by the Head Start Grant Recipient with the current status and timeline of completion for each work order.

The Education Service Provider will ensure that work orders are completed within 20 business days of creation. If the Education Service Provider requires additional time to complete a work order, they must submit a request in writing to the Head Start Grant Recipient. If an unsafe and/or hazardous risk is identified, the Education Service Provider will address the issue and submit a work order within 24 hours. The Education Service Provider will be monitored routinely to ensure that the work order is completed.

Performance Standard:

	DHS Head Start Program Policy		
FAMILY 2			
SUBJECT	Staff/Parent Communication System		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: 5/24/22	Governing Body Approval: 8/13/20	Governing Body Revision: 8/4/22
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop relationships with parents/guardians and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents/guardians to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community.



~~All Head Start staff, including Family and Community Support Staff and school district staff, will ensure continuous communication with families. Nurturing (or Respectful??) relationships with parents are developed. This will allow our families to develop a sense of knowledge, trust and respect for our staff members, thus allowing staff and parents/guardians to work easily together to ensure that each child and family are receiving the full amount of benefits that Head Start has to offer.~~

The Head Start Program will conduct family engagement services in the family's preferred language, or through an interpreter, to the extent possible, and ensures families have the opportunity to share personal information in an environment in which they feel safe.

The Head Start Grant Recipient will work with the Education Service Provider to ensure the establishment of a Parent Connection Committee (PCC) comprised exclusively of parents/guardians of currently enrolled children at each site/center as early in the program year as possible. At a minimum, procedures must include:

- Activities to ensure parents/guardians of currently enrolled children understand the process for elections to the Head Start Policy Council (HSPC) and other leadership opportunities.
- Opportunities for PCC members to ~~assist~~ advise staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families.
- A process for PCC members to communicate with the Head Start Policy Council (HSPC).
 - i. PCC agendas must dedicate time to allow for parent questions/discussion

Performance Standard(s):
1302.50(b) & (5); 1301.4

	DHS Head Start Program Policy		
FAMILY 5			
SUBJECT	Parent Activities to Promote Child Learning and Development		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: 5/24/22	Governing Body Approval: 8/13/20	Governing Body Revision: 8/4/22
PAGE: 1 of 1			

Policy:

The Head Start Grant Recipient and the Education Service Provider will promote shared responsibility with parents/guardians for children's early learning and development and implement family engagement strategies that are designed to foster parental confidence and skills in promoting children's learning and development.



The Head Start Grant Recipient and Education Service Providers will develop and implement procedures that include, at a minimum, the following:

- Offering activities that support parent-child relationships and;
- Offer activities that support child development ~~(including language, dual language, literacy and bi-literacy development)~~ as appropriate;
- ~~Providing~~ parents/guardians with information about the importance of their child's regular attendance, and partner with them, as necessary, to promote consistent attendance ~~-(impact of attendance on learning outcomes)~~;

For dual language learners, information ~~r~~ and resources for parents /guardians about the benefits of bilingualism and biliteracy.

Performance Standard(s):

1302.51(a)

	DHS Head Start Program Policy		
FAMILY 7			
SUBJECT	Family Partnership Services		
REFERENCE	Family and Community Support		
EFFECTIVE	7/28/2020		
Policy Council Approval: 7/25/17	Policy Council Revision: 7/28/20	Governing Body Approval: 9/28/17	Governing Body Revision: 8/13/20
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Policy:

The Head Start Program will engage in a process of collaborative and respectful partnership- building with parents/guardians to establish mutual trust and to identify needed services, supports, family strengths, and family goals. This process must take into consideration each family's readiness and willingness to participate in the process and must be engaged ~~in~~ jointly with parents. Family services are to be individualized and focused on the achievement of identified outcomes as described in the Head Start Parent, Family, and Community Engagement Framework (PFCE).

Family and Community Support staff will offer:



- Family Partnership Agreements to orient parents/guardians of the roles and responsibilities of Head Start parents/guardians and staff.
- Family Strengths and Needs Assessments ~~tool~~ to identify each family's strengths and needs
- Opportunities to develop individualized family goals. The goal setting process must include family goals, strategies for success, staff support to be provided, timeframes, and community resources that are available to assist families in meeting their goals.
- -A collaborative approach to working with families with existing plans/goals to avoid duplication of services.
- Community resources to help that are able to meet the family's identified needs.
-

Performance Standard:

1302.52; 1302.53

1302.47b(1)(2)

Information Memorandum:
ACF-IM-HS-23-01

	DHS Head Start Program Policy		
NUTRITION 2			
SUBJECT	Outside Food & Adult Meals <u>Nutritional Needs & Safety</u>		
REFERENCE	Nutrition Services		
EFFECTIVE	6/18/2014		
Policy Council Approval: 7/25/17	Policy Council Revision: 4/23/19	Governing Body Approval: 9/28/17	Governing Body Revision: 5/23/19
PAGE: 1 of 1			

Policy:

Education Services Providers will develop and implement procedures to ~~address the following:~~
~~ensure-~~

- ~~The nutritional needs and safety of all children~~ and address the following:

Outside Food

- Policies and procedures regarding food not on the established menu. Education Service Providers may allow parent/guardians to send and bring food for lunch for their child to accommodate for family preference. Parents/guardians must follow campus/district guidelines and policies outlining foods not allowable and ensuring each child's health and safety.
- Education Service Providers must not require the parent/guardian to provide food to accommodate a doctor prescribed special diet. ~~Food not on the approved menu is not allowed during Head Start meal service which includes field trips and other Head Start related activities. The only allowable exceptions to the approved menu are accommodations/substitutions approved by the school district food and nutrition program.~~
- Parents/guardians may join their child for lunch, following campus/district guidelines and policies.

Classroom Staff, Parents/Guardians, and Volunteers

- Adults, including teachers, teacher assistants, parents/guardians, and/or volunteers actively participating during breakfast and lunch meal service must share the same meals as the children, to the best extent possible and free of charge. Staff, parents/guardians, and/or volunteers attending field trips will receive the same meal as the children free of charge.



Class Parties and Celebrations

- Education Service Providers should follow district policies and procedures in regards to

celebrations and outside food. In an effort to promote healthy eating habits, ensure that all children receive a nutritious and balanced diet, and accommodate children with food allergies and/or other dietary restrictions, staff should work with parents to find the most appropriate way to celebrate.

Performance Standard(s):

1302.42(b) (4); 1302.44(a)

	DHS Head Start Program Policy		
PDM 7			
SUBJECT	Identification and Reporting of Child Abuse and Neglect		
REFERENCE	Program Design and Management		
EFFECTIVE	4/13/2010		
Policy Council Approval: 7/25/17	Policy Council Revision: 5/24/22	Governing Body Approval: 9/28/17	Governing Body Revision: 8/4/22
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Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, must develop and implement procedures to respond to suspected or known child abuse whether it occurs at or away from the program.

All Head Start Program Staff, including Department of Human Services (DHS) Head Start staff, teachers, teacher assistants, and all other campus or site personnel, consultants, contractors, and volunteers must follow the Education Service Provider policies and procedures regarding child abuse and neglect.

The Head Start Program Administrator must be notified immediately, and no later than within 24 hours of an allegation of abuse or neglect against a City of San Antonio DHS Head Start or School District/Child Care staff member, substitute, volunteer, consultant, or contractor. incident that has occurred within the Head Start Program.

The Head Start Administrator must also be notified of any report that has been made for suspected child abuse or neglect occurring away-outsidefrom the of the Head Start Program within 24 hours of notificationreporting. Such official incident reporting must be provided in writing.

Additionally, when any DHS Head Start Program Staff, contractors, Education Service Providers, Child Care Center staff, or consultants, contractors, volunteers witnesses or suspects child abuse or neglect, they must make a report to the Texas Department of Family and Protective Services (TDFPS) within 48 hours. According to the State of Texas, Title 5, Chapter 261 of the Family Code, “child abuse is an act or omission that endangers or impairs a child’s physical, mental or emotional health and development.” Child abuse may take several forms including, but not limited to:

- Physical, mental, or emotional injury
- Sexual abuse
- Sexual exploitation
- Physical neglect

- Medical neglect
- Inadequate supervision

In filing a report, personnel staff will follow state regulations regarding the timeframes that reports must be made, the information that must be reported, and confidentiality of reported information.

Education Service Providers will develop and implement procedures to notify the parents/guardians of any suspected or known child abuse incidents occurring within the Head Start Program.

~~Should Education Service Provider management be informed that a report has been made for suspected child abuse or neglect occurring outside the Head Start Program, they must comply with notification requirements outlined in this policy.~~



All Head Start staff, including DHS Head Start staff, teachers, teacher assistants, and all other campus or site personnel, substitutes, consultants, contractor, and volunteers receive annual training on procedures for identifying and reporting child abuse or neglect. Head Start staff are expected to fully cooperate with TDFPS and other applicable agency personnel regarding an investigation of suspected abuse or neglect. ~~to report any suspected or known incidents.~~

Performance Standard(s):

1302.47(b)(4)(i)(K); 1302.47(b)(5)(i); 1302.53(a)(2)(iii); 1302.90(b)(2); 1302.92(b)(2); 1302.102(d)(1)(ii)(A); 1303.22(c)(5)(iii); 1303.22(c)(8)

Office of the Texas Attorney General, "What Can We Do about Child Abuse Part 2":
https://www.texasattorneygeneral.gov/ag_publications/txts/childabuse2.shtml

Family Code, Chapter 261. Investigation of Report of Child Abuse or Neglect
<http://www.statutes.legis.state.tx.us/Docs/FA/htm/FA.261.htm>

	DHS Head Start Program Policy		
PDM 9			
SUBJECT	Critical Incident Reporting		
REFERENCE	Program Design and Management		
EFFECTIVE	12/13/2011		
Policy Council Approval: 7/28/20	Policy Council Revision: 7/28/20	Governing Body Approval: 8/13/20	Governing Body Revision: 8/13/20
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Policy:

The Head Start Program, including the Grantee Recipiente and Education Service Providers, will develop and implement procedures for Critical Incident Reporting (CIR). All staff must be trained on incident reporting.

A critical incident includes, but is not limited to:

- Suspected child abuse/neglect which may or may not have occurred during Head Start hours.
- Allegations of child abuse/neglect or maltreatment against any Head Start staff member, volunteer, consultant, and or contractor, including, but not limited to grabbing, shoving, shaking, swatting, or dragging a child; spanking or any other type of corporal or physical punishment; binding, tying, or taping a child; terrorizing a child with threats or menacing acts; or any form of sexual contact.
- Incidents which may have placed a child, family member, or staff in danger,
- , including any incidents in which a child was left unsupervised.
- Any incident where a child is left unsupervised while in the care or under the supervision of program staff, which includes leaving a child alone anywhere on the grounds of a Head Start facility (e.g., in a classroom, bathroom, on a playground), as well as outside the facility in a parking lot, on a nearby street, or on a bus or another program-approved transportation or excursion/-field trip.
- Inappropriate discipline, which is any type of conduct used to instill fear or humiliate rather than to educate a child, such as poking or pinching a child; making fun of or laughing about a child; using/withholding food or an activity as a punishment or reward; or isolating a child.
- Health incidents and illnesses, which include, but are not limited to:
 - Injuries that require urgent medical attention by a health-care professional, such as a broken bone; a severe sprain; chipped or cracked teeth; head trauma; deep cuts; contusions or lacerations; or animal bites.
 - Child or staff member leaving by emergency medical transport.
 - Any reportable disease/illnesses, as indicated by the Centers for Disease Control and Prevention, State of Texas, the Texas Education Agency, the City of San Antonio Metro Health Department, or School District Health Department Contagious diseases that could lead to an

~~outbreak.~~

- Child receiving outside medical attention at any point in time for an injury sustained during Head Start program hours.

- Unauthorized release where a child is released from a Head Start facility, bus, or other approved program transportation to a person without the permission or authorization of a parent or legal guardian and whose identity had not been verified by photo identification.
- Any incident which has the potential to generate negative media coverage.
- Any media inquiry/ coverage of the program.
- Unplanned interruption in Head Start Program services.
- Closure of any facility or part of a facility, including outdoor play areas.
- Accidents involving vehicles that transport children and families.



When applicable, parents/guardians must be notified of critical incidents within 24 hours of occurrence. Education Service Providers must also provide notification to the Head Start Administrator or designee within 24 hours.

Performance Standard(s):

1302.47(c); 1302.102(d)(1)(ii); 1304.12; 1303.79(b)(3)

Information Memorandum:

ACF-IM-HS-22-07

	DHS, Head Start Program Policy		
PDM 15			
SUBJECT	Staff Health Requirements		
REFERENCE	Program Design and Management		
EFFECTIVE	6/15/2011		
Policy Council Approval: 7/25/17	Policy Council Revision: 1/25/22	Governing Body Approval: 9/28/17	Governing Body Revision: 2/24/22
PAGE: 1 of 1			

Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop and implement procedures requiring identified program staff to submit a copy of their most recent physical exam or approved health document within 30 business days of hire to ensure that staff do not pose a significant risk to the health or safety of others in the program. The annual/physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

Every five years after the initial hire date, staff must submit a copy of their most recent physical exam or approved health document. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop and implement procedures to ensure regular volunteers complete appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

~~The following requirement regarding vaccines is pending final action and/or court ruling as of December 31, 2021:~~

~~The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, will develop and implement procedures to ensure compliance with the Federal Law requiring all staff, volunteers, and contractors, whose activities involve contact with or provide direct services to children and families, to be fully vaccinated from COVID-19.~~



~~The Head Start Program will develop and implement procedures related to COVID-19 Vaccine exemptions and testing requirements. Staff may request an exception from this mandatory vaccination requirement if the vaccine is medically contraindicated for them or medical necessity requires a delay in vaccination. Staff also may be legally entitled to a reasonable accommodation if they cannot be vaccinated because of a disability, or if the provisions in this policy for vaccination, conflict with a sincerely held religious belief, practice, or observance.~~

~~Anyone for whom a vaccine is medically contraindicated; for whom medical necessity requires a delay in vaccination; or who are legally entitled to an accommodation with regard to the COVID-19 vaccination requirements based on an applicable Federal law must undergo weekly testing for COVID-19.~~

Documentation of health exams, ~~COVID-19~~-vaccination information, screenings, and/or tests must be kept on file.

Performance Standard(s):

1302.93; 1302.94

	DHS Head Start Program Policy		
PDM 18			
SUBJECT	Program Data - Access and Security		
REFERENCE	Program Design and Management		
EFFECTIVE	April 23, 2018		
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22
PAGE: 1 of 3			

Policy:

The Head Start Grant Recipient and Education Service Providers must establish an internal procedure for proper access and security of program data for the City of San Antonio Department of Human Services Head Start and Early Head Program (DHS Head Start).

Procedure:

DHS Head Start utilizes ChildPlus as the secure database system for storing and tracking client information.

All user account holders are required to complete ChildPlus Access Request and ChildPlus User Security and Confidentiality Agreement forms. Upon completion, the forms are scanned and attached by the ChildPlus Administrator in ChildPlus under each respective user profile.

By accessing the database, staff understand and agree to abide by all terms of the ChildPlus User Security and Confidentiality Agreement and any applicable state and federal laws regarding Personally Identifiable Information (PII) and Protected Health Information (PHI).

- Education Service Providers are required to designate a staff member to complete the Personnel Profile for all staff members funded by the Head Start or EHS grant or anyone who works with children or families enrolled in the Head Start or EHS programs under the Management Module in ChildPlus. Designated staff is defined as preauthorized users in the Management/Personnel Module.
- Upon completion of the Personnel Profile, the designee will notify the ChildPlus Administrator if the user requires access to PII. Not all personnel require a ChildPlus user account.
- The ChildPlus Administrator will confirm with the designee the role of personnel and the types of access required.

- The ChildPlus Administrator will complete a User Security profile in ChildPlus, assign a login username and temporary password, restrict access by location, and designate User Security group(s).
- The ChildPlus Administrator will email the new account holder the login username and temporary password.
- The new account holder will log into ChildPlus and change the temporary password to a permanent password.

Authorized ChildPlus users are granted access under one of the following groupings:

- Staff: A ChildPlus personnel account will be created for all staff. ChildPlus user accounts and access is granted upon the approval of the ChildPlus Access Request Form and the completion of the ChildPlus User Security and Confidentiality Agreement Form.
- Education Service Providers: An assigned ChildPlus Super User for each Service Provider formally requests accounts via email for Service Provider Head Start Staff. Service providers are subject to the confidentiality provisions under the Family Educational Rights and Privacy Act (FERPA).
- Contracted Providers: A Special Projects Manager or designee will request user accounts for contractual providers via email or meeting with the ChildPlus Administrator. To meet the requirements of [HIPAA, Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#), DHS Head Start requires any contract that include access to client information include an enforceable Business Associate Agreement (BAA). BAAs are documented in the professional services contract with the DHS Head Start.

Implementation of technical policies and procedures for electronic information systems that maintain electronic PII, PHI, and IDEA Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard HIPAA, FERPA, PHI, PII, and the Individuals with Disabilities Education Act (IDEA) Part B and C data [and information](#) from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C electronically must follow encryption guidelines and ensure the receiving entity is an authorized recipient of the specific data being delivered

~~Only computers configured by ITSD for use on the CoSA network are authorized for accessing ChildPlus.~~

Staff may utilize a program issued computer or device to access ChildPlus.

Staff ensures the environment in which they are working is secure and only authorized

persons are within viewing distance of the authorized user's screen and/or confidential documents. Staff should use a privacy screen for all monitors and laptop screens as appropriate.

All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).

Disclosure of ChildPlus information to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

All DHS Head Start staff must successfully complete the following trainings:

- COSA Security Awareness Training
- [COSA](#) HIPAA Training



Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department [and/or the Training and Technical Assistance Team.](#)

All DHS Head Start staff must acknowledge the of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and ensure all staff receive training on safeguarding FERPA, HIPAA, PHI, PII and (IDEA) Part B and C data.

Performance Standard:

1302.101(b)(4)

	DHS Head Start Program Policy		
PDM 19			
SUBJECT	Management of Program Data		
REFERENCE	Program Design and Management		
EFFECTIVE	April 23, 2018		
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22
PAGE: 1 of 2			

Policy:

The Head Start Program, including the Head Start Grant Recipient and Education Service Providers, must establish an internal procedure for proper management of program data for the City of San Antonio Department of Human Services Head Start and Early Head Start Program (DHS Head Start).

Procedure:

Implementation of technical policies and procedures for electronic information systems that maintain electronic Personal Identifiable Information (PII), Protected Health Information (PHI), and ~~IDEA~~ Individuals with Disabilities Education Act (IDEA) Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act of 1996 (HIPAA), PHI, PII, and the ~~Individuals with Disabilities Education Act (IDEA)~~ related data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C information electronically must ensure the receiving entity is an authorized recipient of the specific data being delivered.

- Only computers and/or device configured by ~~ITSD~~ the IT Department for use on the CoSA network or Education Service Provider network are authorized for the storage or transport of PHI, PII and/or IDEA Part B and C data.
- Staff may utilize a program issued device to access systems to view and maintain PHI, PII, and IDEA Part B and C files.
- Staff ensures the environment in which they are working is secure and only authorized persons are within viewing distance of the authorized user's screen. Staff should use a privacy screen for all monitors and laptop screens as appropriate.
- Disclosure of PII and/or PHI, and/or IDEA Part B and C to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

- Personal devices shall not be used to store or transmit unencrypted protected data.

- Any removable media or storage devices used to transfer PHI, PII, and/or IDEA Part B and C data must be encrypted.
- All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).
- If any PHI, PII, and/or IDEA Part B and C data is transmitted via email, the email must be encrypted, ~~and the attachment must be protected by a password. The password to access the attachment must be sent to the recipient in a separate email.~~
- Hard copies (i.e., paper) of any PHI, PII, and/or IDEA Part B and C data must be kept secured in a lockable file cabinet or other secured storage.
- In the event that PHI, PII, and/or IDEA Part B and C data, either hard copy or electronic, are transported between locations, staff must take all precautions to ensure the materials remain secure and must remain in the presence of staff at all times.

Facsimiles

- Any documents received via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be uploaded or scanned into appropriate software (i.e., ChildPlus) as soon as possible. Any electronic copies of the facsimile should be saved to the user's desktop; once the upload is completed the file should be deleted and the deletion confirmed. Any hardcopies of the facsimile must be stored in a secure location or destroyed.

Any hardcopies of the documents sent via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be either stored in a secure location or destroyed.

All DHS Head Start staff must successfully complete the following trainings annually:

- COSA Security Awareness Training
- ~~COSA~~ HIPAA Training
- ~~CoSA Employee Security Awareness Day in the Life~~ online training module

Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department ~~and/or the Training and Technical Assistance~~ [Assistance Team](#).

All DHS Head Start staff review and acknowledge review and acceptance of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and receive training on safeguarding FERPA, HIPAA, PHI, PII and IDEA Part B and C data.

Performance Standard:

1302.101(b)(4)

EARLY HEAD START



2023-2024 Early Head Start Policy Index

Change
Required?

Description of Change made to current Policy

Disabilities

2	Timely Referrals	Yes	Added Parent/guardian consent has been obtained
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Education and Early Childhood Development

1	Home Visits/ Parent Conferences	Yes	Added "calendar" for clarification of 45 days, revised language for completing home visit at "mutually agreed upon location, upon parent/guardian's request"
3	Individualization	Yes	Added Wellness Contact Logs, Documentation of intervention services from Home Health Agency and Home Language Survey
5	Development and Behavioral Screening	Yes	Removed teacher, home visitor, or early childhood professional determining if ASQ SE is not appropriate for parent/guardian to complete any sections
8	Child's Classroom File/ Portfolio	Yes	Added additional items for child file including "IEP, Outside Agency Documentation, Dual Language Learner Documentation, and Wellness Documentation"
9	Multidisciplinary Staffing	Yes	Updated date to April 15th. "If a child enters the program after April 15th..."
11	Discipline and Guidance	Yes	Added "The policies and procedures must also include guidance on appropriate communication with parents/guardians regarding a child's behavior." and "Requiring a parent/guardian to pick up a child due to misbehavior"

Environmental Health and Safety

1	Safe Environment	Yes	Added clarification regarding required procedures regarding safe environments and lead
2	Staffing and Class Size Requirements	Yes	Minor edit - Added "always", before remain with a qualified EHS teacher.
3	Hygiene & Cleaning Practices	Yes	Minor edits - Added minor language changes and grammatical corrections
6	Medication Administration	Yes	Minor edits - Replaced "those" with "any medication"

Family and Community Services

2	Staff-Parent Communication System	Yes	Minor edit, added wording
4	Parent Activities to Promote Child Learning & Development	Yes	Minor edit, added wording
6	Family Partnership Services	Yes	Minor edit, added wording

Home Based Services



2	Home Visits for Home-Based Services	Yes	Minor edits - changed wording and deleted a section that will be added to procedure
5	Curriculum for Home-Based Services	Yes	Minor edits - reorganized sentence structure

Program Design and Management (PDM)

7	Identification and Reporting of Child Abuse and Neglect	Yes	Clarification regarding reporting requirements
9	Critical Incident Reporting	Yes	Updates to align with guidance from the Office of Head Start
15	Staff Health Requirements	Yes	Remove information regarding COVID vaccine mandate
18	Program Data- Access and Security	Yes	Minor updates to clarify language
19	Management of Program Data	Yes	Minor updates to clarify language

Wellness Support Services (Mental Health)

1	Identification of Mental Wellness Needs and Provision of Intervention through Mental Wellness Support Services	Yes	Changed Intensive to Individualized, Removed "services and referrals will be documented in mental health tab of Child Plus"
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	DHS Early Head Start Program Policy		
DISABILITIES 2			
SUBJECT	Timely Referrals		
REFERENCE	Disabilities Services		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

A child with a delay or a suspected delay may require a formal evaluation under the Individuals with Disabilities Education Act (IDEA) to determine the child's eligibility for intervention services. The Early Head Start (EHS) Disabilities Manager will collaborate with other program staff including Part C Agencies through the referral process for each child which may include screening, developmental assessment, and formal evaluation.

The EHS Disabilities Manager will collaborate with other program staff to facilitate the provision of support services, such as educational and behavioral services and supports, to meet the needs of children, prior to an eligibility determination under the Individuals with Disabilities Education Act (IDEA). Children who do not respond to support services and are potentially eligible for Part C services, should be referred for an evaluation as soon as the need becomes evident and parent/guardian consent has been obtained.



City of San Antonio staff will develop a system to ensure that referrals, follow-up, and timelines are documented in ChildPlus and must adhere to the City of San Antonio Benchmark Due Date Guide and the EHS Program Child File Scan Order and Process Guide.

Performance Standard:

1302.61(a)(b); 1302.33(a-b)

Other references:

Head Start Act, Section 640 (d) (1 – 3) and United States Department of Education, Office of Special Education and Rehabilitative Services letter dated January 21, 2010

	DHS Early Head Start Program Policy		
EDUCATION 1			
SUBJECT	Home Visits/Parent Conferences		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

Early Head Start (EHS) teachers must complete two Home Visits and no less than two Parent/Teacher Conferences each program year for center-based services.

A system must be in place to ensure that completion dates of the Home Visits and Parent/Teacher Conferences are entered into *Child Plus* and meet the *City of the San Antonio Benchmark Due Date Guide*, the *EHS File Scan Order and Process Guide*, and applicable *ChildPlus Data Entry Guide*.

Documentation of the Home Visit and Parent/Teacher Conference must be maintained in the child file and ChildPlus. If a Home Visit or Parent/Teacher Conference did not occur, documentation regarding why the event did not occur must be noted in Child Plus.

The first Home Visit may be completed by the teacher no more than 14 calendar days prior to the first day of a child's entry into the program. If a child enters the program after January 31st, a minimum of one home visit and one Parent/Teacher Conference must be completed by the last day of the program year. If a child's date of entry is within 45 calendar days of the Parent/Teacher Conference benchmark due date, then the teacher must complete the Home Visit but is not required to complete both the Home Visit and the Parent Conference.



Home Visits and Parent/Teacher Conferences will be conducted in the family's home language and, when necessary, using the services of an interpreter. The Home Visits and Parent/Teacher Conferences should be scheduled at the parent's convenience and completed in the home or at a mutually agreed upon location, upon parent/guardian's request.

Home Visits and Parent/Teacher Conferences offer opportunities for parents/guardians and staff to share knowledge related to the strengths, needs, interests, goals, and concerns of the child and program activities. During the Home Visits and Parent/Teacher Conferences the teacher will share work samples, educational assessment outcomes, screening information, and information regarding the transition into a PreK/Head Start program, when applicable.

Service Providers will develop and implement procedures to ensure that the information shared at the Home Visits and Parent/Teacher Conferences is documented.

Performance Standard:

302.34 (b) (2-3, 7-8); 1302.46; 1302.50; 1302.71 (a,b,e)

	DHS Early Head Start Program Policy		
EDUCATION3			
SUBJECT	Individualization		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

The program will provide individualized caregiving and instruction to meet each child's unique characteristics, strengths, and needs, taking into consideration gender, family composition, the cultural and linguistic background, pattern of development and learning.

Classroom teachers must document individualized caregiving, instruction and activities including large group, small group and one/one lessons and activities into lesson plans.

Home Visitors must document individualized learning experiences and activities into the home visit planning form/lesson plan.



The Early Head Start (EHS) Program and Service Providers will work together to develop a system to ensure that the plan for individualized caregiving and/or instruction for each child is reviewed and updated on a regular basis.

Information from the following will be used to plan individualized instruction and activities:

- Formal and informal child assessments
- Input from parents regarding each child's individual characteristics, interests, strengths and needs
- Developmental (ASQ-3), Behavioral (ASQ:SE-2) and Sensory (hearing and vision) screenings
- Medical/dental evaluations/treatments
- Wellness Contact Logs for ongoing wellness support (if applicable)
- Referrals for wellness support (if applicable)
- An Individualized Family Service Plan (IFSP) for children with delays/disabilities (if applicable)
- Outside Agency Documentation (if applicable)
- Home Language Survey

Performance Standard(s):

1302.31 (c) (1); 1302.33; 1302.61

	DHS Early Head Start Program Policy		
EDUCATION 5			
SUBJECT	Development and Behavior Screening		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/19		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 2			

Policy:

The Early Head Start Program uses the Ages and Stages Questionnaire (ASQ-3) as the developmental screening and the Ages and Stages Questionnaire Social and Emotional, Second Edition (ASQ: SE-2) as the behavioral screening.

Service Providers must complete the ASQ-3 and ASQ: SE-2 in collaboration with each child's parent/guardian on or before the 45th calendar day after the child first attends the program. Returning children will not be rescreened each program year. Developmental and behavioral screenings must be completed within the timeframe to identify early concerns regarding a child's developmental, sensory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills so appropriate referrals are made.

The ASQ-3 and ASQ: SE-2 will not be completed by the teacher or home visitor. If the parent or guardian needs assistance completing the questionnaire, the teacher, home visitor or other staff member may provide the most appropriate accommodation for completion. The ASQ-3 and ASQ: SE-2 will be distributed by the Service Provider no more than two weeks prior to the first day of a child's entry into the center for center-based services. For home-based services the ASQ-3 and ASQ:SE-2 will be distributed no more than two weeks prior to the first home visit. The screenings may not be distributed during Early Head Start (EHS) enrollment, or family meetings. To the greatest extent possible, the screening procedures must be sensitive to the child's cultural background and home language.

EHS Program and Service Providers will work together to develop a comprehensive system to ensure proper training, administration and monitoring of the screening tools that includes, at a minimum, the following:



- Identifying appropriate staff responsible for administering, scoring, and follow-up and referrals.
- Ensuring the appropriate version is utilized for child's age and language.
- Ensuring proper completion of the screening tool.

- Ensuring accurate scoring of the screening tool.
- Establishing timeframes for follow-ups, referrals, and documentation
- Following the *City of San Antonio Benchmark and Due Date Guide* and the *EHS File Scan Order and Process Guide*.
- Completing routine internal monitoring of child files.
- Monitoring the fidelity of screenings

The EHS Program will develop and implement procedures to address the use of the ASQ-3 and ASQ: SE-2 for children with an identified disability or Individual Family Service Plan (IFSP). A child is not automatically disqualified from receiving a developmental or behavioral screening if they have an identified disability or IFSP. Sensitivity to the parent/guardian should always be a priority. Procedures may include a determination to complete only certain sections of the ASQ-3 or the ASQ: SE-2. If it is determined that it is not appropriate for a parent/guardian to complete any section of the developmental or behavioral screening, the information supporting this determination must be documented in ChildPlus according to the *ChildPlus Data Entry Guide*.

Performance Standard:

1302.33;1302.25

	DHS Early Head Start Program Policy		
EDUCATION 8			
SUBJECT	Child File		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 1			

Policy:

The Early Head Start (EHS) Program and Service Providers will work together to develop a system to ensure that each child has a Child File that organizes and contains multiple sources of information used for ongoing assessments and instructional planning.

The Child File for center-based services will contain the following:

- Documentation from home visits and parent/teacher conferences including parent/guardian input
- Work samples
- Developmental Screening
- Social and Emotional Screening
- Beginning, Middle and End of year formal assessment summary information
- Transition activities, if applicable
- IFSP, if applicable
- IEP, if applicable
- Outside Agency Documentation, if applicable
- Dual Language Learner Documentation, if applicable
- Wellness Documentation, if applicable
- Other items pertaining to educational development

The Child File for home-based services will contain the following:



- Work samples
- Developmental Screening
- Social and Emotional Screening
- Beginning, Middle and End of year formal assessment summary information
- Transition activities (if applicable)
- IFSP, if applicable
- IEP, if applicable
- Outside Agency Documentation, if applicable
- Dual Language Learner Documentation, if applicable
- Wellness Documentation, if applicable

- Other items pertaining to educational development

The Service Providers must develop a system to ensure that the Child File is located in the teacher's classroom or home visitor's office, kept confidential, and available for parents to review upon request with the teacher or home visitor. The file must also be accessible to parents/guardians and monitors/reviewers upon request.

Performance Standard(s):

1302.30-1302.34;1302.35

	DHS Early Head Start Program Policy		
EDUCATION 9			
SUBJECT	Multidisciplinary Staffing		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 1			

Policy:



The Early Head (EHS) Program and Service Providers will work together to develop a system in place for regular communication among program staff to facilitate quality outcomes for children and families. Service Providers will schedule at least two Multidisciplinary Staffing (MDS) meetings annually for every enrolled child. If a child enters the program after April 15th, a minimum of one MDS meeting will be held before the last day of the program year.

The MDS meeting is a documented and planned communication tool utilized to create a cohesive team approach to discuss the strengths and needs of children and families. The Center Director or designee, Family Support Staff, and Teachers or Home Visitor and a member of the City of San Antonio Early Education Services Team are required to participate in the MDS. Content area coordinators responsible for Education, Health, ERSEA, Mental Health, Transportation, Nutrition, Disabilities, and other related services may be required to attend based on the child/family needs.

The EHS Program and Service Providers will work to develop and maintain a record-keeping system to provide accurate and timely information regarding children, families, and staff and must ensure appropriate confidentiality of this information. The MDS documentation must include the completion date of the MDS, signatures of all in attendance, and topics covered. A system must be in place to ensure that completion dates of the MDS are entered and the MDS document is scanned into Child Plus and meets the *City of the San Antonio Benchmark Due Date Guide*, *ChildPlus Data Entry Guide*, and the *Early Head Start File Scan Order and Process Guide*.

Performance Standard(s):

1302.101(b)(2)(3); 1302.33; 1302.34; 1302.35

	DHS Early Head Start Program Policy		
EDUCATION 11			
SUBJECT	Discipline and Guidance		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

Service Providers must establish discipline and guidance policies and procedures appropriate for infants and toddlers. A copy must be provided to all parents/guardians, staff, volunteers, substitute floater/teachers, and contractors. Documentation must be maintained showing receipt of the written discipline and guidance policies. Service Providers must ensure a signed copy of Education 11 Discipline and Guidance policy is maintained in all employees, volunteer, home visitor, and substitute floater/teacher files.

The policies and procedures must include positive methods of discipline and guidance that build self-esteem and support self-control and self-regulation such as:

- Praise and encouragement of developmentally appropriate behavior instead of focusing only on the unacceptable behavior
- Frequent reminders of behavior expectations using clear and positive statements
- Redirection of behavior using positive statements

Discipline must be constructive, individualized, and consistent for each child, appropriate to the child's level of understanding, and directed toward teaching the child appropriate behavior. Service Provider must prohibit or severely limit the use of suspension due to a child's behavior. Service Provider must not expel or un-enroll a child from Head Start due to a child's behavior, unless approved by the Head Start Administrator.

The policies and procedures must also include guidance on appropriate communication with parents/guardians regarding a child's behavior.



When appropriate for the child's age and development, a brief supervised separation or time away from the group may be necessary and should be limited to no more than one minute per year of the child's age. There must be no harsh, cruel or unusual treatment of any child. The following examples are prohibited:

- Corporal punishment or threats of corporal punishment
- Punishment associated with food, naps, toilet training

- Pinching, shaking, or biting a child
- Hitting a child with hand or an object
- Putting anything in or on a child's mouth
- Humiliating, ridiculing, rejecting, or yelling at a child
- Pointing a finger in a child's face
- Snapping fingers at a child
- Use of isolation to discipline a child
- Binding or tying a child to restrict movement
- Threatening phrases/tone or sarcastic language/tone
- Subjecting a child to harsh, abusive, or profane language
- Placing a child in a locked or dark room, bathroom, or closet with the door closed
- Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age including requiring a child to remain in a restrictive device
- Child restraint performed by staff not certified in proper restraint procedures
- Withholding outdoor free play
- Requiring a parent/guardian to pick up a child due to misbehavior

Performance Standard(s):

1302.17; 1302.90 (c); 1302.31 (e) (2-4)

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 1			
SUBJECT	Safe Environments		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

Early Head Start (EHS) Program, Service Providers will maintain indoor/outdoor environments and facilities to ensure they are safe, clean and in quality condition so as to prevent injury to a child. Service Provider will develop a system to maintain safe environments free from pollutants, hazards and toxins, including lead, that are accessible to children and could endanger children's safety, and to correct issues identified as unsafe and/or hazardous through the monitoring process.

Service Providers will develop and implement procedures to ensure state-certified lead testing of water, soil, and paint once every three years. If lead results are positive, the Service Provider must inform the Head Start Grant Recipient and provide a plan for abatement within 24 hours of notice.

Service Providers will maintain Head Start group sizes and ratios. Service Providers will also be responsible for safety drills, maintenance of first aid kits, training of staff, and accommodation of children with disabilities, food safety, and sanitation. In addition, Service Providers will maintain compliance with Texas Health and Human Services Commission Child Care Regulations requirements.



Service Providers will ensure the maintenance log is current and safety concerns are addressed.

Performance Standard(s):

1302.47b(1)(2); 1302.21; 1302.102(d)(ii)

Information Memorandum:

ACF-IM-HS-23-01

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 2			
SUBJECT	Staffing and Class Size Requirements		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 2			

Policy:

Early Head Start (EHS) Program, Service Providers will ensure that EHS classes are designed with no more than eight children and staffed by two paid teachers. It is recommended, whenever possible, that a third person be in the classroom, such as a volunteer.

Classroom Design

Ages	Classroom Design
6 Wks -36 Months	All EHS classrooms, by design, will have no more than eight children enrolled per class. The integration of EHS enrolled children and non EHS children per classroom is encouraged.

Group Size

Ages	Group Size
6 Wks -36 Months	Maximum of eight children enrolled per class. Two teachers with no more than eight children. Two teachers must be in the classroom at all times.

Ratios

Ages	Ratios
6 Wks -36 Months	One teacher to four children with two teachers in the classroom at all times.

Class sizes are determined based on square footage, with a minimum of 35 square feet/child. Service Providers must seek prior approval before any change to a classroom age group designation. As children age throughout the program, they may remain in their current classrooms until room becomes available in the next age-appropriate classroom.

Classroom management entails both teachers meeting the needs of all children. However, Service Providers must ensure that each teacher working exclusively with infants and toddlers has the responsibility for no more than four infants and toddlers when meeting home visits, parent/teacher conference expectations and developmental needs of the children. All EHS sites must comply with the above stated staffing, group and class size requirements.



Ratios must be maintained during EHS hours. Program hours vary by site and are set and approved at the beginning of the program year as part of the EHS Program Design.

Volunteers being counted in classroom ratios

A volunteer may be used to supplement the required adult/child ratio only for short periods of time, 10-15 minutes to accommodate for unscheduled interruptions/emergencies. Volunteers may be used to supplement for restroom breaks, children's needs, and to cover lunch hours as long as a qualified EHS teacher is in the classroom. **A volunteer must never be left alone with a child or group of children and must always remain with a qualified EHS teacher.** All volunteers must sign the Head Start Standards of Conduct, pass a background check, and receive volunteer training. Providers must keep documentation of volunteer training and comply with the Texas Health and Human Services Commission Child Care Regulations.

Performance Standard(s):

1302.21(b)(1)(2); 1302.94(a)(b)

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 3			
SUBJECT	Hygiene & Cleaning Practices		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

Early Head Start (EHS) Program Service Providers will develop and implement systems that promote hand washing, hygiene, and sanitation and disinfecting of the classroom including equipment and materials. Providers must ensure staff are trained on the procedures and documentation of that training is maintained.

Service Providers will follow guidance from the Office of Head Start (OHS), or recommendations made by the Centers for Disease Control and Prevention, Child Care Regulation, the City of San Antonio Metro Health Department, and/or Caring for Our Children National Health and Safety Standards Guidelines for Early Care and Education Programs when establishing procedures for hygiene, cleaning, disinfecting, and sanitation practices.

Hand washing

- Staff, volunteers, and children must wash their hands with soap and running water at a minimum during the following times:
 - Upon arrival,
 - Before and after diapering or toilet use
 - Before food preparation, handling, or any other food-related activity
 - Before and after eating
 - Whenever hands are contaminated with blood or other bodily fluids
 - After handling pets or other animals
 - After outdoor activities
 - Before and after playing in a water/sand play table
 - Any other time there is reason to believe the child has come in contact with substances that could be harmful to the child

- Staff and volunteers must also wash their hands with soap and running water:
 - Before and after giving medication
 - Treating or bandaging a wound
 - After assisting a child with toilet use
 - After using any cleaners or toxic chemicals; and
 - After removing gloves

Hygiene



- Easily accessible nonporous, on-latex, disposable gloves are to be worn by all staff when they are in contact with blood or bodily fluids.
- Bodily fluids should be cleaned and disinfected immediately in keeping with Head Start Performance Standards and Texas Health and Human Services Commission Child Care Regulations.
- Any tools and equipment used to clean bodily fluids should be cleaned, disinfected immediately, and blood-contaminated materials must be disposed of properly.
- Hand Sanitizers, pre-moistened towelettes, and waterless hand cleaners are not allowed to replace handwashing and should not be accessible or used on children.

Sanitation

- Toys and equipment that are placed in a child's mouth, or otherwise contaminated by body secretion or excrement, must be sanitized before handling by another child.
- Cloth toys must be washed at least weekly and when contaminated.
- All linens must be washed at least weekly and when soiled or before another child uses them.
- All sleeping equipment must be sanitized before a different child uses it and when soiled.
- Water play tables must be empty, and toys used in water tables must be sanitized daily, children and caregivers must wash their hands before using the water table.
- Sand boxes and tables must be maintained in a sanitary manner.
- All garbage must be inaccessible to children and it is necessary to keep the child-care center inside and outside free of insects, rodents, and offensive odors and disposing of those in accordance to local and state requirements.
- All floors, ceilings and walls must be kept in good repair and clean. Paint used at the center must be lead-free.
- All areas in the center used by children will be kept heated, lighted, and ventilated.
- All tabletops, furniture, and other similar equipment used by children will be sanitized when soiled or contaminated with matter such as food, body secretions, or excrement.
- All cleaning supplies and other toxic materials will be marked and kept separate from food and be inaccessible to children.
- Hazardous materials will be stored and disposed of as recommended by the manufacturer.

Performance Standard:

1302.47(b)(6)(i)(ii)(iii)

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 6			
SUBJECT	Medication Administration		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 1			

Policy:

Early Head Start (EHS) Program, Service Providers will establish and maintain written procedures regarding the administration, handling, storage, and appropriate disposal of expired medications, for every child, staff, and volunteer.



A physician's instructions and written parent or guardian authorization is required for all medications administered by staff.

Service Providers will ensure that appropriate staff members can demonstrate proper techniques for administering, handling, and storing medication, including the use of any necessary equipment to administer medication. Service Providers must retain documentation of medication administration training.

All medication must be in the original labeled container, not expired, up-to-date, and stored under lock and key, and refrigerated if necessary, including any medication required for staff and volunteers. Rescue medications, including Epi Pens, inhalers, and glucose, do not need to be locked up, however, they must be kept out of the children's reach and accessible to staff at all times. Any staff person administering rescue medications, whether in the classroom, on the playground, or on field trips, must be trained in the administration of such medications.

Performance Standard:

1302.47(7)(iv)

	DHS Early Head Start Program Policy		
FAMILY 2			
SUBJECT	Staff/Parent Communication System		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: Pending	Governing Body Approval: 8/13/20	Governing Body Revision: Pending
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Policy:

The Head Start Program, including the Early Head Start (EHS), develops relationships with parents/guardians and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents/guardians to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community.

Head Start staff, to include Family and Community Support and Service Provider staff will ensure continuous communication with families is maintained. This will allow our families to develop a sense of knowledge, trust and respect for our staff members, thus allowing staff and parents/guardians to work easily together to ensure that each child and family are receiving the full amount of benefits that Head Start has to offer.



The Head Start Program conducts family engagement services in the family's preferred language, or through an interpreter, to the extent possible, and ensures families have the opportunity to share personal information in an environment in which they feel safe.

The Head Start Grant Recipient will work with the Service Provider to ensure the establishment of a Parent Connection Committee (PCC) comprised exclusively of parents/guardians of currently enrolled children at each site/center as early in the program year as possible. At a minimum, procedures must include:

- Activities to ensure parents/guardians of currently enrolled children understand the process for elections to the Head Start Policy Council (HSPC) and other leadership opportunities.

- Opportunities for PCC members to advise staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families.
- A process for PCC members to communicate with the Head Start Policy Council (HSPC).
 - i. PCC agendas must dedicate time to allow for parent questions/discussion

Performance Standard(s):
1302.50(b)(2) & (5); 1301.4

	DHS Early Head Start Program Policy		
FAMILY 4			
SUBJECT	Parent Activities to Promote Child Learning and Development		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: Pending	Governing Body Approval: 8/13/20	Governing Body Revision: Pending
PAGE: 1 of 1			

Policy:

The Head Start Program, including Early Head Start and Service Provider will promote shared responsibility with parents/guardians for children's early learning and development. In addition, implement family engagement strategies that are designed to foster parental confidence and skills in promoting children's learning and development.

The Head Start Grant Recipient and Education Service Providers will collaborate to develop and implement procedures that include, at a minimum, the following:



Offering activities that support parent-child relationships and child development including language, dual language, literacy, and bi-literacy development

- Provide parents/guardians with information about the importance of their child's regular attendance, and partner with them, as necessary to promote consistent attendance (impact of attendance on learning outcomes)

For dual language learners, information, and resources for parents/guardians about the benefits of bilingualism and bi literacy

Performance Standard(s):

1302.51(a)

	DHS Early Head Start Program Policy		
FAMILY 6			
SUBJECT	Family Partnership Services		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

Family Partnership Services

The Head Start Program, including the Early Head Start (EHS) Program, engages in a process of collaborative and respectful partnership-building with parents/guardians to establish mutual trust and to identify needed services, supports, family strengths, and family goals. This process must take into consideration each family's readiness and willingness to participate in the process and must be engaged in jointly with parents. Family services are to be individualized and focused on the achievement of identified outcomes as described in the Head Start Parent, Family, and Community Engagement Framework (PFCE).



Staff is to adhere to all confidentiality policies and procedures to protect family information.

Family and Community Support staff will offer:

- A **Family Partnership Agreement** to orient parents/guardians of the roles and responsibilities of Head Start parents/guardians and staff.
- A **Family Strengths and Needs Assessment** to identify each family's strengths, needs and interests.
- Opportunities to develop individualized family goals. The goal setting process must include: family goals, strategies for success, staff support to be provided, timeframes, and community resources that are available to assist families in meeting their goals.
- Community resources to help meet the family's identified needs..

Performance Standard(s):

1302.52

	DHS Early Head Start Program Policy		
HOME-BASED 2			
SUBJECT	Home Visits for Home-Based Services		
REFERENCE	Home-Based Option		
EFFECTIVE	10/1/2020		
Policy Council Approval: 9/22/20	Policy Council Revision: Pending	Governing Body Approval: 11/12/20	Governing Body Revision: Pending
PAGE: 1 of 2			

Policy:

The Early Head Start (EHS) Program Service Provider will provide one home visit per week per family that lasts at least an hour and a half and provide a minimum of 46 visits per year.

Service Providers must ensure that all home visits are:

- Planned jointly by the home visitor and parents, and reflect the critical role of parents in the early learning and development of their children, including that the home visitor is able to effectively communicate with the parent, directly or through an interpreter
- Planned using information from ongoing assessments that individualize learning experiences
- Scheduled with sufficient time to serve all enrolled children in the home and conducted with parents or other primary caregiver and are not conducted when parent/non-primary caregiver is not present (i.e., childcare provider or other temporary caregivers only are present)
- Scheduled with sufficient time and appropriate staff to ensure effective delivery of the full range of program services

Home Visit activities must include:

- Age and developmentally appropriate, structured child-focused learning experiences
- Strategies and activities that promote parents' ability to support the child's cognitive, social, emotional, language, literacy, and physical development
- Strategies and activities that promote the home as a learning environment that is safe, nurturing, responsive and language and communication rich



- Strategies to support parents in using the home as a learning environment while helping parents understand how they influence their children's development through daily interactions
- Strategies to support parents understanding of safe play materials that can be found in the home
- Research-based strategies and activities for children who are dual language learners that recognize bilingualism and biliteracy as strengths, and:
 - For infants and toddlers, focus on the development of the home language, while providing experiences that expose both parents and children to English
- Follow up with the families to discuss learning experiences provided in the home between each visit, address concerns, and inform strategies to promote progress toward school readiness goals.

Service Provider must make up planned home visits or scheduled group socialization activities that were canceled by the program, and to the extent possible attempt to make up planned home visits canceled by the family, when this is necessary to meet the minimum of 46 home visits.

Medical or social service appointments may not be used for the purposes of meeting the minimum home visits requirement.

Performance Standard:

1302.22 (c)(i), 1302.35(a)(b)(1,2,3,4), 1302.35(c)(1, 2, 3, 4, 5)

	DHS Early Head Start Program Policy		
HOME-BASED 5			
SUBJECT	Curriculum for Home Based Services		
REFERENCE	Home-Based Option		
EFFECTIVE	10/1/2020		
Policy Council Approval: 9/22/20	Policy Council Revision: Pending	Governing Body Approval: 11/12/20	Governing Body Revision: Pending
PAGE: 1 of 1			

Policy:



The Head Start definition of curriculum is a planned management of time, materials and activities to guide children's individual pattern of learning and development. The curriculum helps children gain skills and confidence and should integrate Early Head Start (EHS) components which form a foundation for school readiness. Service Providers will involve parents in the implementation of the program's curriculum and approaches to child development and education.

The home-based curriculum must be:

- Developmentally appropriate, research-based and align with the five Central Domains of the Head Start Early Learning Outcomes Framework (HSELOF) in an integrated approach, using intentional and individualized instruction to support children's learning and development;
- Promote the parent's role as the child's teacher through experiences focused on the parent child relationship and as appropriate, the family's traditions, cultures, values and beliefs;
- Have an organized developmental scope and sequence that includes plans and materials for learning experiences based on developmental progressions and how children learn.

Performance Standard(s):

1302.35 (d)

	DHS Early Head Start Program Policy		
PDM 7			
SUBJECT	Identification and Reporting of Child Abuse and Neglect		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

The Head Start Program, including Early Head Start (EHS) must develop and implement procedures to respond to suspected or known child abuse whether it occurs at or away from the program.

All Head Start staff including Department of Human Services (DHS) Head Start staff, center directors, teachers, teacher assistants, floaters, substitutes, site personnel, contractors and volunteers must follow the Service Provider's policies and procedures regarding child abuse and neglect.

The EHS Senior Special Projects Manager must be notified immediately, and no later than 24 hours of an allegation of abuse or neglect against a City of San Antonio DHS Head Start or Child Care staff member, substitute, contractor or volunteer. i

The EHS Senior Special Projects Manager must also be notified of any report that has been made for suspected child abuse or neglect occurring outside of the EHS Program within 24 hours of reporting. Such official incident reporting must be provided in writing.

Additionally, when any DHS Head Start Program Staff, contractors, Service Providers, Child Care Center staff or consultants, contractors, volunteers witnesses or suspects child abuse or neglect they must make a report to the Texas Department of Family and Protective Services (TDFPS) within 48 hours. According to the State of Texas, Title 5, Chapter 261 of the Family Code, "child abuse is an act or omission that endangers or impairs a child's physical, mental or emotional health and development." Child abuse may take several forms including, but not limited to:

- Physical, mental, or emotional injury
- Sexual abuse
- Sexual exploitation
- Physical neglect
- Medical neglect
- Inadequate supervision

In filing a report, staff will follow state regulations regarding the timeframes that reports must be made, the information that must be reported, and confidentiality of reported information.

Service Providers will develop and implement procedures to notify the parents/guardians of any suspected or known child abuse incidents occurring within the EHS Program. EHS City staff and Service Providers must also comply with Texas Health and Human Services Commission/Child Care Regulations.

All EHS staff, including EHS Head Start staff, teachers, teacher assistants, and all other site personnel, substitutes, consultants, contractors and volunteers receive training on procedures for identifying and reporting child abuse or neglect. EHS staff are expected to fully cooperate with TDFPS, Texas Health and Human Services Child Care Regulations and other applicable agency personnel regarding an investigation of suspected abuse or neglect.



Performance Standard(s):

1302.41; 1302.47(5)(i); 1302.90; 1302.92(b)(2); 1302.102
1302.47(b)(4)(i)(K); 1302.47(b)(5)(i); 1302.53(a)(2)(iii); 1302.90(b)(2); 1302.92(b)(2)
1302.102(d)(1)(ii)(A); 1303.22(c)(5)(iii); 1303.22(c)(8)

Resources:

Office of the Texas Attorney General, "What Can We Do about Child Abuse Part 2":
https://www.texasattorneygeneral.gov/ag_publications/txts/childabuse2.shtml

Family Code, Chapter 261. Investigation of Report of Child Abuse or Neglect
<http://www.statutes.legis.state.tx.us/Docs/FA/htm/FA.261.htm>

	DHS Early Head Start Program Policy		
PDM 9			
SUBJECT	Critical Incident Reporting		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
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Policy:

The Head Start Program, including Early Head Start (EHS) must develop and implement a system for Critical Incident Reporting (CIR). All staff must be trained on incident reporting.

A critical incident includes, but is not limited to:

- Suspected child abuse/neglect which may or may not have occurred during service hours.
- Allegations of child abuse/neglect or maltreatment against any EHS staff member, volunteer, consultant and contractor, including, but not limited to grabbing, shoving, shaking, swatting, or dragging a child; spanking or any other type of corporal or physical punishment; binding tying, or taping a child; terrorizing a child with threats or menacing acts; or any form of sexual contact.
- Incidents which may have placed a child, family member or staff in danger.
- Any incident where a child is left unsupervised while in the care or under the supervision of program staff, which includes leaving a child alone anywhere on the grounds of an EHS center (e.g., in a classroom, bathroom, on a playground), as well as outside the facility in a parking lot, or on a nearby street.
- Inappropriate discipline, which is any type of conduct used to instill fear or humiliate rather than to educate a child, such as poking or pinching a child; making fun of or laughing about a child; using/withholding food or an activity as a punishment or reward; or isolating a child.
- Health incidents and illnesses, which include, but are not limited to:
 - Injuries that require urgent medical attention by a health-care professional, such as a broken bone; a severe sprain; chipped or cracked teeth; head trauma; deep cuts; contusions or lacerations; or animal bites.
 - Child or staff member leaving by emergency medical transport
 - Any reportable disease/illness, as indicated by the Centers for Disease Control and Prevention, State of Texas, State of Texas Child Care Regulations, or the City of San Antonio Metro Health Department
 - Child receiving outside medical attention at any point in time for an injury sustained during EHS program hours

- Unauthorized release where a child is released from an EHS center to a person without the permission or authorization of a parent or legal guardian and whose identity had not been verified by photo identification.
- Any incident which has the potential to generate negative media coverage
- Any media inquiry/coverage of the program
- Unplanned interruption in EHS Program services
- Closure of any facility or part of a facility, including outdoor play areas
- Accidents involving vehicles that transport children and families



When applicable, parents/guardians must be notified of critical incidents within 24 hours of occurrence. Providers must also provide notification to the EHS Senior Special Projects Manager or designee within 24 hours.

Performance Standard(s):

1302.47(c); 1302.102(d)(1)(ii); 1304.12; 1303.79(b)(3)

Information Memorandum:

ACF-IM-HS-22-07

	DHS Early Head Start Program Policy		
PDM 15			
SUBJECT	Staff Health Requirements		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 1/25/22	Governing Body Approval: 9/19/16	Governing Body Revision: 2/24/22
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Policy:

The Head Start Program, including the Recipient and Education Service Providers, will develop and implement procedures requiring identified program staff to submit a copy of their most recent physical exam or approved health document within 30 business days of hire to ensure that staff do not pose a significant risk to the health or safety of others in the program. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.



Every five years after the initial hire date, staff must submit a copy of their most recent physical exam or approved health document. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

The Head Start Program, including EHS and Education Service Providers, will develop and implement procedures to ensure regular volunteers complete appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

Documentation of health exams, vaccination information, screenings, and/or tests must be kept on file.

Performance Standard(s):

1302.93; 1302.94

	DHS Early Head Start Program Policy		
PDM 18			
SUBJECT	Program Data – Access and Security		
REFERENCE	Program Design and Management		
EFFECTIVE	4/23/18		
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22
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Policy:

The Head Start Program, including Early Head Start (EHS), must establish an internal procedure for proper access and security of program data for the City of San Antonio Department of Human Services Head Start Program (DHS Head Start).

Procedure:

DHS Head Start utilizes ChildPlus as the secure database system for storing and tracking client information.

All user account holders are required to complete ChildPlus Access Request and ChildPlus User Security and Confidentiality Agreement forms. Upon completion, the forms are scanned and attached by the ChildPlus Administrator in ChildPlus under each respective user profile.

By accessing the database, staff understands and agrees to abide by all terms of the ChildPlus User Security and Confidentiality Agreement and any applicable state and federal laws regarding Personally Identifiable Information (PII) and Protected Health Information (PHI).

- Education Service Providers are required to designate a staff member to complete the Personnel Profile for all staff members funded by the Head Start or EHS grant or anyone who works with children or families enrolled in the Head Start or EHS programs under the Management Module in ChildPlus. Designated staff is defined as preauthorized users in the Management/Personnel Module.
- Upon completion of the Personnel Profile, the designee will notify the ChildPlus Administrator if the user requires access to PII. Not all personnel require a ChildPlus user account.
- The ChildPlus Administrator will confirm with the designee the role of personnel and the types of access required.

- The ChildPlus Administrator will complete a User Security profile in ChildPlus, assign a login username and temporary password, restrict access by location, and designate User Security group(s).
- The ChildPlus Administrator will email the new account holder the login username and temporary password.
- The new account holder will log into ChildPlus and change the temporary password to a permanent password.

Authorized ChildPlus users are granted access under one of the following groupings:

- Staff:
 - A ChildPlus personnel account will be created for all staff. ChildPlus user accounts and access is granted upon the approval of the ChildPlus Access Request Form and the completion of the ChildPlus User Security and Confidentiality Agreement Form.
- Education Service Providers:
 - An assigned ChildPlus Super User for each Service Provider formally requests accounts via email for Service Provider Head Start Staff. Service providers are subject to the confidentiality provisions under the Family Educational Rights and Privacy Act (FERPA).
- Contracted Providers:
 - A Special Projects Manager or designee will request user accounts for contractual providers via email or meeting with the ChildPlus Administrator. To meet the requirements of Health Insurance Portability and Accountability Act of 1996 (HIPAA), DHS Head Start requires any contract that include access to client information include an enforceable Business Associate Agreement (BAA). BAAs are documented in the professional services contract with the DHS Head Start.

Implementation of technical policies and procedures for electronic information systems that maintain electronic PII, PHI, and IDEA Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard HIPAA, FERPA, PHI, PII, and the Individuals with Disabilities Education Act (IDEA) part B and C data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA part B and C electronically must follow encryption guidelines and ensure the receiving entity is an authorized recipient of the specific data being delivered.

Staff may utilize a program issued computer or device to access ChildPlus.

Staff ensures the environment in which they are working is secure, should include the use of privacy screen filters, and that only authorized persons are within viewing distance of the authorized user's screen and/or confidential documents.

All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).

Disclosure of ChildPlus information to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

All DHS Head Start staff must successfully complete the following trainings:

- CoSA Security Awareness Training
- HIPPA Training



Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department and/or the Training and Technical Assistance Team.

All DHS Head Start staff must review and acknowledge the review and acceptance of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and ensure all staff receive training on safeguarding FERPA, HIPAA, PHI, PII and (IDEA) part B and C data.

Performance Standards:

1302.101(b)(4)

	DHS Early Head Start Program Policy		
PDM 19			
SUBJECT	Management of Program Data		
REFERENCE	Program Design and Management		
EFFECTIVE	4/23/18		
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22
PAGE: 1 of 3			

Policy:

The Head Start Program, including Early Head Start, must establish an internal procedure for proper management of program data for the City of San Antonio Department of Human Services Head Start Program (DHS Head Start).

Procedure:

Implementation of technical policies and procedures for electronic information systems that maintain electronic Personal Identifiable Information (PII), Protected Health Information (PHI), and Individuals with Disabilities Education Act (IDEA) Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act of 1996 (HIPAA), PHI, PII, and the IDEA Part B and C related data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C information electronically must ensure the receiving entity is an authorized recipient of the specific data being delivered.

- Only computers and/or devices configured by the Information Technology (IT) Department for use on the CoSA network or Education Service Provider network are authorized for the storage or transport of PHI, PII and/or IDEA Part B and C data.
- Staff may utilize a program issued device to access systems to view and maintain PHI, PII, and IDEA Part B and C files.
- Staff ensures the environment in which they are working is secure and only authorized persons are within viewing distance of the authorized user's screen and staff should use a privacy screen for all monitors and laptop screens.-

- Disclosure of PII and/or PHI, and/or IDEA Part B and C to a contractor is authorized but ONLY when an enforceable Business Associate

Agreement (BAA) is in place.

- Personal devices shall not be used to store or transmit unencrypted protected data.
 - Any removable media or storage devices used to transfer PHI, PII, and/or IDEA Part B and C data must be encrypted.
 - All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).
-
- If any PHI, PII, and/or IDEA Part B and C data is transmitted via email, the email must be encrypted
 - Hard copies (i.e., paper) of any PHI, PII, and/or IDEA Part B and C data must be kept secured in a lockable file cabinet or other secured storage.
 - In the event that PHI, PII, and/or IDEA Part B and C data, either hard copy or electronic, are transported between locations, staff must take all precautions to ensure the materials remain secure and must remain in the presence of staff at all times.

Facsimiles

- Any documents received via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be uploaded or scanned into appropriate software (i.e., ChildPlus) as soon as possible. Any electronic copies of the facsimile should be saved to the user's desktop; once the upload is completed the file should be deleted and the deletion confirmed. Any hardcopies of the facsimile must be stored in a secure location or destroyed.
- Any hardcopies of the documents sent via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be either stored in a secure location or destroyed.

All DHS Head Start staff must successfully complete the following trainings:

- CoSA Security Awareness Training
- HIPAA Training

Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department and/or the Training and Technical Assistance Team.



All DHS Head Start staff to review and acknowledge review and acceptance of CoSA

Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and receive training on safeguarding FERPA, HIPAA, PHI, PII and IDEA Part B and C data.

Performance Standards:

1302.101(b)(4)

	DHS Early Head Start Program Policy		
WELLNESS SUPPORT SERVICES 1			
SUBJECT	Identification and Intervention through Wellness Support Services		
REFERENCE	Mental Health		
EFFECTIVE	10/1/2020		
Policy Council Approval: 7/26/16	Policy Council Revision: Pending	Governing Body Approval: 9/19/16	Governing Body Revision: Pending
PAGE: 1 of 2			

Policy:

The Early Head Start Program will develop and implement procedures for the identification and the effective provision of mental health services to Early Head Start children, their family members, and to Early Head Start staff in need of wellness supports through the program's Wellness Support Services. Wellness Support Services will be provided by licensed mental health professionals and consultants with experience in early childhood social-emotional development and in the provision of mental health services to young children, their families, and staff.

Early Head Start licensed mental health professionals, behavior coaches/consultants, and other designated staff will support the social-emotional development of children and the wellness of family members and staff by providing education and services at the following levels:

Foundation – Effective Workforce

The Early Head Start Program will provide services to children, families and staff in need of assistance. Emphasis will be placed on the provision of training and supports to staff to promote staff well-being so that they are able to cultivate supportive and caring relationships with children and families.

Tier I: Promotion - Nurturing and Responsive Relationships and High-Quality Supportive Environments

The Early Head Start program will promote the positive social-emotional development of all children by creating and implementing an approach that focuses on positive and nurturing relationships between staff, children, and parents/guardians.

Tier II: Prevention - Targeted Social-Emotional Supports

The Early Head Start program will promote the positive social-emotional development of identified children through parent and teacher education, classroom observations and teacher consultations to impact effective strategies that promote wellness.

Tier III: Intensive Intervention



The Early Head Start program will respond to children, family members and staff in need of individualized interventions by providing consultation, referrals to community providers or direct intervention services.

The Early Head Start program will ensure compliance with all confidentiality policies, as required by law, including when documenting services, referrals and follow-up provided in all data management systems utilized by the Head Start program.

All mental health documentation must be entered according to the *City of San Antonio Data Entry & Benchmark Due Date Guide*.

Performance Standard:

1302.45

	DHS Early Head Start Program Policy		
DISABILITIES 2			
SUBJECT	Timely Referrals		
REFERENCE	Disabilities Services		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 9/22/20	Governing Body Approval: 9/19/16	Governing Body Revision: 11/12/20
PAGE: 1 of 1			

Policy:

A child with a delay or a suspected delay may require a formal evaluation under the Individuals with Disabilities Education Act (IDEA) to determine the child's eligibility for intervention services. The Early Head Start (EHS) Disabilities Manager will collaborate with other program staff including Part C Agencies through the referral process for each child which may include screening, developmental assessment, and formal evaluation.

The EHS Disabilities Manager will collaborate with other program staff to facilitate the provision of support services, such as educational and behavioral services and supports, to meet the needs of children, prior to an eligibility determination under the Individuals with Disabilities Education Act (IDEA). Children who do not respond to support services and are potentially eligible for Part C services, should be referred for an evaluation as soon as the need becomes evident and parent/guardian consent has been obtained.



City of San Antonio staff will develop a system to ensure that referrals, follow-up, and timelines are documented in Child-Plus and must adhere to the City of San Antonio Benchmark Due Date Guide and the EHS Program Child- File Scan Order and Process Guide.

Performance Standard:

1302.61(a)(b); 1302.33(a-b)

Other references:

Head Start Act, Section 640 (d) (1 – 3) and United States Department of Education, Office of Special Education and Rehabilitative Services letter dated January 21, 2010

	DHS Early Head Start Program Policy		
EDUCATION 1			
SUBJECT	Home Visits/Parent Conferences		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 04/23/19	Governing Body Approval: 9/19/16	Governing Body Revision: 5/23/19
PAGE: 1 of 2			

Policy:

Early Head Start (EHS) teachers must complete two Home Visits and no less than two Parent/Teacher Conferences each program year for center-based services.

A system must be in place to ensure that completion dates of the Home Visits and Parent/Teacher Conferences are entered into *Child Plus* and meet the *City of the San Antonio Benchmark Due Date Guide*, the *EHS File Scan Order and Process Guide*, and applicable *ChildPlus Data Entry Guide*.

Documentation of the Home Visit and Parent/Teacher Conference must be maintained in the child file and ChildPlus. If a Home Visit or Parent/Teacher Conference did not occur, documentation regarding why the event did not occur must be noted in Child Plus.

The first Home Visit may be completed by the teacher no more than 14 calendar days prior to the first day of a child's entry into the program. If a child enters the program after January 31st, a minimum of one home visit and one Parent/Teacher Conference must be completed by the last day of the program year. If a child's date of entry is within 45 calendar days of the Parent/Teacher Conference benchmark due date, then the teacher must complete the Home Visit but is not required to complete both the Home Visit and the Parent Conference.



Home Visits and Parent/Teacher Conferences will be conducted in the family's home language and, when necessary, using the services of an interpreter. The Home Visits and Parent/Teacher Conferences should be scheduled at the parent's convenience and completed in the home or-and if necessary, at a mutually agreed upon neutral location, upon parent/guardian's request.

Home Visits and Parent/Teacher Conferences offer opportunities for parents/guardians and staff to share knowledge related to the strengths, needs, interests, goals, and concerns of the child and program activities. During the Home Visits and Parent/Teacher Conferences the teacher will share work samples, educational assessment outcomes, screening information, and information regarding the transition into a PreK/Head Start program, when applicable.

Service Providers will develop and implement procedures to ensure that the information shared at the Home Visits and Parent/Teacher Conferences is documented.

Performance Standard:

302.34 (b) (2-3, 7-8); 1302.46; 1302.50; 1302.71 (a,b,e)

	DHS Early Head Start Program Policy		
EDUCATION-3			
SUBJECT	Individualization		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 9/22/20	Governing Body Approval: 9/19/16	Governing Body Revision: 11/12/20
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Policy:

The program will provide individualized caregiving and instruction to meet each child's unique characteristics, strengths, and needs, taking into consideration gender, family composition, the cultural and linguistic background, pattern of development and learning.

Classroom teachers must document individualized caregiving, instruction and activities including large group, small group and one/one lessons and activities into lesson plans.

Home Visitors must document individualized learning experiences and activities into the home visit planning form/lesson plan.



The Early Head Start (EHS) Program and Service Providers will work together to develop a system to ensure that the plan for individualized caregiving and/or instruction for each child is reviewed and updated on a regular basis.

Information from the following will be used to plan individualized instruction and activities:

- Formal and informal child assessments
- Input from parents regarding each child's individual characteristics, interests, strengths and needs
- Developmental (ASQ-3), Behavioral (ASQ:SE-2) and Sensory (hearing and vision) screenings
- Medical/dental evaluations/treatments
- Wellness Contact Logs for ongoing wellness support (if applicable), and
- Referrals for wellness support (if applicable)
- An Individualized Family Service Plan (IFSP) for children with delays/disabilities (if applicable)
- Outside Agency Documentation (if applicable)
- Home Language Survey

Performance Standard(s):

1302.31 (c) (1); 1302.33; 1302.61

	DHS Early Head Start Program Policy		
EDUCATION 5			
SUBJECT	Development and Behavior Screening		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/19		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/25/21	Governing Body Approval: 9/19/16	Governing Body Revision: 5/27/21
PAGE: 1 of 2			

Policy:

The Early Head Start Program uses the Ages and Stages Questionnaire (ASQ-3) as the developmental screening and the Ages and Stages Questionnaire Social and Emotional, Second Edition (ASQ: SE-2) as the behavioral screening.

Service Providers must complete the ASQ-3 and ASQ: SE-2 in collaboration with each child's parent/guardian on or before the 45th calendar day after the child first attends the program. Returning children will not be rescreened each program year. Developmental and behavioral screenings must be completed within the timeframe to identify early concerns regarding a child's developmental, sensory, behavioral, motor, language, social, cognitive, perceptual, and emotional skills so appropriate referrals are made.

The ASQ-3 and ASQ: SE-2 will not be completed by the teacher or home visitor. If the parent or guardian needs assistance completing the questionnaire, the teacher, home visitor or other staff member may provide the most appropriate accommodation for completion. The ASQ-3 and ASQ: SE-2 will be distributed by the Service Provider no more than two weeks prior to the first day of a child's entry into the center for center-based services. For home-based services the ASQ-3 and ASQ:SE-2 will be distributed no more than two weeks prior to the first home visit. The screenings may not be distributed during Early Head Start (EHS) enrollment, or family meetings. To the greatest extent possible, the screening procedures must be sensitive to the child's cultural background and home language.

EHS Program and Service Providers will work together to develop a comprehensive system to ensure proper training, administration and monitoring of the screening tools that includes, at a minimum, the following:



- Identifying appropriate staff responsible for administering, scoring, and follow-up and referrals.
- Ensuring the appropriate version is utilized for child's age and language.
- Ensuring proper completion of the screening tool.

- Ensuring accurate scoring of the screening tool.
- Establishing timeframes for follow-ups, referrals, and documentation
- Following the *City of San Antonio Benchmark and Due Date Guide* and the *EHS File Scan Order and Process Guide*.
- Completing routine internal monitoring of child files.
- Monitoring the fidelity of screenings

The EHS Program will develop and implement procedures to address the use of the ASQ-3 and ASQ: SE-2 for children with an identified disability or Individual Family Service Plan (IFSP). A child is not automatically disqualified from receiving a developmental or behavioral screening if they have an identified disability or IFSP. Sensitivity to the parent/guardian should always be a priority. Procedures may include a determination to complete only certain sections of the ASQ-3 or the ASQ: SE-2. If it is determined ~~by the teacher, home visitor, or other early childhood professional~~ that it is not appropriate for a parent/guardian to complete any section of the developmental or behavioral screening, the information supporting this determination must be documented in Child-Plus according to the *ChildPlus Data Entry Guide*.

Performance Standard:

1302.33;1302.25

	DHS Early Head Start Program Policy		
EDUCATION 8			
SUBJECT	Child File		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/24/22	Governing Body Approval: 9/19/16	Governing Body Revision: 8/4/22
PAGE: 1 of 1			

Policy:

The Early Head Start (EHS) Program and Service Providers will work together to develop a system to ensure that each child has a Child File that organizes and contains multiple sources of information used for ongoing assessments and instructional planning.

The Child File for center-based services will contain the following:

- Documentation from home visits and parent/teacher conferences including parent/guardian input
- Work samples
- Developmental Screening
- Social and Emotional Screening
- Beginning, Middle and End of year formal assessment summary information
- Transition activities, if applicable
- IFSP, if applicable
- IEP, if applicable
- Outside Agency Documentation, if applicable
- Dual Language Learner Documentation, if applicable
- Wellness Documentation, if applicable
- Other items pertaining to educational development

The Child File for home-based services will contain the following:

- Work samples
- Developmental Screening
- Social and Emotional Screening
- Beginning, Middle and End of year formal assessment summary information
- Transition activities (if applicable)
- IFSP, if applicable
- IEP, if applicable
- Outside Agency Documentation, if applicable
- Dual Language Learner Documentation, if applicable
- Wellness Documentation, if applicable
- Other items pertaining to educational development



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The Service Providers must develop a system to ensure that the Child File is located in the teacher's classroom or home visitor's office, kept confidential, and available for parents to review upon request with the teacher or home visitor. The file must also be accessible to parents/guardians and monitors/reviewers upon request.

Performance Standard(s):

1302.30-1302.34;1302.35

	DHS Early Head Start Program Policy		
EDUCATION 9			
SUBJECT	Multidisciplinary Staffing		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/24/22	Governing Body Approval: 9/19/16	Governing Body Revision: 8/4/22
PAGE: 1 of 1			

Policy:

The Early Head (EHS) Program and Service Providers will work together to develop a system in place for regular communication among program staff to facilitate quality outcomes for children and families. Service Providers will schedule at least two Multidisciplinary Staffing (MDS) meetings annually for every enrolled child. If a child enters the program after ~~January 31st~~ April 15th, a minimum of one MDS meeting will be held before the last day of the program year.

The MDS meeting is a documented and planned communication tool utilized to create a cohesive team approach to discuss the strengths and needs of children and families. The Center Director or designee, Family Support Staff, and Teachers or Home Visitor and a member of the City of San Antonio Early Education Services Team are required to participate in the MDS. Content area coordinators responsible for Education, Health, ERSEA, Mental Health, Transportation, Nutrition, Disabilities, and other related services may be required to attend based on the child/family needs.


The EHS Program and Service Providers will work to develop and maintain a record-keeping system to provide accurate and timely information regarding children, families, and staff and must ensure appropriate confidentiality of this information. The MDS documentation must include the completion date of the MDS, signatures of all in attendance, and topics covered. A system must be in place to ensure that completion dates of the MDS are entered and the MDS document is scanned into Child Plus and meets the *City of the San Antonio Benchmark Due Date Guide*, *ChildPlus Data Entry Guide*, and the *Early Head Start File Scan Order and Process Guide*.

Performance Standard(s):

1302.101(b)(2)(3); 1302.33; 1302.34; 1302.35





SUBJECT	Discipline and Guidance		
REFERENCE	Education and Early Childhood Development		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 7/28/20	Governing Body Approval: 9/19/16	Governing Body Revision: 8/13/20
PAGE: 1 of 2			

- Corporal punishment or threats of corporal punishment
- Punishment associated with food, naps, toilet training
-  Pinching, shaking, or biting a child

- Hitting a child with hand or an object
- Putting anything in or on a child's mouth
- Humiliating, ridiculing, rejecting, or yelling at a child
- Pointing a finger in a child's face
- Snapping fingers at a child
- Use of isolation to discipline a child
- Binding or tying a child to restrict movement
- Threatening phrases/tone or sarcastic language/tone
- Subjecting a child to harsh, abusive, or profane language
- Placing a child in a locked or dark room, bathroom, or closet with the door closed
- Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age including requiring a child to remain in a restrictive device
- Child restraint performed by staff not certified in proper restraint procedures
- Withholding outdoor free play
- Requiring a parent/guardian to pick up a child due to misbehavior

Performance Standard(s):

1302.17; 1302.90 (c); 1302.31 (e) (2-4)

	DHS Early Head Start Program Policy			
ENVIRONMENTAL HEALTH AND SAFETY 1				
SUBJECT	Safe Environments			
REFERENCE	Environmental Health and Safety			
EFFECTIVE	8/1/2016			
Policy Council Approval: 7/26/16	Policy Council Revision: 4/24/18	Governing Body Approval: 9/19/16	Governing Body Revision: 8/17/18	
PAGE: 1 of 1				

Policy:

Early Head Start (EHS) Program, Service Providers will maintain indoor/outdoor environments and facilities to ensure they are safe, clean and in quality condition so as to prevent injury to a child. Service Provider will develop a system to maintain safe environments free from pollutants, hazards and toxins, including lead, that are accessible to children and could endanger children's safety, and to correct issues identified as unsafe and/or hazardous through the monitoring process.

Service Providers will develop and implement procedures to ensure state-certified lead testing of water, soil, and paint once every three years. If lead results are positive, the Service Provider must inform the Head Start Grant Recipient and provide a plan for abatement within 24 hours of notice.

Service Providers will maintain Head Start group sizes and ratios. Service Providers will also be responsible for safety drills, maintenance of first aid kits, training of staff, and accommodation of children with disabilities, food safety, and sanitation. In addition, Service Providers will maintain compliance with Texas Health and Human Services Commission Child Care Regulations requirements.

Service Providers will ensure the maintenance log is current and safety concerns are addressed.

Performance Standard(s):



1302.47b(1)(2); 1302.21; 1302.102(d)(ii)

Information Memorandum:
ACF-IM-HS-23-01

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	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 2			
SUBJECT	Staffing and Class Size Requirements		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 7/28/20	Governing Body Approval: 9/19/16	Governing Body Revision: 8/13/20
PAGE: 1 of 2			

Policy:

Early Head Start (EHS) Program, Service Providers will ensure that EHS classes are designed with no more than eight children and staffed by two paid teachers. It is recommended, whenever possible, that a third person be in the classroom, such as a volunteer.

Classroom Design

Ages	Classroom Design
6 Wks -36 Months	All EHS classrooms, by design, will have no more than eight children enrolled per class. The integration of EHS enrolled children and non EHS children per classroom is encouraged.

Group Size

Ages	Group Size
6 Wks -36 Months	Maximum of eight children enrolled per class. Two teachers with no more than eight children. Two teachers must be in the classroom at all times.

Ratios

Ages	Ratios
6 Wks -36 Months	One teacher to four children with two teachers in the classroom at all times.

Class sizes are determined based on square footage, with a minimum of 35 square feet/child. Service Providers must seek prior approval before any change to a classroom age group designation. As children age throughout the program, they may remain in their current classrooms until room becomes available in the next age-appropriate classroom.

Classroom management entails both teachers meeting the needs of all children. However, Service Providers must ensure that each teacher working exclusively with infants and toddlers has the responsibility for no more than four infants and toddlers when meeting home visits, parent/teacher conference expectations and developmental needs of the children. All EHS sites must comply with the above stated staffing, group and class size requirements.



Ratios must be maintained during EHS hours. Program hours vary by site and are set and approved at the beginning of the program year as part of the EHS Program Design.

Volunteers being counted in classroom ratios

A volunteer may be used to supplement the required adult/child ratio only for short periods of time, 10-15 minutes to accommodate for unscheduled interruptions/emergencies. Volunteers may be used to supplement for restroom breaks, children's needs, and to cover lunch hours as long as a qualified EHS teacher is in the classroom. **A volunteer must never be left alone with a child or group of children and must always remain with a qualified EHS teacher.** All volunteers must sign the Head Start Standards of Conduct, pass a background check, and receive volunteer training. Providers must keep documentation of volunteer training and comply with the Texas Health and Human Services Commission Child Care Regulations.

Performance Standard(s):

1302.21(b)(1)(2); 1302.94(a)(b)

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 3			
SUBJECT	Hygiene & Cleaning Practices		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/25/21	Governing Body Approval: 9/19/16	Governing Body Revision: 5/27/21
PAGE: 1 of 2			

Policy:

Early Head Start (EHS) Program Service Providers will develop and implement systems that promote hand washing, hygiene, and sanitation and disinfecting of the classroom including equipment and materials. Providers must ensure staff are trained on the procedures and documentation of that training ~~must be~~ is maintained.

Service Providers will follow guidance from the Office of Head Start (OHS), or recommendations made by the Centers for Disease Control and Prevention, Child Care Regulation, the City of San Antonio Metro Health Department, and/or Caring for Our Children National Health and Safety Standards Guidelines for Early Care and Education Programs when establishing procedures for hygiene, cleaning, disinfecting, and sanitation practices.

Hand washing

- Staff, volunteers, and children must wash their hands with soap and running water at a minimum during the following times:
 - Upon arrival,
 - Before and after diapering or toilet use
 - Before food preparation, handling, or any other food-related activity
 - Before and after eating
 - Whenever hands are contaminated with blood or other bodily fluids
 - After handling pets or other animals
 - After outdoor activities
 - Before and after playing in a water/sand play table
 - Any other time there is reason to believe the child has come in contact with substances that could be harmful to the child

- Staff and volunteers must also wash their hands with soap and running water:
 - Before and after giving medication
 - Treating or bandaging a wound
 - After assisting a child with toilet use
 - After using any cleaners or toxic chemicals; and
 - After removing gloves

Hygiene



- Easily accessible nonporous, on-latex, disposable gloves are to be worn by all staff when they are in contact with blood or bodily fluids.
- Bodily fluids should be cleaned and disinfected immediately in keeping with Head Start Performance Standards and Texas Health and Human Services Commission Child Care Regulations.
- Any tools and equipment used to clean bodily fluids should be cleaned, disinfected immediately, and blood-contaminated materials must be disposed of properly.
- Hand Sanitizers, pre-moistened towelettes, and waterless hand cleaners are not allowed to replace handwashing and should not be accessible or used on children.

Sanitation

- Toys and equipment that are placed in a child's mouth, or otherwise contaminated by body secretion or excrement, must be sanitized before handling by another child.
- Cloth toys must be washed at least weekly and when contaminated.
- All linens must be washed at least weekly and when soiled or before another child uses them.
- All sleeping equipment must be sanitized before a different child uses it and when soiled.
- Water play tables must be empty, and toys used in water tables must be sanitized daily, children and caregivers must wash their hands before using the water table.
- Sand boxes and tables must be maintained in a sanitary manner.
- All garbage must be inaccessible to children and managed it is necessary to keep the child-care center inside and outside, free of insects, rodents, and offensive odors and disposing of ~~it~~ those in accordance ~~ing~~ to local and state requirements.
- All floors, ceilings and walls must be kept in good repair and clean. Paint used at the center must be lead-free.
- All areas in the center used by children will be kept heated, lighted, and ventilated.
- All tabletops, furniture, and other similar equipment used by children will be sanitized when soiled or contaminated with matter such as food, body secretions, or excrement. ~~will be sanitized~~
- All cleaning supplies and other toxic materials will be marked and kept separate from food and be inaccessible to children.
- Hazardous materials will be stored and disposed of as recommended by the manufacturer.

Performance Standard:

1302.47(b)(6)(i)(ii)(iii)

	DHS Early Head Start Program Policy		
ENVIRONMENTAL HEALTH AND SAFETY 6			
SUBJECT	Medication Administration		
REFERENCE	Environmental Health and Safety		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 4/24/18	Governing Body Approval: 9/19/16	Governing Body Revision: 8/17/18
PAGE: 1 of 1			

Policy:

Early Head Start (EHS) Program, Service Providers will establish and maintain written procedures regarding the administration, handling, storage, and appropriate disposal of expired medications, for every child, staff, and volunteer.



A physician's instructions and written parent or guardian authorization is required for all medications administered by staff.

Service Providers will ensure that appropriate staff members can demonstrate proper techniques for administering, handling, and storing medication, including the use of any necessary equipment to administer medication. Service Providers must retain documentation of medication administration training.

All medication must be in the original labeled container, not expired, up-to-date, and stored under lock and key, and refrigerated, if necessary, including ~~those~~ any medication required for staff and volunteers. Rescue medications, including Epi Pens, inhalers, and glucose, do not need to be locked up, however, they must be kept out of the children's reach and accessible to staff at all times. Any staff person administering rescue medications, whether in the classroom, on the playground, or on field trips, must be trained in the administration of such medications.

Performance Standard:

1302.47(7)(iv)

	DHS Early Head Start Program Policy		
FAMILY 2			
SUBJECT	Staff/Parent Communication System		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: 7/28/20	Governing Body Approval: 8/13/20	Governing Body Revision: 8/13/20
PAGE: 1 of 2			

Policy:

The Head Start Program, including the Early Head Start (EHS), develops relationships with parents/guardians and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents/guardians to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community.

~~All~~ Head Start staff to include Family and Community Support and Service Provider staff will ensure continuous communication ~~between~~with families ~~is maintained and themselves~~. This will allow our families to develop a sense of knowledge, trust and respect for our staff members, thus allowing staff and parents/guardians to work easily together to ensure that each child and family are receiving the full amount of benefits that Head Start has to offer.



The Head Start Program conducts family engagement services in the family's preferred language, or through an interpreter, to the extent possible, and ensures families have the opportunity to share personal information in an environment in which they feel safe.

The Head Start Grant Recipient will work with the Service Provider to ensure the establishment of a Parent Connection Committee (PCC) comprised exclusively of parents/guardians of currently enrolled children at each site/center as early in the program year as possible. At a minimum, procedures must include:

- Activities to ensure parents/guardians of currently enrolled children understand the process for elections to the Head Start Policy Council (HSPC) and other leadership opportunities.

- Opportunities for PCC members to ~~advise~~~~assist~~ staff in developing and implementing local program policies, activities, and services to ensure they meet the needs of children and families.
- A process for PCC members to communicate with the Head Start Policy Council (HSPC).
 - i. PCC agendas must dedicate time to allow for parent questions/discussion

Performance Standard(s):
1302.50(b)(2) & (5); 1301.4

	DHS Early Head Start Program		
		Policy	
FAMILY 4			
SUBJECT	Parent Activities to Promote Child Learning and Development		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2020		
Policy Council Approval: 7/28/20	Policy Council Revision: 5/24/22	Governing Body Approval: 8/13/20	Governing Body Revision: 8/4/22
PAGE: 1 of 1			

Policy:

The Head Start Program, including Early Head Start and Service Provider will promote shared responsibility with parents/guardians for children's early learning and development. In addition, implement family engagement strategies that are designed to foster parental confidence and skills in promoting children's learning and development.

The Head Start Grant Recipient and Education Service Providers will collaborate to develop and implement procedures that include, at a minimum, the following:



- Offering activities that support parent-child relationships and
- ~~Offer activities that support cvChild Deddevelopment~~ development (including language, dual language, literacy, and bi-literacy development)
- Provide parents/guardians with information about the importance of their child's regular attendance, and partner with them, as necessary to promote consistent attendance (impact of attendance on learning outcomes)
- For dual language learners, information, and resources for parents/guardians about the benefits of bilingualism and bi literacy

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Performance Standard(s):

1302.51(a)

	DHS Early Head Start Program Policy		
FAMILY 6			
SUBJECT	Family Partnership Services		
REFERENCE	Family and Community Support		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 7/28/20	Governing Body Approval: 9/19/16	Governing Body Revision: 8/13/20
PAGE: 1 of 1			

Policy:

Family Partnership Services

The Head Start Program, including the Early Head Start (EHS) Program, engages in a process of collaborative and respectful partnership-building with parents/guardians to establish mutual trust and to identify needed services, supports, family strengths, and family goals. This process must take into consideration each family's readiness and willingness to participate in the process and must be engaged in jointly with parents. Family services are to be individualized and focused on the achievement of identified outcomes as described in the Head Start Parent, Family, and Community Engagement Framework ([PFCE](#)).



Staff is to adhere to all confidentiality policies and procedures to protect family information.

Family and Community Support staff will offer:

- A **Family Partnership Agreement** to orient parents/guardians of the roles and responsibilities of Head Start parents/guardians and staff.
- A **Family Strengths and Needs Assessment** ~~tool~~ to identify each family's strengths, needs and interests.
- ~~An opportunity~~ **Opportunities** to develop individualized family goals. The goal setting process must include: family goals, strategies for success, staff support to be provided, timeframes, and community resources that are available to assist families in meeting their goals.
- Community resources ~~that are able to help~~ meet their family's identified needs, ~~interests and/or goals.~~

Performance Standard(s):

1302.52

	DHS Early Head Start Program Policy		
HOME-BASED 2			
SUBJECT	Home Visits for Home-Based Services		
REFERENCE	Home-Based Option		
EFFECTIVE	10/1/2020		
Policy Council Approval: 9/22/20	Policy Council Revision: 9/22/20	Governing Body Approval: 11/12/20	Governing Body Revision: 11/12/20
PAGE: 1 of 2			

Policy:

The Early Head Start (EHS) Program Service Provider will provide one home visit per week per family that lasts at least an hour and a half and provide a minimum of 46 visits per year.

Service Providers must ensure that all home visits are:

- Planned jointly by the home visitor and parents, and reflect the critical role of parents in the early learning and development of their children, including that the home visitor is able to effectively communicate with the parent, directly or through an interpreter;
- Planned using information from ongoing assessments that individualize learning experiences;
- Scheduled with sufficient time to serve all enrolled children in the home and conducted with parents or other primary caregiver and are not conducted when parent/non-primary caregiver is not present (i.e., childcare provider or other temporary caregivers only are present);
- Scheduled with sufficient time and appropriate staff to ensure effective delivery of the full range of program services

Home Visit activities must include:

- Age and developmentally appropriate, structured child-focused learning experiences;
- Strategies and activities that promote parents' ability to support the child's cognitive, social, emotional, language, literacy, and physical development;
- Strategies and activities that promote the home as a learning environment that is safe, nurturing, responsive and language and communication rich;

- Strategies to support parents in using the home as a learning environment while helping parents understand how they influence their children's development every time they interact throughout the day; through daily interactions
- Strategies to support parents understanding of safe play materials that can be found in the home ~~rather than on purchased items;~~
- Research-based strategies and activities for children who are dual language learners that recognize bilingualism and biliteracy as strengths, and:
 - For infants and toddlers, focus on the development of the home language, while providing experiences that expose both parents and children to English
- Follow up with the families to discuss learning experiences provided in the home between each visit, address concerns, and inform strategies to promote progress toward school readiness goals.



Service Provider must make up planned home visits or scheduled group socialization activities that were canceled by the program, and to the extent possible attempt to make up planned home visits canceled by the family, when this is necessary to meet the minimum of 46 home visits.

~~If the family cancels and/or is not at home for the scheduled home visit for two consecutive visits, the Home Visitor will make every attempt to determine the reasons for the missed home visits by documenting their attempts to contact the family in the Child Plus data system. In addition, the Home Visitor will report this information to their Supervisor. The Supervisor will make every attempt to contact the family either by phone and/or making a home visit to discuss barriers to keeping scheduled appointments. The Supervisor may also discuss with the family if the Home Based program is the best fit for the family. If parent cannot be found and the home is vacant, the child's slot may be then considered vacant with the Head Start Administrator's authorization.~~

Medical or social service appointments may not be used for the purposes of meeting the minimum home visits requirement.

Performance Standard:

1302.22 (c)(i), 1302.35(a)(b)(1,2,3,4), 1302.35(c)(1, 2, 3, 4, 5)

	DHS Early Head Start Program Policy		
HOME-BASED 5			
SUBJECT	Curriculum for Home Based Services		
REFERENCE	Home-Based Option		
EFFECTIVE	10/1/2020		
Policy Council Approval: 9/22/20	Policy Council Revision: 9/22/20	Governing Body Approval: 11/12/20	Governing Body Revision: 11/12/20
PAGE: 1 of 1			

Policy:



The Head Start definition of curriculum is a planned management of time, materials and activities to guide children's individual pattern of learning and development. The curriculum helps children gain skills and confidence and should integrate Early Head Start (EHS) components which form a foundation for school readiness. Service Providers will involve parents in the implementation of the program's curriculum and approaches to child development and education.

The home-based curriculum must be:

- Developmentally appropriate, research-based and align with the five Central Domains off from the Head Start Early Learning Outcomes Framework (HSELOF) in an integrated approach, using intentional and individualized instruction to support children's learning and development;
- Promote the parent's role as the child's teacher through experiences focused on the parent child relationship and as appropriate, the family's traditions, cultures, values and beliefs; ~~Align with the five Central Domains from the HSELOF in an integrated approach, using intentional and individualized instruction to support children's learning and development;~~
- Have an organized developmental scope and sequence that includes plans and materials for learning experiences based on developmental progressions and how children learn.

Performance Standard(s):

1302.35 (d)

	DHS Early Head Start Program Policy		
PDM 7			
SUBJECT	Identification and Reporting of Child Abuse and Neglect		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/25/21	Governing Body Approval: 9/19/16	Governing Body Revision: 5/27/21
PAGE: 1 of 2			

Policy:

The Head Start Program, including Early Head Start (EHS) must develop and implement procedures to respond to suspected or known child abuse whether it occurs at or away from the program.

All Head Start staff including Department of Human Services (DHS) Head Start staff, Service Provider staff, as well as center directors, teachers, teacher assistants, floaters, substitutes, ~~a-site personnel, and contractors~~ ~~consultants~~ and volunteers must follow the Service Provider's policies and procedures regarding child abuse and neglect.

The EHS Senior Special Projects Manager must be notified ~~within~~ immediately, and no later than 24 hours of an allegation of abuse or neglect against a City of San Antonio DHS Head Start or Child Care staff member, substitute, contractor or volunteer. ~~incident that has occurred within the EHS Program.~~

The ~~Head Start Administrator~~ EHS Senior Special Projects Manager must also be notified of any report that has been made for suspected child abuse or neglect occurring ~~away from~~ outside of the EHS Program within 24 hours of ~~reporting~~ notification. Such official incident reporting must be provided in writing.

Additionally, when any DHS Head Start Program Staff, contractors, Service Providers, Child Care Center staff or consultants, contractors, v-volunteers witnesses or suspects child abuse or neglect they must make a report to the Texas Department of Family and Protective Services (TDFPS) within 48 hours. According to the State of Texas, Title 5, Chapter 261 of the Family Code, "child abuse is an act or omission that endangers or impairs a child's physical, mental or emotional health and development." Child abuse may take several forms including, but not limited to:

- Physical, mental, or emotional injury
- Sexual abuse
- Sexual exploitation
- Physical neglect
- Medical neglect

- Inadequate supervision

In filing a report, ~~staff~~personnel will follow state regulations regarding the timeframes that reports must be made, the information that must be reported, and confidentiality of reported information.

Service Providers will develop and implement procedures to notify the parents/guardians of any suspected or known child abuse incidents occurring within the EHS Program. EHS City staff and Service Providers must also comply with Texas Health and Human Services Commission/Child Care Regulations.

~~Should the Service Provider be informed that a report has been made for suspected child abuse or neglect occurring outside the Head Start Program, they must comply with notification requirements outlined in this policy.~~

All EHS staff, including EHS Head Start staff, teachers, teacher assistants, and all other ~~campus or~~ site personnel, substitutes, consultants, contractors and volunteers receive training on procedures for identifying and reporting child abuse or neglect. EHS staff are expected to fully cooperate with ~~Texas Department of Family Protective Services~~TDFPS, Texas Health and Human Services Child Care Regulations and other applicable agency personnel ~~to report any suspected or known incidents regarding an investigation of suspected abuse or neglect.~~



Performance Standard(s):

1302.41; 1302.47(5)(i); 1302.90; 1302.92(b)(2); 1302.102
1302.47(b)(4)(i)(K); 1302.47(b)(5)(i); 1302.53(a)(2)(iii); 1302.90(b)(2); 1302.92(b)(2)
1302.102(d)(1)(ii)(A); 1303.22(c)(5)(iii); 1303.22(c)(8)

Resources:

Office of the Texas Attorney General, "What Can We Do about Child Abuse Part 2":
https://www.texasattorneygeneral.gov/ag_publications/txts/childabuse2.shtml

Family Code, Chapter 261. Investigation of Report of Child Abuse or Neglect
<http://www.statutes.legis.state.tx.us/Docs/FA/htm/FA.261.htm>

	DHS Early Head Start Program Policy		
PDM 9			
SUBJECT	Critical Incident Reporting		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 5/25/21	Governing Body Approval: 9/19/16	Governing Body Revision: 5/27/21
PAGE: 1 of 1			

Policy:

The Head Start Program, including Early Head Start (EHS) must develop and implement a system for Critical Incident Reporting (CIR). All staff must be trained on incident reporting.

A critical incident includes, but is not limited to:

- Suspected child abuse/neglect which may or may not have occurred during service hours.
- Allegations of child abuse/neglect or maltreatment against any EHS staff member, volunteer, consultant and ~~or~~ contractor, including, but not limited to grabbing, shoving, shaking, swatting, or dragging a child; spanking or any other type of corporal or physical punishment; binding tying, or taping a child; terrorizing a child with threats or menacing acts; or any form of sexual contact. injury to a child due to lack of supervision or unacceptable methods of child guidance
- Incidents which may have placed a child, family member or staff in danger, including any incidents in which a child was left unsupervised
- Any incident where a child is left unsupervised while in the care or under the supervision of program staff, which includes leaving a child alone anywhere on the grounds of an EHS center (e.g., in a classroom, bathroom, on a playground), as well as outside the facility in a parking lot, or on a nearby street.
- Inappropriate discipline, which is any type of conduct used to instill fear or humiliate rather than to educate a child, such as poking or pinching a child; making fun of or laughing about a child; using/withholding food or an activity as a punishment or reward; or isolating a child.
- Health incidents and illnesses, which include, but are not limited to:
 - Injuries that require urgent medical attention by a health-care professional, such as a broken bone; a severe sprain; chipped or cracked teeth; head trauma; deep cuts; contusions or lacerations; or animal bites.
 - Child or staff member leaving by emergency medical transport
 - Contagious diseases that could lead to an outbreak Any reportable disease/illness, as

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indicated by the Centers for Disease Control and Prevention, State of Texas, State of Texas Child Care Regulations, or the City of San Antonio Metro Health Department

- Child receiving outside medical attention at any point in time for an injury sustained during EHS program hours
- Unauthorized release where a child is released from an EHS center to a person without the permission or authorization of a parent or legal guardian and whose identity had not been verified by photo identification.
- Any incident which has the potential to generate negative media coverage
- Any media inquiry/coverage of the program
- Unplanned interruption in EHS Program services
- Closure of any facility or part of a facility, including outdoor play areas
- Accidents involving vehicles that transport children and families

When applicable, parents/guardians must be notified of critical incidents within 24 hours of occurrence. Providers must also provide notification to the EHS Senior Special Projects Manager or designee within 24 hours.



Performance Standard(s):

1302.47(c); 1302.102(d)(1)(ii); 1304.12; 1303.79(b)(3)

Information Memorandum:

ACF-IM-HS-22-07

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	DHS Early Head Start Program Policy		
PDM 15			
SUBJECT	<u>Staff</u> Health Requirements		
REFERENCE	Program Design and Management		
EFFECTIVE	8/1/2016		
Policy Council Approval: 7/26/16	Policy Council Revision: 1/25/22	Governing Body Approval: 9/19/16	Governing Body Revision: 2/24/22
PAGE: 1 of 2			

Policy:

The Head Start Program, including the Recipient and Education Service Providers, will develop and implement procedures requiring identified program staff to submit a copy of their most recent physical exam or approved health document within 30 business days of hire to ensure that staff do not pose a significant risk to the health or safety of others in the program. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

Every five years after the initial hire date, staff must submit a copy of their most recent physical exam or approved health document. The physical exam or approved health document must not be more than 12 months old and must include appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

~~Additionally, t~~The Head Start Program, including EHS and Education Service Providers, will develop and implement procedures to ensure regular volunteers complete appropriate screenings or tests for Tuberculosis or other communicable diseases as recommended by a healthcare professional.

~~The following requirement regarding vaccines is pending final action and/or court ruling as of December 31, 2021:~~

~~The Head Start Program, including Recipient and Education Service Providers, will develop and implement procedures to ensure compliance with the Federal Law requiring all staff, volunteers, and contractors, whose activities involve contact with or provide direct services to children and families, to be fully vaccinated from COVID 19.~~

~~The Head Start Program will develop and implement procedures related to COVID-19 Vaccine exemptions and testing requirements. Staff may request an exception from this mandatory~~



~~vaccination requirement if the vaccine is medically contraindicated for them or medical necessity requires a delay in vaccination. Staff also may be legally entitled to a reasonable accommodation if they cannot be vaccinated because of a disability, or if the provisions in this policy for vaccination, conflict with a sincerely held religious belief, practice, or observance.~~

~~Anyone for whom a vaccine is medically contraindicated; for whom medical necessity requires a delay in vaccination; or who are legally entitled to an accommodation with regard to the COVID-19 vaccination requirements based on an applicable Federal law must undergo weekly testing for COVID-19.~~

Documentation of health exams, ~~COVID-19~~ vaccination information, screenings, and/or tests must be kept on file.

Performance Standard(s):

1302.93; 1302.94

	DHS Early Head Start Program Policy		
PDM 18			
SUBJECT	Program Data – Access and Security		
REFERENCE	Program Design and Management		
EFFECTIVE	4/23/18		
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22
PAGE: 1 of 3			

Policy:

The Head Start Program, including Early Head Start (EHS), must establish an internal procedure for proper access and security of program data for the City of San Antonio Department of Human Services Head Start Program (DHS Head Start).

Procedure:

DHS Head Start utilizes ChildPlus as the secure database system for storing and tracking client information.

All user account holders are required to complete ChildPlus Access Request and ChildPlus User Security and Confidentiality Agreement forms. Upon completion, the forms are scanned and attached by the ChildPlus Administrator in ChildPlus under each respective user profile.

By accessing the database, staff understands and agrees to abide by all terms of the ChildPlus User Security and Confidentiality Agreement and any applicable state and federal laws regarding Personally Identifiable Information (PII) and Protected Health Information (PHI).

- Education Service Providers are required to designate a staff member to complete the Personnel Profile for all staff members funded by the Head Start or EHS grant or anyone who works with children or families enrolled in the Head Start or EHS programs under the Management Module in ChildPlus. Designated staff is defined as preauthorized users in the Management/Personnel Module.
- Upon completion of the Personnel Profile, the designee will notify the ChildPlus Administrator if the user requires access to PII. Not all personnel require a ChildPlus user account.
- The ChildPlus Administrator will confirm with the designee the role of personnel and the types of access required.

- The ChildPlus Administrator will complete a User Security profile in ChildPlus, assign a login username and temporary password, restrict access by location, and designate User Security group(s).
- The ChildPlus Administrator will email the new account holder the login username and temporary password.
- The new account holder will log into ChildPlus and change the temporary password to a permanent password.

Authorized ChildPlus users are granted access under one of the following groupings:

- Staff:
 - A ChildPlus personnel account will be created for all staff. ChildPlus user accounts and access is granted upon the approval of the ChildPlus Access Request Form and the completion of the ChildPlus User Security and Confidentiality Agreement Form.
- Education Service Providers:
 - An assigned ChildPlus Super User for each Service Provider formally requests accounts via email for Service Provider Head Start Staff. Service providers are subject to the confidentiality provisions under the Family Educational Rights and Privacy Act (FERPA).
- Contracted Providers:
 - A Special Projects Manager or designee will request user accounts for contractual providers via email or meeting with the ChildPlus Administrator. To meet the requirements of [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#), DHS Head Start requires any contract that include access to client information include an enforceable Business Associate Agreement (BAA). BAAs are documented in the professional services contract with the DHS Head Start.

Implementation of technical policies and procedures for electronic information systems that maintain electronic PII, PHI, and IDEA Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard HIPAA, FERPA, PHI, PII, and the Individuals with Disabilities Education Act (IDEA) part B and C data [and information](#) from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA part B and C electronically must follow encryption guidelines and ensure the receiving entity is an authorized recipient of the specific data being delivered.

~~Only computers configured by ITSD for use on the CoSA network are authorized for accessing ChildPlus.~~

Staff may utilize a program issued computer or device to access ChildPlus.

Staff ensures the environment in which they are working is secure, should include the use of privacy screen filters, and that only authorized persons are within viewing distance of the authorized user's screen and/or confidential documents.

All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).

Disclosure of ChildPlus information to a contractor is authorized but ONLY when an enforceable Business Associate Agreement (BAA) is in place.

All DHS Head Start staff must successfully complete the following trainings:

- CoSA Security Awareness Training
- ~~CoSA~~-HIPPA Training

• Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department [and/or the Training and Technical Assistance Team](#).



All DHS Head Start staff must review and acknowledge the review and acceptance of CoSA Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and ensure all staff receive training on safeguarding FERPA, HIPAA, PHI, PII and (IDEA) part B and C data.

Performance Standards:

1302.101(b)(4)

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	DHS Early Head Start Program Policy			
PDM 19				
SUBJECT	Management of Program Data			
REFERENCE	Program Design and Management			
EFFECTIVE	4/23/18			
Policy Council Approval: 1/22/19	Policy Council Revision: 5/24/22	Governing Body Approval: 2/28/19	Governing Body Revision: 8/4/22	
PAGE: 1 of 3				

Policy:

The Head Start Program, including Early Head Start, must establish an internal procedure for proper management of program data for the City of San Antonio Department of Human Services Head Start Program (DHS Head Start).

Procedure:

Implementation of technical policies and procedures for electronic information systems that maintain electronic Personal Identifiable Information (PII), Protected Health Information (PHI), and Individuals with Disabilities Education Act (IDEA) Part B and C to allow access only to those persons or software programs that have been granted access rights.

All DHS Head Start staff, regardless of position, share the responsibility to safeguard Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act of 1996 (HIPAA), PHI, PII, and the ~~Individuals with Disabilities Education Act (IDEA)~~ Part B and C related data and information from unauthorized access, acquisition, or disclosure. Staff that share PHI, PII and IDEA Part B and C information electronically must ensure the receiving entity is an authorized recipient of the specific data being delivered.

- Only computers and/or devices configured by ~~ITSD~~ the Information Technology (IT) Department for use on the CoSA network or Education Service Provider network are authorized for the storage or transport of PHI, PII and/or IDEA Part B and C data.
- Staff may utilize a program issued device to access systems to view and maintain PHI, PII, and IDEA Part B and C files.
- Staff ensures the environment in which they are working is secure and only authorized persons are within viewing distance of the authorized user's screen and staff should use a privacy screen for all

monitors and laptop screens.▸

- Disclosure of PII and/or PHI, and/or IDEA Part B and C to a contractor is authorized but ONLY when an enforceable Business Associate

Agreement (BAA) is in place.

- Personal devices shall not be used to store or transmit unencrypted protected data.
- Any removable media or storage devices used to transfer PHI, PII, and/or IDEA Part B and C data must be encrypted.
- All devices (e.g., laptops and phones) must have auto-lock enabled with a maximum timeout of 15 minutes. Staff are encouraged to lock their workstations manually when leaving their desk (Windows key + L or CTRL+ALT+DEL).

Facsimiles

- If any PHI, PII, and/or IDEA Part B and C data is transmitted via email, the email must be encrypted, ~~and the attachment must be protected by a password. The password to access the attachment must be sent to the recipient in a separate email.~~
- Hard copies (i.e., paper) of any PHI, PII, and/or IDEA Part B and C data must be kept secured in a lockable file cabinet or other secured storage.
- In the event that PHI, PII, and/or IDEA Part B and C data, either hard copy or electronic, are transported between locations, staff must take all precautions to ensure the materials remain secure and must remain in the presence of staff at all times.

• Facsimiles

- Any documents received via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be uploaded or scanned into appropriate software (i.e., ChildPlus) as soon as possible. Any electronic copies of the facsimile should be saved to the user's desktop; once the upload is completed the file should be deleted and the deletion confirmed. Any hardcopies of the facsimile must be stored in a secure location or destroyed.
- Any hardcopies of the documents sent via facsimile, either telefax or online, that contain PHI, PII and/or IDEA Part B and C data shall be either stored in a secure location or destroyed.

All DHS Head Start staff must successfully complete the following trainings:

- CoSA Security Awareness Training
- ~~CoSA~~ HIPAA Training
- ~~CoSA Employee Security Awareness Day in the Life~~ online training module

Completion of these trainings are documented and maintained by the City of San Antonio Human Resources Department and/or the Training and Technical Assistance Team.

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All DHS Head Start staff to review and acknowledge review and acceptance of CoSA

Administrative Directives that include Data Security and Use of Technology.

Education Service Providers and contractors must develop and implement procedures to ensure all staff comply with this procedure and receive training on safeguarding FERPA, HIPAA, PHI, PII and IDEA Part B and C data.

Performance Standards:

1302.101(b)(4)

	DHS Early Head Start Program Policy		
WELLNESS SUPPORT SERVICES 1			
SUBJECT	Identification and Intervention through Wellness Support Services		
REFERENCE	Mental Health		
EFFECTIVE	10/1/2020		
Policy Council Approval: 7/26/16	Policy Council Revision: 4/23/19	Governing Body Approval: 9/19/16	Governing Body Revision: 5/23/19
PAGE: 1 of 2			

Policy:

The Early Head Start Program will develop and implement procedures for the identification and the effective provision of mental health services to Early Head Start children, their family members, and to Early Head Start staff in need of wellness supports through the program's Wellness Support Services. Wellness Support Services will be provided by licensed mental health professionals and consultants with experience in early childhood social-emotional development and in the provision of mental health services to young children, their families, and staff.

Early Head Start licensed mental health professionals, behavior coaches/consultants, and other designated staff will support the social-emotional development of children and the wellness of family members and staff by providing education and services at the following levels:

Foundation – Effective Workforce

The Early Head Start Program will provide services to children, families and staff in need of assistance. Emphasis will be placed on the provision of training and supports to staff to promote staff mental wellness/well-being so that they are better are able equipped to cultivate supportive and caring relationships interact with children and families. in healthier and more positive ways.

Tier I: Promotion - Nurturing and Responsive Relationships and High-Quality Supportive Environments

The Early Head Start program will promote the positive social-emotional development of all children by creating and implementing an approach that focuses on positive and nurturing relationships between staff, children, and parents/guardians.

Tier II: Prevention - Targeted Social-Emotional Supports

The Early Head Start program will promote the positive social-emotional development of identified children through parent and teacher education, classroom observations and teacher consultations to impact effective strategies that promote wellness.

Tier III: Intensive Intervention

The Early Head Start program will respond to children, family members and staff in need of individualized~~intensive~~ interventions by providing consultation, referrals to community providers or direct intervention services. ~~Services and referrals will be documented in the mental health tab of ChildPlus.~~

The Early Head Start program will ensure compliance with all confidentiality policies, as required by law, including when documenting services, referrals and follow-up provided in all data management systems utilized by the Head Start program.

All mental health documentation must be entered according to the *City of San Antonio Data Entry & Benchmark Due Date Guide*.

Performance Standard:

1302.45