

Southern Seven Health Department/ Head Start



Policy Council Orientation Information





Southern Seven Health Department/Head Start Policy Council Orientation Information

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Head Start Policy Council—Tips for Parents and Families: What Is the Policy Council?

Parents and family members often have questions about their program's Policy Council. Explore this tip sheet to learn answers to common questions about the Policy Council.

As a parent, you may wonder what the Policy Council is and about its role in Head Start and Early Head Start. You may have questions about how to join, serve on, or leave the Policy Council.

We encourage you to discuss your questions with your child's teacher, your family service worker, the program director, or other staff. They can partner with you to make your Policy Council experience the best it can be.

What is the Policy Council?

The Policy Council is a group of Head Start and Early Head Start parents and community members who help lead and make decisions about their program. Policy Council members are elected by the parents of children enrolled in the program. Parents often join the Policy Council after serving on a parent committee.

The Policy Council meets regularly as a group. Members can serve for one year at a time, and for up to five years. They work closely with the program's management team and Governing Body to provide overall direction for the program.

Head Start the Policy Council—Tips for Parents and Families: What Is the Policy Council?

Why Do Head Start and Early Head Start Programs Have a Policy Council?

When Head Start began in 1965, its founders understood that parents are essential partners in educating young children. They felt that parents should help decide how Head Start services can most benefit their family and other families in the community.

Head Start created the Policy Council as a formal leadership and policy-making role for parents. Today, every Head Start and Early Head Start program must have a Policy Council as part of its leadership structure. Through the Policy Council, parents have a voice in decisions about how the program spends money, what children do in their classrooms, and how the program works with community partners.

Children, parents, and the program benefit when parents take on leadership roles. Children learn more and experience healthier development at school and at home. Parents can become more confident, gain skills, and connect with other parents and staff. Program staff learn about the strengths, interests, and needs of the children, families, and community they serve.

Want to learn more? Explore the other tip sheets in the Head Start Policy Council—Tips for Parents and Families Series:

- Joining the Policy Council
- Serving on the Policy Council
- Leaving the Policy Council

For more information about this resource, please contact us:
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ADMINISTRATION FOR
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NATIONAL CENTER ON
Parent, Family and Community Engagement



Head Start Policy Council—Tips for Parents and Families: Joining the Policy Council

Wondering about joining the Policy Council? Explore this tip sheet to help you decide whether to join your program's Policy Council.

Joining the Policy Council

Parents have many reasons for joining the Policy Council. Sometimes staff may ask if they are interested. Other times, parents might want to join after being on a parent committee. Let's explore how to make the decision to join the Policy Council.

Read the scenario below.

Scenario

Yesterday, when Richie dropped off his daughter Celine at her classroom, Sandra, a family service worker, asked if he would like to serve on the program's Policy Council.

When he asked why, Sandra answered, "You seem to be very involved in your daughter's life. I wondered if you might be interested. Also, it would be great to have a father on the Council. You could help all of the children in the program. Think about it. Let me know next week."

Richie is flattered by the offer but a little confused. He has heard about the Policy Council. He doesn't know much about it. He isn't sure what he can offer. Richie feels nervous. He has a lot of questions to ask Sandra.

Head Start Policy Council—Tips for Parents and Families: Joining the Policy Council

Like Richie, many parents have questions about joining the Policy Council. See some common questions below. You may have other questions. Remember, every question is important. Talk with program staff to help you learn about the Policy Council.

Common Questions about Joining the Policy Council



Why are you asking me to consider joining the Policy Council? What can I offer?

The Policy Council represents parents' voices and perspectives to guide decisions about the program. Policy Councils welcome parents and family members from all backgrounds and family structures. They may be mothers and fathers of all ages, grandparents, foster or adoptive parents, or other important adults in a child's life. You are being asked because you are the most important teacher in your child's life. Staff value your ideas about how to best serve all the children in the program.



What do I need to know before I join?

What's most important is that you want to help your program provide a positive learning experience for your child and other children. Once you are elected, you will receive training about how your Policy Council works. Some things that the group may discuss in Policy Council meetings are decisions about program policy, budgets, center activities, and hiring staff.



When and where do the meetings take place?

Policy Councils typically meet monthly at the program. When they meet varies. Some programs hold meetings during the day. Others hold them in the evenings. Meals are usually provided. Child care is offered. Some programs assist with transportation or arrange for members who live far away to attend remotely.

Programs also can provide interpretation services. Be sure to let your program know of anything you need to make it easier to attend meetings.

Reflections

Take a moment to reflect on each question:

- What questions or concerns do you have about joining the Policy Council?
- Who can you talk with to help answer your questions?
- What else can your program do to help you decide whether to join the Policy Council?

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Head Start Policy Council—Tips for Parents and Families: Serving on the Policy Council

Wondering what it is like to serve on the Policy Council? Explore this tip sheet to learn more about being a member.

Serving on the Policy Council

Congratulations! You have been elected to the Policy Council. Let's explore what it's like to be a member.

Read the scenario below.

Scenario

Yvonne is excited to attend her first Policy Council meeting. Her family service worker, Maria, has explained what to expect. She also offered to attend Yvonne's first meeting with her. She introduced Yvonne to Susan, a former parent member. Susan agreed to become her mentor and answer any questions.

At the first meeting, the Policy Council chairperson welcomes new members. Maria introduces Yvonne to the group. During the meeting, a policy document is handed out for review. It will be voted on at the next meeting.

The next morning, Yvonne calls Susan to ask about the policy document. She tells Susan she does not understand what she needs to vote on. She felt too shy to ask questions at the meeting. Susan explains the proposed policy change and why it is being discussed. Yvonne now understands the proposal and the different opinions to consider. Yvonne feels more confident about speaking up at the next meeting.

Head Start Policy Council—Tips for Parents and Families: Serving on the Policy Council

Like Yvonne, many parents have questions after they join the Policy Council. See some common questions below. You may have other questions. Every program is unique. Be sure to talk with program staff about specific questions you have.

Common Questions about Serving on the Policy Council



What happens after the Policy Council training if I am still not sure what to do?

You can connect with program leadership for more support. Go to the program director, family services manager, or parent engagement coordinator to talk about your questions and concerns. Work with a staff member to discover together how you can feel successful and confident as a member of the Policy Council.



Can I make suggestions about proposed policies?

As a Policy Council member, you can make suggestions or ask questions about any matters that are brought to the Council. It is your right and responsibility as a Council member to help with decision-making. Ask program staff for more information if you need it.

You can ask the Council to delay a vote while you learn more.

Reflections

Take a moment to reflect on each question:

- What questions or concerns do you have about serving on the Policy Council?
- Who can you talk with to help answer your questions?
- What else can your program do to help as you serve as a Policy Council member?

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ADMINISTRATION FOR
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The Mission of Southern Seven Health Department

“To promote a safe and healthy environment by providing preventive health care, family support services, and child development programs.”



Southern Seven Health Department/
Head Start/Early Head Start

VALUES STATEMENT

VISION – We believe that with purpose and direction we can accomplish our mission.

RELATIONSHIPS – We will relate to our colleagues, co-workers, and the families we serve with respect, dignity and compassion.

SERVICE – We must always strive to provide the highest quality service to our colleagues, co-workers, and the families we serve in achievement of our mission.

INTEGRITY – We are committed to communicating with honesty, openness and clarity.

PROFESSIONAL DEVELOPMENT – We encourage and support continuous growth for our co-workers and the families we serve.

FLEXIBILITY – We must always maintain the ability to adapt individually and/or as an agency to internal or external opportunities or threats.

EMPOWERMENT – We encourage an environment that allows decision making, independence and influence at the most direct level possible.

RECOGNITION – We must always strive to recognize the value of internal and external stakeholders and their contribution to the overall mission.

RISK-TAKING – We must always be willing to take calculated risks to test new thinking, ideas and practices realizing that mistakes can be used as learning experiences.



Southern Seven Health Department/ Head Start/Early Head Start HISTORY/OVERVIEW

Southern Seven Health Department is a multi-county health department serving the counties of Alexander, Hardin, Johnson, Massac, Pope, Pulaski, and Union, with a public health clinic in each county. The department provides, within its Public Health Division, all the basic core services as required by the State of Illinois, in addition to a whole range of other services, as shown by the list contained herein.

Prior to 1979, the counties were served by two multi-county health departments; Quadri-County Health Department serving the counties of Pope, Hardin, Massac, and Johnson, and Tri-County Health Department serving the counties of Union, Pulaski, and Alexander. In July of 1979, Tri-County and Quadri-County were legally consolidated into what is now known as Southern Seven Health Department.

Southern Seven Health Department currently employs 170 individuals, with 126 of those being included in the Head Start Program. The basic organizational structure includes the Board of Health and the Policy Council, Executive Director/Public Health Administrator, Financial Administrator, Early Childhood Administrator, Human Resources Administrator, and Director of Nursing, who all oversee staff and program(s) within their division.

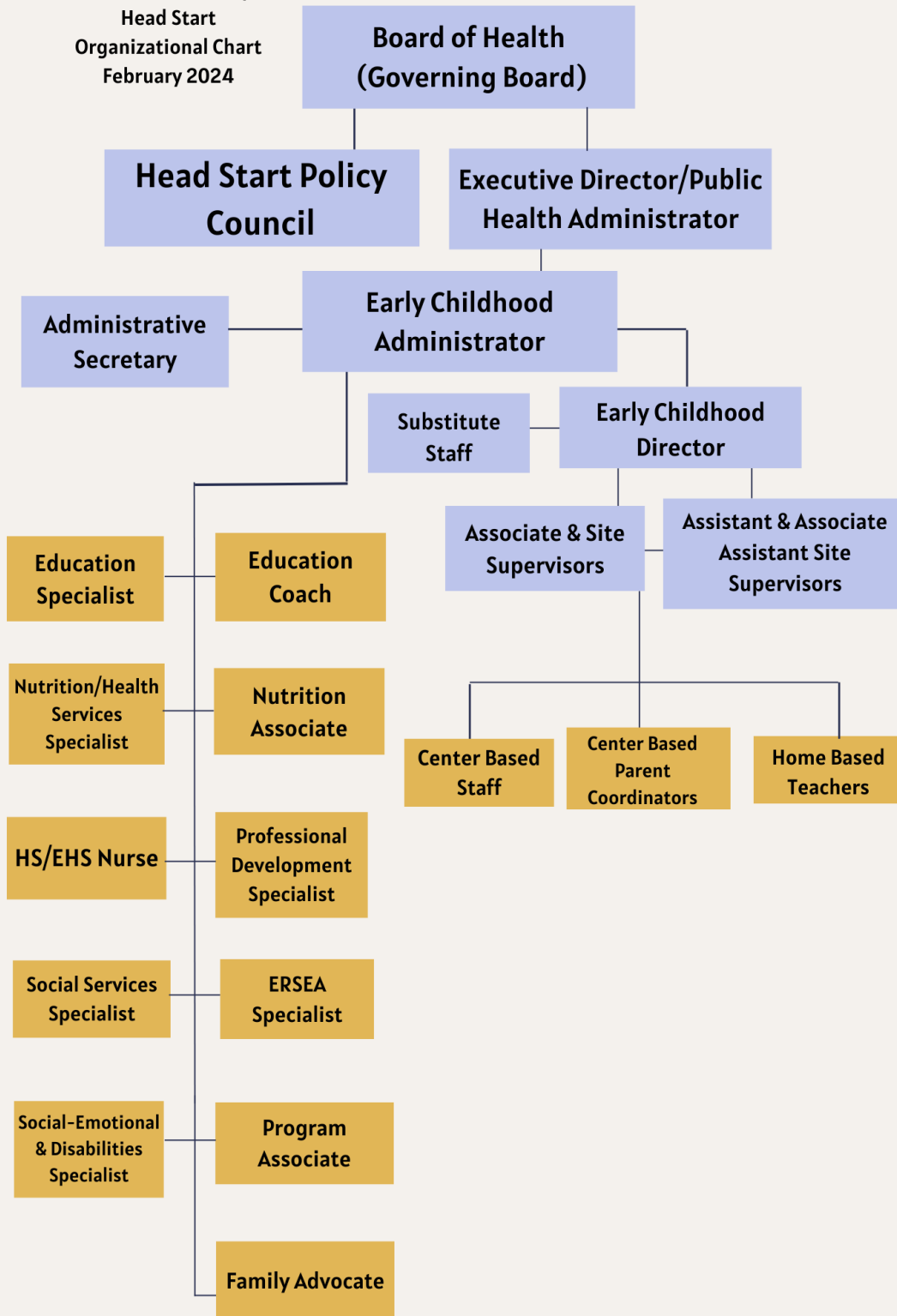
The seven-county district served by Southern Seven Health Department/Head Start covers a two thousand and three (2,003) square mile area with a population of only 63,022. To support the services we provide in the communities within the seven county area, we secure funding from a variety of sources. Some of our funding comes from local property tax revenues, while other sources include the state and federal government. In addition, fees are also charged for many of our services, however, no one is denied basic public health services due to an inability to pay. Funding from the Illinois Department of Public Health provides partial funding for basic public health services and we are required to maintain Certification Status as a Public Health Department to continue to receive these funds. We also receive a variety of state grants which allow us to not only provide basic services, but other community services not typically offered to public health departments.

In 1993, the size of Southern Seven nearly doubled when we were awarded the grant for the Head Start Program for the seven county area. The addition of this program has not only increased our size, but expanded our capabilities and ability to reach and serve the entire seven county population. Head Start is currently licensed to serve 330 children in the 3-5 age range, and 142 infants and toddlers ages 6 weeks to 3 years old.

Southern Seven Health Department has a strong sense of commitment to its Philosophy and Mission Statement. The agency began a Strategic Planning process in the Spring of 1996, in an effort to revisit the mission of the agency, predetermine the appropriate lines of business, and develop strong contingency planning to prepare for the unexpected. The needs of the communities and families we serve are ever changing, and it is imperative that the department stay abreast of the issues and needs to continually provide the best means of meeting those needs.

Southern Seven Health Department is governed by a 28 member Board of Health with four (4) members from each of the seven counties as is required by Illinois Statutes. Board Members are appointed by the commissioners of each county.

Southern Seven Health Department
Head Start
Organizational Chart
February 2024





FACTS ABOUT THE SOUTHERN SEVEN HEAD START PROGRAM

- FACT #1: Southern Seven Health Department became the grantee agency for the Head Start Program in September, 1993.
- FACT #2: In 1993, Southern Seven Head Start was funded for 590 three to five year olds. The programs operated at this time were Center-Based Options, Home Based Options, Full Day/Full Year Options, Pre-K Partnerships and Pre-K Grants.
- FACT #3: In 2000, Southern Seven received the Early Head Start Grant and was funded for 62 infants and toddlers.
- FACT #4: Children are eligible for the Pre-School Program upon their 3rd birthday and for Early Head Start Center based at age 6 weeks.
- FACT #5: Administrative offices for the Head Start Program (and for the entire agency) are located on the Rustic Campus of Shawnee Community College.
- FACT #6: The Head Start Grant Year for Southern Seven is the same as the calendar year, beginning January 1st and ending December 31st (not all Head Start Programs are on the same fiscal year).
- FACT #7: Southern Seven Head Start employs approximately 120 staff (approximately 180 in the agency).
- FACT #8: Southern Seven Head Start has a Policy Council made up of one parent and one alternate from each center, as well as from the Home Based Option. There is also one Community Representative from each of the seven counties.
- FACT #9: In 2005, Southern Seven Head Start took a voluntary enrollment reduction. This made the funding 550 for 3-5 year olds and 62 for 0-3 year olds.
- FACT #10: In 2010, Southern Seven Head Start chose not to renew state funded Pre-K Grant due to delayed state reimbursement.
- FACT #11: In 2013, the Office of Head Start cut the budget by 5.27% due to sequestration which resulted in reducing our enrollment from 550 to 520 3-5 year olds and from 70 to 60 for 0-3 year olds which would affect the 2013-2014 School Year.
- FACT #12: In 2014, the Office of Head Start restored the 5.27% money they cut in 2013 due to sequestration. All the changes made due to sequestration was restored. The enrollment went back to 550 for 3-5 year olds and 70 for 0-3 year olds.

- FACT #13: In 2015, Southern Seven Head Start was awarded a reduction from 550 to 500 3-5 year olds based on information supported in the Community Assessment (declining population).
- FACT #14: In 2016, Southern Seven Head Start was awarded a conversion from 500 to 450 3-5 year olds and 70 to 86 0-3 year olds based on information supported in the Community Assessment (declining population and an increasing need for early services).
- FACT #15: In 2019, Southern Seven Head Start was awarded conversion based on information supported in the Community Assessment (declining population and the number of Pre-K slots in the area). Southern Seven currently operates 11 sites with enrollment of 330 3-5 year olds and 142 0-3 year olds.
- FACT #16: In 2020, the COVID-19 Pandemic hit causing Southern Seven Head Start to serve children remotely and reduced the number of children served in the classrooms. During that time, Southern Seven continued to provide meals for children and families.



Southern Seven Health Department/Early Head Start/Head Start **COMPREHENSIVE SERVICES OVERVIEW**

Early Childhood Development and Health Services

- A. **Child Health and Developmental Services** – Head Start emphasizes the importance of early identification of health problems. Since many preschool children of low-income families have never seen a doctor or dentist, Head Start arranges for every child to receive, if needed, comprehensive health care, including medical, dental, mental health, and nutrition services.
- B. **Education and Early Childhood Development** – Head Start’s educational program is designed to meet each child’s individual needs. Every child receives a variety of learning experiences to foster intellectual, social, and emotional growth. Children participate in indoor and outdoor play and are introduced to the concepts of words and numbers. They are encouraged to express their feelings and to develop self-confidence and the ability to get along with others. Emphasis is placed on what the child “can do”, not what the child cannot do. These existing skills are the building blocks of other skills.
- C. **Child Health and Safety** – The health and safety of each child and staff person is of the highest priority to the Head Start Program. Head Start must implement policies and procedures which respond to medical and dental health emergencies, short-term exclusion of children with contagious illnesses, medication administration, injury prevention, and hygiene. The program also maintains readily available, well-supplied first aid kits on all premises.
- D. **Child Nutrition** – Each child is provided breakfast, a hot lunch and/or a nutritious snack. Food is served family style, and staff eat with the children. Children are encouraged to try a variety of wholesome foods. Part of the classroom experience is to educate the children about good nutrition.
- E. **Child Mental Health** – Head Start recognizes the importance of providing mental health and psychological services to children of low-income families to encourage their emotional and social development. A mental health professional must be available to every Head Start Program to provide mental health training to staff and parents and to make them aware of the need for early attention to the special problems of children.
- F. **Special Needs** – A child with a disability can often learn more readily in a group with other children than in a separate group for the disabled. Head Start has successfully carried out a 1972 Congressional Mandate requiring that at least 10% of its enrollment be available for children with disabilities.
- G. **Transportation** – Provided by school buses meeting all State and Federal Safety Standards, staffed with adequate numbers of Bus Monitors as regulated by Licensing Standards.

Family and Community Partnerships

- A. **Parent Partnerships** – Parents are the most important influence on a child’s development. An essential part of every Head Start Program is the involvement of parents in every aspect of the program. Head Start agencies engage in a collaborative partnership-building with parents to establish mutual trust and identify family goals, strengths, and necessary services and other supports. More detailed information concerning parent involvement is contained in the booklet “Getting Involved in Head Start: A Guide for Parents of Head Start Children”.
- B. **Community Partnerships** – The Head Start Program takes an active role in community planning to encourage strong communication, cooperation, and the sharing of information among agencies and their community partners. The program also works to improve the delivery of community services to children and families in accordance with the agency’s confidentiality policies. This is accomplished through a variety of ways, but always to include the use of Advisory Committee and Transition Activities.

Program Design and Management

- A. **Program Governance** – Head Start Programs establish and maintain a formal structure of shared governance through which parents can participate in policy making or in other decisions about the program. The structure consists of a Policy Council and Parent Committees.
- B. **Management Systems and Procedures** – Each Head Start Program develops and implements a systematic, on-going process of program planning that includes consultation with the program’s governing body, policy groups and program staff, and with other community organizations that serve Head Start or other low-income families with small children. This includes the development and regular update of a community assessment, an extensive, overall written program plan outlining methods of service delivery and compliance with regulations, detailed and effective systems of communication among all entities, record-keeping and reporting systems, and an annual self-assessment of every performance standard.
- C. **Human Resources Management** – Head Start Programs must develop a structure and overall plan of management that supports the accomplishment of program objectives. A strong human resources staff person, division, or department must be obvious that supports requirements concerning organizational structure, staff qualifications, consultant qualifications, classroom staffing and ratio patterns, standards of conduct, staff performance appraisals, staff and volunteer health, training and development.
- D. **Facilities, Materials, and Equipment** – Head Start Facilities must provide physical environments which are conducive to learning and reflective of the different stages of development of each child. This includes not only the structure of the building itself, but equipment, toys, furniture, playgrounds, and transportation.



Southern Seven Health Department/ Head Start/Early Head Start DEFINITIONS

Assessment

The on-going procedures used by appropriate qualified personnel throughout the period of a child's eligibility to identify:

- 1) The child's unique strengths and needs and the services appropriate to meet those needs; and
- 2) The resources, priorities and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.

Children with Disabilities

Children with disabilities, for children ages 3 to 5, are those with mental retardation, hearing impairments including deafness, speech or language impairments, visual impairment including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, specific learning disabilities, deaf-blindness, or multiple disabilities, and who, by reason thereof, need special education and related services.

The term "children with disabilities" for children aged 3 to 5, inclusive may, at a State's discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: Physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services. Infants and toddlers with disabilities are those from birth to three years, as identified under the Part H Program (Individual with Disabilities Education Act) in their state.

Collaboration and Collaborative Relationships

Collaboration and Collaborative Relationships means:

- 1) With other agencies, means planning and working with them in order to improve, share and augment services, staff, information and funds; and
- 2) With parents, means working partnership with them.

Contagious

Capable of being transmitted from one person to another.

Curriculum

A written plan that includes:

- 1) The goals for children's development and learning;
- 2) The experiences through which they will achieve these goals;
- 3) What staff and parents do to help children achieve these goals; and
- 4) The materials needed to support the implementation of the curriculum. The curriculum is consistent with the Head Start Program Performance Standards and is based on sound child development principles about how children grow and learn.

Deficiency

- 1) An area or areas of performance in which an Early Head Start or Head Start grantee agency is not in compliance with State or Federal requirements, including but not limited to, the Head Start Act or one or more of the regulations 1301, 1304, 1305, 1306, and 1308 of this title and which involves:
 - a. A threat to the health, safety, or civil rights of children or staff;
 - b. A denial to parents of the exercise of their full roles and responsibilities related to program governance;
 - c. A failure to perform substantially the requirements related to Early Childhood Development and Health Services, Family and Community Partnerships, or Program Design and Management; or
 - d. The misuse of Head Start grant funds.
- 2) The loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or
- 3) Failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified.

Developmentally Appropriate

Any behavior or experience that is appropriate for the age span of the children and is implemented with attention to the different needs, interests, and developmental levels and cultural backgrounds of individual children.

Early Head Start

A program that provides low-income pregnant women and families with children from birth to age 3 with family-centered services that facilitate child development, support parental roles, and promote self-sufficiency.

Family

Family means for the purposes of the regulations in this part all persons:

- 1) Living in the same household who are:
 - a. Supported by the income of the parent(s) or guardian(s) of the child enrolling or participating in the program; or
 - b. Related to the child by blood, marriage, or adoption; or
- 2) Related to the child enrolling or participating in the program as parents or siblings, by blood, marriage, or adoption.

Guardian

A person legally responsible for a child.

Health

Medical, dental, and mental well-being.

Home Visitor

Home Visitor means the staff member in the home-based program option assigned to work with parents to provide comprehensive services to children and their families through home visits and group socialization activities.

Individualized Family Service Plan (IFSP)

Individualized Family Service Plan (IFSP) means a written plan for providing early intervention services to a child eligible under Part H of the Individuals with Disabilities Education Act (IDEA). (See 34 CFR 303.340-303.346 for regulations concerning IFSPs)

Minimum Requirements

Minimum Requirements means that each Head Start and Early Head Start grantee must demonstrate a level of compliance with Federal and State requirements such that no deficiency, as defined in this part, exists in its program.

Policy Council

Policy Council means the formal group of parents and community representatives required to be established by the agency to assist in decisions about the planning and operation of the program.

Program Attendance

Program Attendance means the actual presence and participation in the program of a child enrolled in a Head Start or Early Head Start Program.

Referral

Referral means directing a Head Start or Early Head Start family member(s) to an appropriate source or resource for help, treatment or information.

Staff

Staff means paid adults who have responsibilities related to children and their families who are enrolled in Head Start or Early Head Start Programs.

Teacher

Teacher means an adult who has direct responsibility for the care and development of children from birth to 5 years of age in a center-based setting.

Volunteer

Volunteer means an unpaid person who is trained to assist in implementing on-going program activities on a regular basis under the supervision of a staff person in areas such as health, education, transportation, nutrition, and management. In addition to the definitions in this section, the definitions as set forth in 45 CFR 1301.2, 1302.2, 1305.2, 1306.3, and 1308.3 also apply, as used in this part.



**Southern Seven Health Department/
Head Start/Early Head Start**

TERMS

This list includes terms which are specific to Head Start and terms which are important to Head Start's partnership with other agencies in providing comprehensive services.

ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF) – An agency in the Department of Health and Human Services (DHHS) responsible for family support programs such as: Head Start, JOBS, child support, runaway youth, homeless, Aid for Dependent Children (AFDC), etc.

ADMINISTRATION ON CHILDREN, YOUTH, AND FAMILIES (ACYF) – An agency in ACF at the national level responsible for Head Start, Child Welfare and other programs headed by the Commissioner.

AMERICANS WITH DISABILITIES ACT (ADA) – The civil rights legislation for the disabled and must be met by all Head Start Grantees.

ALIGNED MONITORING SYSTEM (AMS) - The Office of Head Start (OHS) uses the Head Start Monitoring System to measure the performance and accountability of Head Start programs across the country. OHS assesses grantee compliance with the Head Start Program Performance Standards, the Head Start Act, and other regulations. The Head Start Monitoring System gives OHS a multi-year perspective on grantee operations with a focus on performance, progress, and compliance. It also provides grantees with opportunities for continuous improvement. This system conducts off- and on-site reviews, and disseminates its findings through formal monitoring reports.

AVERAGE DAILY ATTENDANCE (ADA) – Regulations state that Head Start Programs should maintain attendance of 85% of enrollment at all times.

AUDIT – The official review of the financial and fiscal records of any agency, organization, or company.

BOARD OF DIRECTORS – The group of people who have the legal responsibility of setting the purpose and policies of an organization.

COMMUNITY ASSESSMENT – A document describing needs in a community, based on demographic studies, economic conditions, and political situations; educational, health, welfare, and housing resources; geographic locations, racial/ethnic characteristics, and other pertinent information to determine appropriate Head Start service model to deliver comprehensive services for children of low-income families. Formerly referred to as the Community Needs Assessment.

COMMUNITY ACTION AGENCY OR CAP COMMUNITY ACTION PROGRAM (CAA & CAP) – A multi-purpose, umbrella agency receiving funds from various sources to address the needs of the poor; most Head Start Agencies across the country are operated by CAA or a CAP; such an agency can be either public or private non-profit.

CHILD AND ADULT CARE FOOD PROGRAM (CACFP) – Administered by the U.S. Department of Agriculture (USDA), provides reimbursement for food costs within a Head Start Program.

CHILD CARE RESOURCE AND REFERRAL (CCR&R) – Training and child care assistance agency. Provides training to providers and helps establish quality child care for the area.

CHILD DEVELOPMENT ASSOCIATE (CDA) – The Child Development Associate (CDA) Credential™ is the most widely recognized credential in early childhood education (ECE) and is a key stepping stone on the path of career advancement in ECE.

U.S. CENTERS FOR DISEASE CONTROL & PREVENTION (CDC) – The CDC increases the health security of our nation. As the nation's health protection agency, CDC saves lives and protects people from health threats. To accomplish their mission, CDC conducts critical science and provides health information that protects our nation against expensive and dangerous health threats, and responds when these arise.

CODE OF FEDERAL REGULATIONS (CFR) – All federal regulations, including Head Start 45 CFR Parts 1300-1310, are organized into this publication.

DELEGATE AGENCY – Another agency/organization to which a Grantee can designate and channel funds to operate a Head Start Program or a portion of a Head Start Program.

DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS) – An agency within the Federal Government, of which ACF is a part.

DEVELOPMENTALLY APPROPRIATE PRACTICE (DAP) - Developmentally appropriate practice (DAP) is a framework designed to promote young children's optimal learning and development.

DUAL LANGUAGE LEARNERS (DLL) - The term dual language learner (DLL) refers to any young child who is learning two or more languages. Many experts believe that growing up bilingual is beneficial for both children who are DLLs and for all children in general.

EARLY HEAD START (EHS) – A comprehensive Head Start Program for pregnant women and children ages birth to 3.

EARLY INTERVENTION (EI) – Services for children ages 0-3 with developmental delays and disabilities. Funded to the State of Illinois by the Federal Government under Part H of the Individual with Disabilities Education Act (IDEA).

EARLY AND PERIODIC SCREEING, DIAGNOSIS, AND TREATMENT (EPSDT) – A comprehensive health program for low-income children funded by Medicaid and administered by the State.

FAMILY ASSESSMENT (FA) – A process used in the Social Service Component to determine family needs. Formerly referred to as Family Needs Assessment (FNA).

FEDERAL REGISTER – The official daily publication of proposed and final Federal Regulations, program announcements, and other policies issued by the OMB, DHHS, and ACF.

FAMILY PARTNERSHIP AGREEMENT (FPA) – This process takes place as a one-on-one discussion with parents/guardians to assess family situations and/or set goals for growth. This is one system that helps to individualize the Head Start Program for families.

GOVERNING PRINCIPLES – The common rules, agreed upon by an organization, under which it operates. Formerly referred to as By-Laws.

GRANTEE – The local non-profit corporation or other legal entity to which a Head Start Grant is awarded. This agency can be either public or private. Examples of grantees or CAP agencies, Public School Systems, local service type agencies, single purpose child development agencies, etc.

HEALTH AND HUMAN SERVICES (HHS) – The federal cabinet level agency responsible for all federal programs dealing with health and general welfare.

HOME-BASED – A program option that may be useful for serving children and families in their home. The option is parent focused, and the parent is trained to provide for the comprehensive needs of the family.

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA) – This is the federal special education legislation which States must implement and which requires special education for all children three and older; States may also service children younger than three at their discretion. This is the successor law to PL 99-457 which is mentioned in much of the literature.

INDIVIDUALIZED EDUCATION PROGRAM (IEP) – An Individualized Education Program is required under the disability regulations for each child who is evaluated as having a disability. The official IEP required by IDEA is developed in conjunctions with the Local Education Agency (LEA).

INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) – An Individualized Family Service Plan is required for children ages 0-3 who receive Early Intervention Services. The IFSP identifies the type and interval of Early Intervention Services a child receives.

IN-KIND – Contributions of goods, volunteer time, or donated space that satisfies the 20% matching requirement of Head Start Funding.

LOCAL EDUCATION AUTHORITY (LEA) – A general term used in IDEA for School Districts or Regional Special Education Districts mandated to provide special education.

NATIONAL ASSOCIATE FOR THE EDUCATION OF YOUNG CHILDREN (NAEYC) – A membership organization that establishes standards and guidance for the early childhood field.

OFFICE OF MANAGEMENT AND BUDGET (OMB) – This is the federal agency which oversees the budgeting process of the executive branch of the federal government. It must also approve information gathering forms before they can be used.

ON-SITE REVIEW – The review process by ACF Regional Office which utilizes peers, consultants, and Head Start Program Specialists to assess the compliance of grantees with Head Start laws and regulations.

PROGRAM ACCOUNT 20 (PA 20) – A category within the Head Start Grant budget dedicated to meet training and technical assistance needs. There are very specific guidelines as to the use of this program account.

PROGRAM ACCOUNT 22 (PA 22) – The largest and most flexible category within the Head Start Grant budget which is used for program operation: Part Day, Full Year, Head Start.

PERFORMANCE STANDARDS - A legally defined set of minimum performance criteria for each component in Head Start. The Performance Standards are accompanied by guidance or suggestions on how to implement the standards.

PROGRAM INFORMATION REPORT (PIR) – An annual report completed at the end of each school year by every Head Start Program in the nation. The data is used by ACYF to report to Congress and for program monitoring. Forms for this report are sent to every grantee to fill out and return. It should be filed electronically. Collated results are distributed to all programs, with data reflecting state, regional and national trends.

POLICY COUNCIL – The committee set up at the grantee level. At least 50% of the members must be parents of children currently enrolled in total Head Start Program (grantee and delegate agencies). There must be representation from all delegate agencies. If the grantee has no delegates, then the representation is from all centers and other fractions of that program. It must also include representatives from the community.

QUARTERLY REPORT – A short programmatic report sent by each Head Start Grantee to their particular program specialist in the Regional Office. It contains information on new issues, accomplishments, and statistics and is set every three months, based on the grant's budget period.

REGIONAL OFFICE (RO) - The Office of Head Start (OHS) has 12 Regional Offices that support the administration of grants, oversight, and training and technical assistance (T/TA).

REQUEST FOR PROPOSALS (RFP) – An official/formal request by some agency/organization for proposals for a wide range of categories, including but not limited to funding, special projects, training events, etc.

TEMPORARY ASSISTANCE FOR NEEDS FAMILIES (TANF) – Program designed to temporarily assist needy families to become self-supporting, to strengthen family life, and to reduce the instances of economic need in Illinois Families (replaces Aid to Families with Dependent Children Program (AFDC)).

TRAINING AND TECHNICAL ASSISTANCE (T/TA) – The general category of support for Head Start Programs which is heavily supported both philosophically and financially. Financial support is available through PA 20 funds.

TRANSITIONING – The transfer of Head Start Children into the public school system which includes sharing of information between agencies and programs. It also describes a process of transferring children from the Early Head Start Program to the Traditional Head Start Program.



**Southern Seven Health Department/
Head Start/Early Head Start
HEAD START AND CHILD CARE
SIMILARITIES AND DIFFERENCES**

Similarities:

- Like Head Start, most child care providers have a preschool curriculum.
- Both systems offer a group opportunity for learning.
- Staff in both systems view themselves as professionals.

Differences:

- Head Start is a federally funded comprehensive intervention program for families with children from birth to 5 years old; 90% of these families are below the federal poverty line. Child Care consists of other regulated and unregulated care given to children under age 12 by someone other than the parents for periods of less than 24 hours.
- Head Start is governed by federal performance standards for these areas: Early Childhood/Development and Health Services; Family and Community Partnerships; and Program Design and Management. The program is monitored and must have parent involvement. Child Care must meet only state licensing standards; there are few health or safety requirements and few or no standards for staff credentials, salary, and training.
- Head Start services are unique; their design is based on a community needs assessment. Child Care is based more upon individual family needs.
- The two basic models of Head Start are home-based and center-based. Child Care also may be handled by families, friends, or other informal mechanisms.
- Head Start programs vary from one community to another. Many programs are operating part day, four days a week, 32 weeks a year. Child Care is five days a week (Monday through Friday), up to 12 hours a day, year-round.

Source: National Head Start Association, Linking the Pieces Together Newsletter, January/February, 1997.



Southern Seven Head Start SCHOOL READINESS GOALS



SCHOOL READINESS GOAL #1

Goal: Children will develop the ability to self-regulate.

- **Objective:** Three to five year old child manages feelings, recognizes emotions, and follows rules and routines with increasing independence.

SCHOOL READINESS GOAL #2

Goal: Children will show interest in and curiosity about the world around them.

- **Objective:** Three to five year old child will demonstrate curiosity and motivation in exploring their environment.

SCHOOL READINESS GOAL #3

Goal: Children will demonstrate the ability to build positive relationships with children and adults.

- **Objective:** Three to five year old child will develop positive relationships with other children and adults.

SCHOOL READINESS GOAL #4

Goal: Children will develop the understanding about themselves, their family, community, and their environment.

- **Objective:** Three to five year old child has a sense of self and belonging to a family, community, and other groups.

SCHOOL READINESS GOAL #5

Goal: Children will demonstrate emergent Language and Communication Skills.

- **Objective:** Three to five children including dual language learners will understand and begin to use a growing vocabulary through conversations and storytelling.
- **Objective:** Three to five child will demonstrate an interest in stories and books.

SCHOOL READINESS GOAL #6

Goal: Child will demonstrate Emergent Literacy Skills.

- **Objective:** Three to five child writes for a variety of purposes.
- **Objective:** Three to five child identifies letters and sounds of the alphabet.

SCHOOL READINESS GOAL #7

Goal: Child will use exploration, reasoning and planning ahead to solve problems.

- **Objective:** Three to five child will be able to name, classify, and sort objects by color, shape, size, and be able to create and recreate patterns.
- **Objective:** Three to five child will be able to rote count to at least 30, count objects using 1:1 correspondences, and recognize numerals.
- **Objective:** Three to five child will demonstrate their ability to gather, organize, question and communicate information about the natural and physical world.

SCHOOL READINESS GOAL #8

Goal: Children will demonstrate movements to perform tasks using large and small muscle groups.

- **Objective:** Three to five child will demonstrate control, strength, and coordination of large muscles.
- **Objective:** Three to five child will demonstrate complex fine motor coordination when using tools to complete tasks.

SCHOOL READINESS GOAL #9

Goal: Children will demonstrate the ability to show increasing responsibility to personal hygiene, safety, and self-care skills.

- **Objective:** Three to five child will demonstrate personal safety, health, and self-care practices independently.



Southern Seven Early Head Start SCHOOL READINESS GOALS



SCHOOL READINESS GOAL #1

Goal: Children will develop the ability to self-regulate.

- **Objective:** Birth to three year old child manages feelings, emotions, and behavior with support of a familiar adult.

SCHOOL READINESS GOAL #2

Goal: Children will show interest in and curiosity about the world around them.

- **Objective:** Birth to three child will demonstrate interest in and curiosity about objects, materials or events.

SCHOOL READINESS GOAL #3

Goal: Children will demonstrate the ability to build positive relationships with children and adults.

- **Objective:** Birth to three children will have a warm trusting relationship with adults.
- **Objective:** Birth to three children begins to form relationships with other children with the help of an adult.

SCHOOL READINESS GOAL #4

Goal: Children will develop the understanding about themselves, their family, community, and their environment.

- **Objective:** Birth to three child shows awareness about self and how to connect to others.

SCHOOL READINESS GOAL #5

Goal: Children will demonstrate emergent Language and Communication Skills.

- **Objective:** Birth to three child including dual language learners will understand and begin to use a growing vocabulary.
- **Objective:** Birth to three child will hear and use the sounds of rhythms of language.
- **Objective:** Birth to three child will demonstrate an interest in stories and books with help from an adult.

SCHOOL READINESS GOAL #6

Goal: Child will demonstrate Emergent Literacy Skills.

- **Objective:** Birth to three child writes for a variety of purposes.

SCHOOL READINESS GOAL #7

Goal: Child will use exploration, reasoning and planning ahead to solve problems.

- **Objective:** Birth to three child will use symbols and images to connect new and known experiences to increase their knowledge of the world around them.
- **Objective:** Birth to three child will engage in activities that will promote logical thinking and emergent math skills.

SCHOOL READINESS GOAL #8

Goal: Children will demonstrate movements to perform tasks using large and small muscle groups.

- **Objective:** Birth to three child will demonstrate emerging fine motor skills.
- **Objective:** Birth to three child will demonstrate emerging gross motor skills.

SCHOOL READINESS GOAL #9

Goal: Children will demonstrate the ability to show increasing responsibility to personal hygiene, safety, and self-care skills.

- **Objective:** Birth to Three child will demonstrate safe and healthy practices with adult guidance.



Southern Seven Health Department/Early Head Start/Head Start VOLUNTEERING AT HEAD START/EARLY HEAD START

WHAT CAN I DO?

Below are areas of volunteering and some of the things involved in that area that you could do:

Classroom Helper

- Read to children in Library Center
- Replenish classroom supplies
- General cleaning of the classroom
- Help prepare a snack for children
- Help with a nutrition activity
- Cut out art materials
- Assist children with hand washing
- Assist children with tooth brushing
- Assist in the art center
- Help with special activities, i.e. paint pumpkins
- Help monitor children when outside on the playground

Office Helper

- Run errands to and from classroom
- Staple and/or copy materials
- Assemble materials
- Post items to bulletin boards
- Restock office supplies
- Assist visitors

Kitchen Helper

- Take carts of food to classroom
- Get food items from storeroom
- Clean surfaces and dishes
- Organize and put supplies away
- Food preparation (help make sandwiches, salads, etc., pour food into serving bowls)

Building & Grounds Helper

- Sweeping sidewalks, floors, etc.
- Wiping surfaces
- Cleaning outdoor play equipment
- Washing windows
- Painting
- General maintenance
- Putting materials & supplies away

Special Activities Helper

- Hearing & Vision
- Picture day
- Field trips
- Share a hobby or story or talent
- Home time activities
- Supervise on the bus
- Recruitment (hanging up flyers)
- Serve on a committee

WHEN CAN I VOLUNTEER?

You can set a time for volunteering that fits your schedule.

WILL MY VOLUNTEERING HELP?

YES! Not only will it provide a helping hand to the staff and children, but it will provide much needed In-Kind. Head Start is a federally funded program. For every dollar the federal government gives us, they expect 25 cents worth of In-Kind donations. **Every hour you volunteer provides \$14-\$16 of In-Kind.** Failure to meet our In-Kind could result in losing funding or the privilege of operating the Head Start Program. Donation of materials and supplies are also considered In-Kind. **Every time you return a Home-Time Activity it provides \$14-\$16/hour of In-Kind.**

I WANT TO VOLUNTEER, WHAT NEXT?

Please advise the Site Supervisor or Parent Coordinator of your desire to volunteer and the areas you are interested in volunteering. They will ask you to sign the Volunteer Agreement and discuss a time for you to get started.

THANK YOU FOR VOLUNTEERING!

Success in life has nothing to do with what you gain in life or accomplish for yourself. It's what you do for others.

Danny Thomas

Love cannot remain by itself—it has no meaning. Love has to be put into action and that action is service.

Mother Teresa

Quick Guide: Submitting In-Kind Activities at Your Fingertips



We are using the Learning Genie App to collect In-Kind activity time digitally. This tool is easy to use and it automatically adds up the time so that you don't have to. Thank you for your participation!

1 Open the Learning Genie **Parent App** and login.



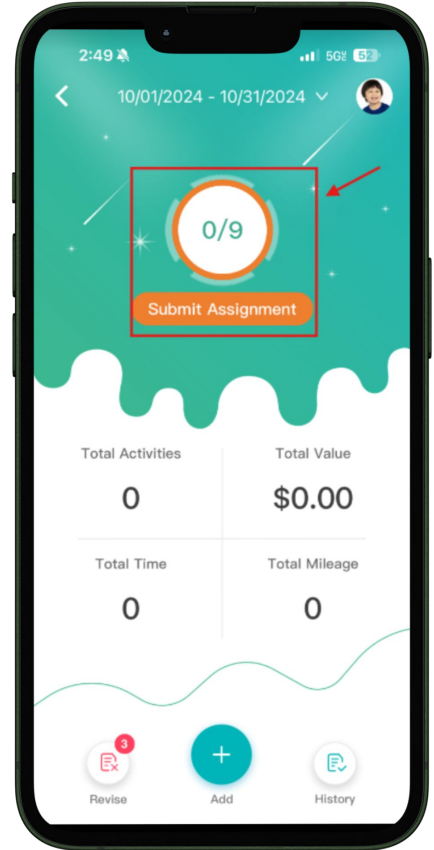
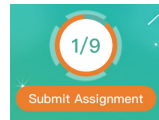
2 Tap the **quick access button** at the bottom right corner.



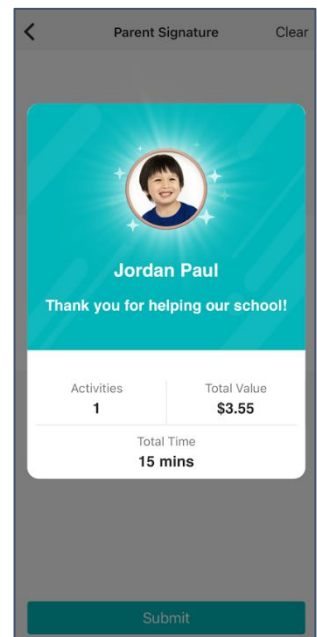
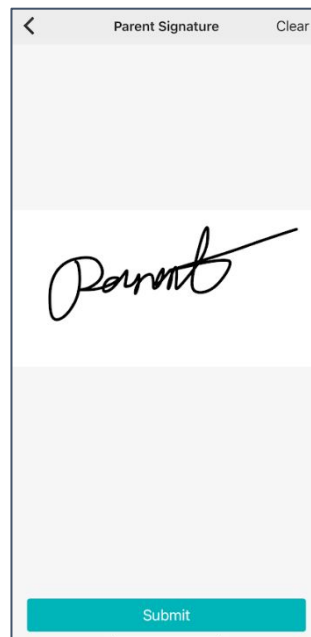
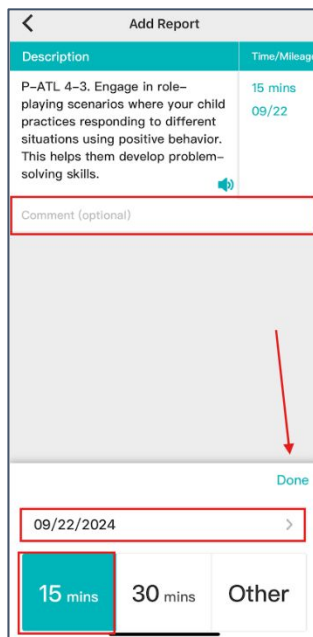
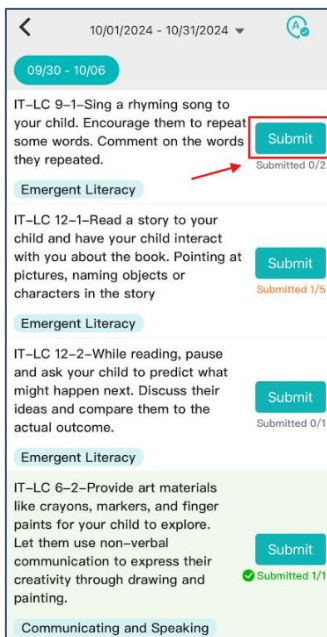
3 Tap the **heart** "In-Kind" button.



4 Tap the **"submit assignment"** button.



5 Select an activity, enter the amount of time, then sign and submit. Done!



Switch to preferred language with auto-translation.

Have the app read the activity to you.

Review feedback and revise submission.

History of submissions.

Southern Seven Health Department/ Head Start/Early Head Start ADMINISTRATIVE STAFF

Miranda Adams	Environmental Health Director
Melissa Anglin-Brooker	Health & Nutrition Specialist
Patena Atherton	Billing Specialist
Nickalaus Black	Environmental Health Associate Sanitarian
Angela Brandt	Education Coaching Coordinator
Victoria Calvert	Purchasing Specialist
Bobbi Cavins	Emergency Preparedness Coordinator
Angie Cross	Accounting Associate
Sharity Gaddis	ERSEA (Eligibility; Recruitment; Selection; Enrollment; Attendance) Specialist
Sarah Goddard	Fiscal Officer
Cheryl Gage	Education Consultant
Donovan Johnson	Maintenance/Mechanic Coordinator
Tina Jordan	Health & Nutrition Associate
Ross Kaeding	Environmental Health Associate Sanitarian
Stephanie Kennedy	Education Specialist
Amy Lang	Payroll Coordinator
Henry Lang	Maintenance Coordinator II
Andrea Mayer	Program Associate
Brad Middleton	Environmental Health Inspector
Dona Middleton	Early Childhood Director
Robyn Mize	Administrative Assistant
Karen Moss	Professional Development Specialist
Joseph Oliver	Information Technology Director
Jennifer Parks	Early Childhood Administrator
Nita Plott	Home-Based Teacher/Parent Coordinator
Rebecca Reed	Human Resources Director
Shawwna Rhine	Community Outreach Coordinator
Natalie Sawyer	Health Education Director
Cynthia Tremblay	Social-Emotional & Disabilities Specialist
Julia Veach	Social Services Specialist
Teresa Wilburn	Director of Nursing
Lindsey Williams	Assistant Fiscal Officer
Tammy Williams	Program Billing Coordinator
VACANT	Executive Assistant
VACANT	Executive Director/Public Health Administrator
VACANT	Maintenance Coordinator I



**Southern Seven Health Department/
Head Start/Early Head Start
LOCATIONS**

ALEXANDER COUNTY

**Egyptian Early Learning Center
(Located in Egyptian Elem. School)**
20023 Diswood Road
Tamms, IL 62988
Phone: 776-5756

Alexander County Clinic
3014 Elm Street
Cairo, IL 62914
Phone: 734-4167
Days Open: Monday; Tuesday; Wednesday

HARDIN COUNTY

**Hardin County Early Learning Center
(Located in Hardin Co. Elem. School)**
4 School Road, P.O. Box 313
Elizabethtown, IL 62931
Phone: 287-9098

Hardin County Clinic
IL. Rt. 146, Building 2
P.O. Box 177
Elizabethtown, IL 62931
Phone: 285-6215
Days Open: Wednesday

JOHNSON COUNTY

Vienna Early Learning Center
513 East Vine Street
Vienna, IL 62995
Phone: 658-9229

Johnson County Clinic
513½ East Vine Street
Vienna, IL 62995
Phone: 658-5011
Days Open: Monday; Tuesday; Thursday;
Friday

MASSAC COUNTY

Building Blocks Day Care
1106 E. 7th Street
Metropolis, IL 62960
Phone: 524-7400

Metropolis Head Start
416 East Ninth Street
Metropolis, IL 62960
Phone: 524-5222

Massac County Clinic
1230 Commercial Park Road
PO Box 883
Metropolis, IL 62960
Phone: 524-2212
Days Open: Monday - Friday

POPE COUNTY

**Pope County Early Head Start
(Located on the grounds of Pope Co. Elem.
School)**
125 State Highway 146 West
Golconda, IL 62938
Phone: 683-1105

Pope County Clinic
118 N. Market Street
Golconda, IL 62938
Phone: 683-8022
Days Open: Tuesday & Wednesday

PULASKI COUNTY

Administration Office
37 Rustic Campus Drive
Ullin, IL 62992
Phone: 634-2297; 634-9340

Mounds Head Start

327 North Reader
P.O. Box 476
Mounds, IL 62964
Phone: 745-6703

Pulaski County Clinic

37 Rustic Campus Drive
Ullin, IL 62992
Phone: 634-9405

Days Open: Wednesday; Thursday, Friday

UNION COUNTY**Cobden/Migrant & Seasonal Head Start**

8125 Old Hwy 51 N.
Cobden, IL 62920
Phone: 893-1000

Dongola Early Learning Center

(Located in Dongola Elem. School)

1000 High Street
Dongola, IL 62926
Phone: 827-5009

Jonesboro Early Learning Center

(Located in Jonesboro Elem. School)

309 Cook Avenue
Jonesboro, IL 62952
Phone: 614-6499

Union County Clinic

260 Lick Creek Road
Anna, IL 62906
Phone: 833-8561

Days Open: Monday - Friday