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Preface

What Head Start is and does, why it is there and for whom it is intended is all part of the bigger picture of parenting. Children in Head Start learn life skills, they learn how to be comfortable among other children, they learn basic skills that will be with them all their lives.

As a newcomer to children's programs, knowing what Head Start is about can be quite a challenge. Not much can be found online about Head Start if it is not Aboriginal Head Start and if it is not in the U.S. Most of what can be found is geared towards the "why" but not the "how".

This "manual" or "guideline" is for anyone starting work at Head Start. Although it is geared towards the Coalition for Far Northwest Alberta Brighter Futures Society, it could be used at any Head Start program, with some adjustments.

In my search for information I am much indebted to the Board, the staff, the finance person who all helped me get comfortable in this position by guiding me gently. I am also much indebted to the Program Consultants of the Public Health Agency of Canada and the Contract Specialists of the Alberta Child and Family Services agency who were always ready to answer questions. Last but not least, networking within the CAPC-CPNP Coalition in Alberta has been a huge asset in completing this manual. This curriculum is not from my own hands only, but has evolved through a blend of input from staff, the Board, our CAPC counterparts, PHAC Consultants and CFS Contract Specialists. Thank you all!!

For questions, comments, concerns, please contact me.

Irene van der Kloet
Executive Director

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Head Start

The Coalition for Far Northwest Alberta Brighter Futures Society (“the Society”) Admin office is located in Fort Vermilion, AB, Canada. The Society has three Head Start programs located in Fort Vermilion, La Crete and Paddle Prairie, funded by the Public Health Agency Canada (PHAC). The Fort Vermilion and La Crete Head Start programs are located in Mackenzie County, the Paddle Prairie Head Start program is located on the Paddle Prairie Métis Settlement.

In this document the history of Head Start will be discussed along with its purpose and how Head Start is organised. There will be a broad outline of activities children in Head Start participate in and what the benefits of Head Start are. The Head Start program is delivered by qualified, certified staff who have the choice of a wide range of activities and approaches, so Head Start programs may differ in their individual approach but the basics are the same. The curriculum will also outline the roles of the Executive Director, the Program Coordinators, the Program Assistants, the Family Support Workers, the Casual Workers, volunteers and the Board.

The purpose of this document is a guideline for new staff members, a resource document for existing staff members as well as a resource for Board members.

If you have any questions after reading this document, please contact Admin at 780-927-3327 or through email at admin@northwestalbertabrighterfutures.com.

Head Start History

The history of Head Start goes back to 1965 to the U.S.A. It was meant as a catch-up summer-school program for low-income children to teach them in a few weeks what they needed to know when starting elementary school (Wikipedia, July 13, 2015). Over the years it evolved into a program for 3-5 year old children living in poverty. The mission of the program started out as “to promote school preparation by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services”, which was later changed into “Helping people, changing lives, building communities”. An essential change of approach was made here which still applies today: Head Start is primarily a program to help children and families and secondary is the school preparation. School preparation can only be effective once help has been rendered in developmental challenges.

In Canada the program has gained widespread recognition as an early intervention program for Aboriginal children, known as AHSUNC (Aboriginal Head Start in Urban and Northern Communities) (<http://www.phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/ahsunc-papacun/index-eng.php>, July 13, 2015), funded by the Public Health Agency of Canada. This program is based on six components: culture and language, education, health promotion, nutrition, parent and family involvement and social support. The purpose of the program is to address social and emotional development of children, the development of a positive sense of “self”, a desire for learning and opportunities to develop fully as successful young people.

PHAC also started another initiative known as Community Action Program for Children (CAPC) in which the Head Start component is incorporated as one of the initiatives to better the lives of children and

families living in poverty or having challenges otherwise. CAPC was established in 1993 and is jointly managed with the provinces and territories¹.

The Head Start programs delivered by the Society are delivered through CAPC funding.

CAPC programs

In 1990, Canada made a commitment in the United Nations World Summit for Children to invest in the well-being of vulnerable children (http://www.phac-aspc.gc.ca/about_a propos/evaluation/reports-rapports/2009-2010/capc-pacc/overview-survol-eng.php, July 13, 2015). The Government of Canada initiated Brighter Futures in 1992: A Child Development Initiative (CDI) based on evidence that poverty, low education and unemployment have a negative impact on healthy child development. The Community Action Plan for Children (CAPC) is based on community development principles including prevention, promotion, protection and partnerships. CAPC was the larger of the CDI initiatives and was first implemented in 1994. CAPC provides funding to community-based groups and coalitions to develop and deliver comprehensive, culturally-appropriate prevention and early intervention initiatives to promote the health and social development of young children (0-6 years) and their families in conditions of risk. CAPC focuses on the principle that communities are able to draw together resources to address the needs that families at risk may have. CAPC can also link the families to the health system and additional supports in the community.

CAPC programs operate under the following six principles, which are uniform in all CAPC programs:

1. Children first;
2. Strengthening and supporting families;
3. Equity and accessibility;
4. Flexibility;
5. Partnerships and collaboration;
6. Community-based delivery.

These principles are guiding CAPC projects towards the following objectives:

1. Improve the health and social development of children and their families;
2. Increase partnerships and collaboration;
3. Increase the number of effective community resources and programs;
4. Increase recognition and support for communities-at-risk, their needs, interest and rights;
5. Increase empowerment and knowledge of families and communities;
6. Increase accessibility to culturally-appropriate and linguistically-sensitive programming.

The target population for CAPC programs is children who are at the greatest risk of not reaching their full potential. Risk factors include low income families, children living with teenage parents, children experimenting developmental delays, social, emotional, or behavioural problems, abused children and neglected children. Special consideration is given to Métis, Inuit and off-reserve First Nations children,

¹ Another PHAC initiative is CPNP: Canada Prenatal Nutrition Program, which focuses on healthy pregnancies and infant health. Over the years the CAPC programs have connected with the CPNP programs resulting in a CAPC-CPNP Coalition in several provinces and territories.

children of recent immigrants and refugees, children in lone and single parent families and children in remote and isolated communities.

CAPC Program Theory

CAPC programs are based on the science of child development, early intervention and public health. Investing in early intervention, addressing the needs of the entire family at risk, can result in a greater family stability. The second important pillar is the underlying philosophy that local agencies can best identify effective interventions, being well-placed in the communities and knowing the conditions of children and their families.

Brain development research has made it clear that a positive, stimulating environment is paramount in the development of young children. Simple brain circuits form the basis of more complicated circuits. If the simple circuits cannot be formed properly, constructing new circuits in the brain is challenging. CAPC bases its program theory on four components:

Biological Forces

A child's early years are essential for learning reading, arithmetic and adopting healthy social skills and cultural values, norms and beliefs. Children's development in each of these domains is guided by biology in interaction with the environment, and some families are more at risk than others. An early investment in health pays off for the futures of individuals, children and society alike. The main goal of CAPC is to contribute to the health of children aged 0-6 and their families living in conditions of risk.

Children

Visual, verbal, social, emotional and physical stimuli are essential for children to promote normal progression into adulthood. Research has made it clear that positive factors are associated with fewer behavioural problems later in life. Negative experiences, such as neglect, abuse and violence are likely to hinder individual development. Early interventions have been linked to improvements in IQ and school performance and a reduction in dropout rates, unemployment and criminal activity.

CAPC programs are based on child-centered programming into a community-based intervention model. It is the goal of CAPC to enhance stimulating activities among young children, along with interaction with other children and child-level services, thus reducing emotional-behavioural problems and enhance social and motor development of children. A positive side effect of these activities is young children's readiness to learn once they enter elementary school.

Parents

Parents are central in a child's life from the day the child is born and play a fundamental role in the child's brain development. Early experiences of social-emotional nurturing can protect children against the adverse effects of other social and biological toxins in their environments. CAPC aims to promote child health through activities focusing on quality parenting. Responsive, consistent and nurturing parenting is crucial to physical, cognitive, social and emotional growth in children.

Parents experiencing personal difficulties often are unable to provide optimal care for their children. Children born into families experiencing poverty, lower levels of education, unemployment or underemployment are more likely than their peers to experience developmental problems and to being exposed to unsafe social settings. There are other family characteristics that relate adversely to children's health such as single parenthood, psychological distress, substance abuse and teen parenting. The same

goes for low levels of social support and low levels of parental education. Family characteristics such as mentioned above expose the child to toxic stress which can erode the brain foundation.

CAPC works to enhance parenting skills of at-risk families. These types of services to parents of young children at risk can improve children's developmental outcomes.

Community

Communities provide a context within which children grow up. Characteristics of communities can impact children's development, and children living in dangerous or unhealthy communities have higher rates of disease, injuries, violence and maltreatment and fewer opportunities to play outdoors and to engage with their environments. The quality of parent-child interactions can also be influenced by community danger and poverty. These factors minimize the support the developing brain needs, while producing toxic stress that hampers the brain's ability to form a solid foundation for further development.

CAPC uses a targeted approach to remove barriers and enhance opportunities for participation for disadvantaged groups. It is a means to achieve equity and reduce disparities that stem from socio-economic forces within the community. That approach is central, given that these disparities can have a negative impact on children's health and well-being.

Alberta CAPC-CPNP Coalition

Apart from CAPC, PHAC also set up Canada Prenatal Nutrition Programs, aiming at enhancing healthy pregnancies and healthy lives for infants and toddlers.

In Alberta, the CAPC and CPNP programs have formed a coalition, the CAPC-CPNP Alberta Coalition². The purpose of CAPC programs is to address health and development needs of children – birth to 6 years old – and their families living in conditions of risk. The purpose of CPNP programs is to help vulnerable pregnant women to stay healthy and have healthy babies by reducing the incidence of unhealthy birth weights and improve the health of both infant and mother.

The Coalition has 28 CAPC programs and 21 CPNP programs across Alberta. The benefit of the coalition is, that experiences and best practices are shared. Twice yearly a conference is organised where guest speakers present on topics that apply to the programs. Over the years presentations have been facilitated about topics such as second hand smoke, chemical-free supplies in the home, post-natal depression, FASD and brain development. The CAPC-CPNP coalition further serves as a sounding Board throughout the year for upcoming challenges, as a support network for all member agencies and as a resource for further development of programs. A representative from the PHAC agency in Alberta attends the conferences and advises the CAPC-CPNP Board. The Coalition for Far Northwest Alberta Brighter Futures Society is a member of the Alberta CAPC-CPNP Coalition.

² See also www.capccpnpalberta.com for more information.

The Coalition for Far Northwest Alberta Brighter Futures Society History and Organisation

History

The Coalition for Far Northwest Alberta Brighter Futures Society (the Society) was incorporated on January 24, 1994 with four Head Start programs in the far Northwest corner of Alberta: High Level, Fort Vermilion, La Crete and Paddle Prairie. High Level Head Start was initially funded by Silver Birch, which was later taken over by the Alberta government. The other three programs were funded by the federal government from the start. The reason for the difference in funders is that High Level already had an Aboriginal Head Start program funded by PHAC, and PHAC could not fund two Head Start programs in one community. In 2014 the Province of Alberta cut the funding for High Level Head Start as it did not fit within their newly developed Early Intervention Framework (Together we Raise Tomorrow, 2013).

The programs were initially housed in the schools and over the years they moved to various locations. Eventually the Society purchased a house for High Level Head Start in High Level. In Fort Vermilion a penny drive was done by the Head Start children and the rented house where the program was located was purchased for a dollar from Mackenzie Housing. In La Crete a house was bought in 2007. Paddle Prairie received an in kind donation for use of a log home from the settlement for the program. Since 2007 all programs have been stable in their own location.

Organisation

A Board was put into place for the newly incorporated non-profit. The Board is a governance Board, the Executive Director takes care of the daily business of the Society. Figure 1 shows the organisational table of the Society.

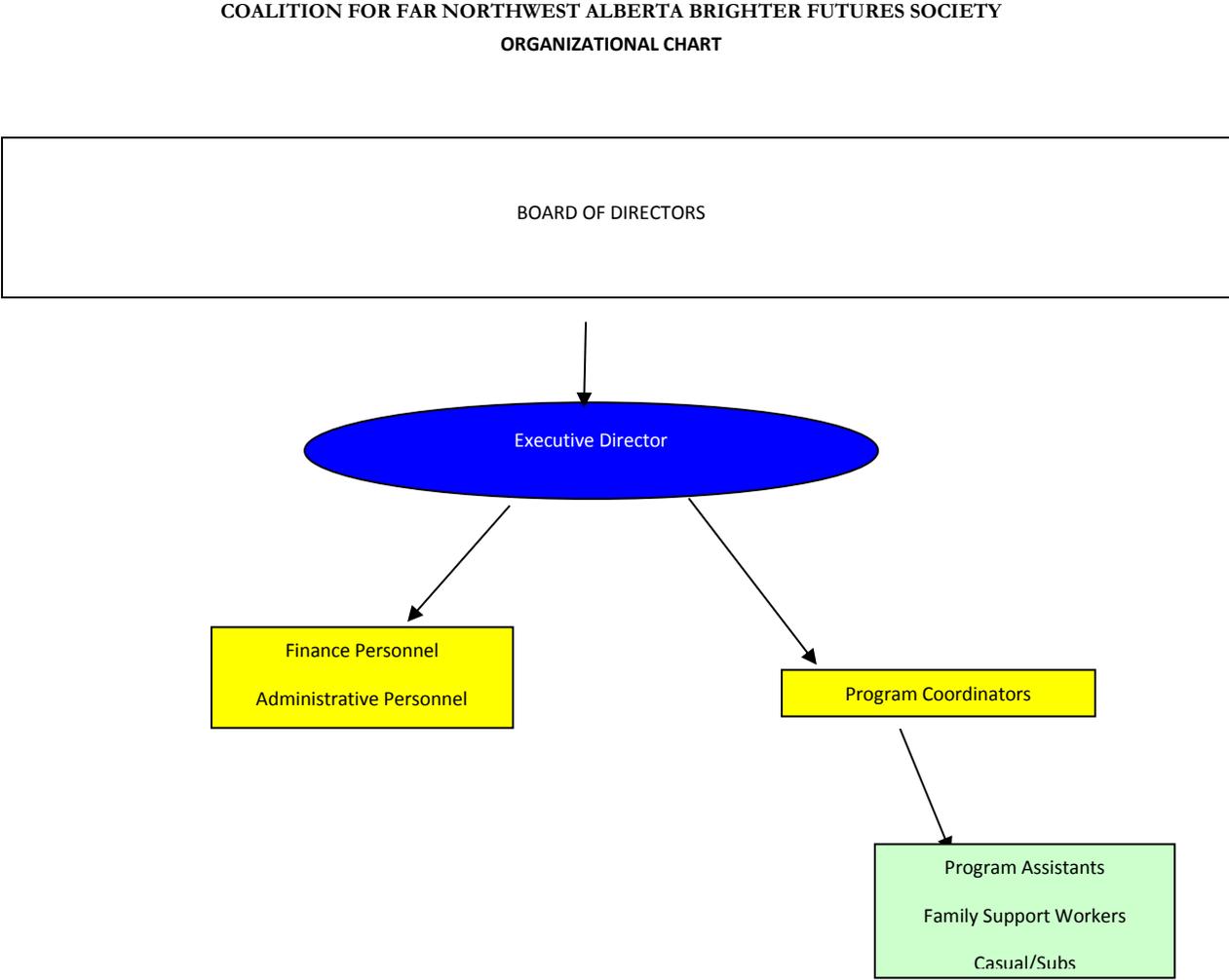
The Executive Director supervises the Head Start programs. Because of their remote location and being dispersed over the area, the programs operate quite independently. There are common policies and procedures for the Society as a whole which apply unanimously to all sites, however staff is empowered to adapt to local circumstances. If deviances from policies seem significant this is discussed with the Executive Director.

The Executive Director is in charge of all aspects of Admin, such as Human Resources, administration, regulations, policies and procedures, insurance, banking and finance, events. Just like the Board is a governance Board allowing the Executive Director to operate quite independently, the Executive Director applies a governance style to the programs.

The Programs have a Program Coordinator, a Program Assistant and sometimes a Family Support Worker, the latter depending on the number of children in the program and the availability of a suitable employee and – last but not least - sufficient funding. All programs have some casual workers to call upon when needed. Casual workers are paid and are part of the workforce of the Society. Volunteers participate in the programs at a large scale.

The Program Coordinators supervise the Program Assistant and the Family Support Worker – and the casual workers – and have the authority to approve vacation and purchases for the program. The program plan for each site is set up within the team of Coordinator, Assistant and other staff on site.

Figure 1: Organisational Chart



In general the programs follow the calendar of the school division within which their program is situated, as not to disrupt the lives of families too much, families who may have other children in the school division system. This way, all children within one family have vacation and school simultaneously.

The programs have children four days a week and use the Fridays for cleaning, supplies, planning, changing themes and anything else that cannot be done during one of the other days. On the Mondays through Thursdays the days are filled with service delivery to the children and their families.

The Fort Vermilion and La Crete programs (and High Level in the past) have a morning class and an afternoon class. The Paddle Prairie program has one class only, as the settlement is large and it is logistically not feasible to have two classes, not from the parents' point of view and not from the program's point of view (travel time). Typically, the youngest children are in the morning class and the older children are in the afternoon class, although staff are free to choose how they organise their classes. Naturally, in Paddle Prairie the class is mixed.

Apart from classes during the day, parent nights are organised several times throughout the year in each program and staff attends Early Childhood Development conferences.

Throughout the years an average of 105 children and families were served per year. Since the closure of High Level Head Start in January 2015, that number dropped to an average of 75 children and their families per year.

Mission Statement and Code of Ethics

Like many organisations, the Society has a mission statement. It outlines what the organisation is all about, what it does and how it is supposed to work. Along with a code of ethics, it is intended to give the general public a solid impression of how the Society works and what may be expected. For the Society members it is a reference to the way should enhance the trust of the general public. Below is the Mission Statement of this Society.

MISSION STATEMENT

The Coalition for Far Northwest Alberta Brighter Futures Society is to provide early intervention and a fair start in life to children 3.5 – 5 years of age as well as provide support to their families.

We believe that through partnership all children can reach their potential in a supportive environment that is always evolving to meet the changes and needs of our society.

We also believe that all children deserve a good start in life and that some families require extra assistance in maximizing the health and well-being of their children.

Goals

1. Improve parental knowledge and ability of parents; stressing that parents are indeed the most important teachers that children will ever have.
2. Assist children experiencing risk to develop skills and gain self-esteem.
3. Promote school-readiness by enhancing the social and cognitive development of children in our society.
4. Enable families to maximize their children's growth and development.

Objectives

1. Provide opportunities for parenting workshops and special learning opportunities.
2. Provide preventive early intervention strategies for children experiencing risk through special programs.
3. Support families through peer support programs and other community self-support groups.
4. Provide community education on issues relating to early childhood development.
5. Assist families in establishing links to existing on-going services.

General guidelines about how the Society operates and what clients (parents and children, but also other agencies) may expect from the employees and the Board, are outlined in the Code of Ethics.

CODE OF ETHICS

The Society maintains a Code of Ethics for its employees and Board so as to set a standard code for the day-to-day operation of the program in the widest interpretation imaginable.

As Brighter Futures Society³ employees and Board,

1. We are honest and trustworthy in all our relationships;
2. We are reliable and conscientious in carrying out assignments and responsibilities;
3. We are truthful and accurate in what we say and write;
4. We are cooperative and constructive in all work undertaken;
5. We are fair, considerate and respectful in our treatment of fellow employees, children and families;
6. We are law abiding in all our activities;
7. We are dedicated in service to our Society and to the improvement of the quality of life in the world in which we live.

³ In everyday language, the Society is referred to as “Brighter Futures Society”. In this document, the Society is simply referred to as “The Society”.

Head Start: the program

The Head Start programs all function in the same way yet they are all different, adjusted to the local needs and wants. Head Start staff is local so they know what the community expects, wants and needs. Before we proceed to the program itself a brief note about staff qualifications.

Staff Qualifications

In the late nineties, the requirement of a Child Development Assistant was put into place as a minimum requirement for working with the children. The Alberta Government offers the opportunity to obtain this certificate through a free online course.

As per September 2011, the Alberta Government requires that at least one staff member per program holds a Child Development Worker certificate. In smaller communities this can be challenging where there are not always sufficient applicants available with the required qualifications. Since 2011 Northern Lakes College is offering the Early Childhood Development education through an online program. Many interested individuals have enrolled into that program which has enabled the Society to recruit qualified staff. Where no qualified applicants are available, the Alberta Government Child Care Licensing office offers the opportunity for an exemption as long as a staff member is enrolled into the Child Development Worker education program.

One staff member needs the Child Development Worker certificate, the other staff members need at least a Child Development Assistant (CDA) certificate. This can be obtained online through the Government of Alberta at no cost. A staff member that starts the position at Head Start needs to enroll into the course and needs to complete within three months.

Discussions have started about the future of early childhood educational staff qualifications, about the differences between Early Childhood Educators and school teachers. The differences in training and education as well as remuneration between early childhood educators and school teachers are significant (Muttart Foundation and Dr. Rachel Langford, 2014). As this is being written, a report on the outcome of discussions held in Calgary, Edmonton, Lethbridge and Grande Prairie will be presented to the Minister.

This is an important aspect, because during their education staff learns about early childhood development, challenges and successes. Without that background, it would become extremely difficult to deliver a Head Start program. Just loving children is certainly not enough!

Head Start Principles

The principles of CAPC apply to Head Start:

1. Children first;
2. Strengthening and supporting families;
3. Equity and accessibility;
4. Flexibility;
5. Partnerships and collaboration;
6. Community-based delivery.

Children First

Head Start offers visual, social, emotional, developmental and sensory stimuli to help the child develop. These stimuli can be in the form of play, craft, group activities and even quiet time. Parents and caregivers are a rich resource of information about their child's strengths and challenges. Head Start will build on the strengths and address the challenges in a playful manner, enhancing the child's potential. Children are central in the program, meaning that a program plan can vary according to the children's needs of that day.

Strategies for Children First

In order to meet the various challenges, Head Start has strategies at hand:

- a snack is always provided in the program and there are always more snacks at hand for big eaters. Snacks are healthy as per the Canada Food Guide;
- There is a quiet corner for children who need some time on their own. This can be as simple as a large box with a curtain;
- Sensory play opportunities such as beads, sand, water, bean bags;
- Musical opportunities such as songs;
- Group activities such as circle time. Circle time has many components, such as an educational component (letters, numbers, shapes, colours), a social component (show and tell, let children take turns), expressive opportunities (sing and dance);
- Creative opportunities: craft time;
- Gross motor skills: outdoor play such as swings, hoops, slide;
- Fine motor skills such as craft (clipping and colouring);
- Recently (spring 2016) other activities are added such as a mud kitchen (outdoor activities) to encourage children to be inquisitive about the outdoors and to be more physically active.

Strengthening and supporting families

Families are welcome in the program. Parents and caregivers can come in as volunteers, or just watch their child. They are invited to connect with staff about their child's challenges. In this respect, there needs to be a pro-active approach from staff to encourage parents and caregivers into the program to connect, to the benefit of themselves and their child. This task lies primarily on the shoulders of the Family Support Worker but basically any staff member can take this upon her.

Strategies for Strengthening and supporting families

- Connecting with caregivers right from the start by explaining the strategy and purpose of the program;
- Home visits to assess the situation where the child lives. It is paramount to explain to the family that the home visit is not intended to judge the family and that we are not there to take the child away, but that we are there to help. A home visit in which the home situation can be assessed, as well as the strengths and challenges within the family contribute hugely to an overall assessment of the child's background;
- Parent nights with an activity that can be done with the child (such as a craft) as well as an educational activity, which can be geared towards topics such as
 - Literacy
 - Mental health
 - Injury prevention

- Healthy weights and nutrition
- Family violence prevention
- Father involvement
- Getting parent feedback, orally or by means of a parent survey.

Equity and Accessibility

Head Start is open to children from all walks of life. The Society does not discriminate by race, gender, religion, ethnic origin or any other aspect. The Human Rights Act is applicable to everyone within the Society, staff, parents, children, and caregivers alike.

Strategies for Equity and Accessibility

- All children have access to Head Start.
- Head Start does not operate on a first come, first serve basis but on the basis of needs. Children with higher needs have a higher chance of access to Head Start than children with lower needs;
- Children may be from all walks of life;
- If a wait list has been created, we re-assess the list before a child from the list is admitted. Situations may have changed for the better or the worse for a child on the wait list, which may affect the urgency for Head Start;
- Phone and other messages are responded to in a prompt manner;
- Parents and caregivers shall be well informed of Head Start activities, and upon request;
- Parents and caregivers have access to Head Start to observe their children.

Flexibility

Head Start is flexible as to a child's needs. What may be a child's needs today, may not be the same tomorrow. A similar procedure applies to parents and caregivers. Head Start adjusts as to the needs of parents, caregivers and children to the extent that the program continues a consistent operation.

Strategies for flexibility

- Parents may move or children may need to be dropped off in another place than usual. The van route may need to be adjusted incidentally;
- A child may be absent from the program for a limited time because of family circumstances;
- Children may prefer a different activity than what is planned, which preference may be met;
- Planned activities may be re-scheduled for various reasons.

Partnerships and collaboration

Head Start partners with other agencies to obtain optimal results for the children and families in the program. Partnerships strengthen the community base of the program.

Strategies for partnerships

- Facilitators for children's activities can access the program if it benefits the program. For example: This may apply to facilitators from Alberta Health Services with respect to Health Promotion;
- Field trips or similar activities can be organised in conjunction with other agencies, such as the RCMP, the Fire Brigade, the elementary school.

Community-based delivery

Head Start is geared towards the needs of the community. What one community needs may not be what another community needs.

Strategies for community-based delivery

- Staff members are aware of the needs in their community;
- Needs may shift. It is essential to stay up to date;
- Staff members are aware of the community culture. This may include community holidays, but also special days in the community such as celebrations or funerals.

Operational days and hours

Head Start operates from September through June. Typically, children attend the program from October through the first week of June, Monday through Thursday with the exception of school holidays. The program operates between 08:00 and 3:00, but local adjustments are possible.

The Head Start programs have a maximum of 15 children per class, with two classes in Fort Vermilion and La Crete and one class in Paddle Prairie.

Staff keeps the program open as much as possible, yet the program may occasionally close due to staff sickness (this may especially occur if there are no casual workers available) or during staff training. Staff may attend conferences and/or training throughout the year. The objective is to close the program as little as possible.

Applications and risk factors

Most Head Start applications are submitted in September. Applications are reviewed and assessed using the risk factor sheet (see Appendix 1). The higher the risk factors, the higher the chances the child is admitted to Head Start (the program does not operate on a first come – first serve basis).

If the program receives more applications than there are spaces available, a wait list is created. Again, children with the highest risk factors will be placed at the top of the list. In this respect, the wait list is a living document.

As children may leave the program for various reasons (one may be a move away from the community), a child from the wait list may be admitted throughout the year. Typically children are accepted into the program until the first week of January, as there will be enough time to let a child settle into the class routine. However, if application numbers are low, children will be admitted after the first week of January. It will be more difficult to mark a child's progress that enters the program late in the school year since it's more challenging for the child to settle into class routine with a well-established class.

Testing

Children are tested throughout the year. The first test – using the Brigance scoring method – is applied in November. By that time the child should be comfortable enough with the teacher to be subjected to the testing (which includes a few “exercises” such as standing on one foot) and still be quite at the beginning of the school year. The Brigance test is again applied in May of the school year. Through a smart scoring system in which is corrected for age, the child's progress can be recorded and discussed with the parent/caregiver. The Brigance test is completed with the teacher.

Another test that helps assess the child's progress is the ages and stages questionnaire (ASQ). This questionnaire assesses a child's activities and can be submitted by the parent. It is a great tool to get

parent involvement in the program and in the development of the child, and to help the parent understand a child's level of development. Staff needs to be trained in the ASQ questionnaire.

A third method of evaluation is the parent survey. The parent survey is submitted at the beginning of the program (November) and at the end (May).

Day-today schedule

How the day is put together is up to each Head Start program, yet there is a rationale why certain activities work better at certain times, and others do not.

When the children come in in the morning or afternoon, they are usually full of energy. In order to let some of that energy out, it might be wise to let the children play for a little while. Once they have settled down, which is usually after 20 minutes or a half hour at the most, they get a snack. Because they have played, they will have more patience to sit down for a little while. Following the snack is the clean-up, and then another activity such as circle time or craft time. The last 10-15 minutes can be used for another moment of play, preferably outdoor, weather permitting.

There are varieties to the schedule. On Mondays it may work to start with circle time and let children tell their weekend activities. Upon entry into the program, when they change from outdoor shoes to indoor shoes, it may work to pile up all their shoes and let them find their own indoor shoes, a fun activity to start the day with. Show and tell is a popular activity. There is an almost endless variety in ways how children can be engaged with each other and with the program. Essential is that they get a chance to play, to be engaged with each other, learn to share, learn how to deal with their emotions (which typically happens when one child has a toy that another child wants to play with) and learn to use their gross and fine motor skills.

Some children may need some time alone and a space where the child can be by himself/herself is needed. A large box with a curtain can be sufficient for the child to be able to have some quiet time.

Partnerships

Head Start thrives on partnerships and though Head Start programs typically operate quite independently, partnerships are easy ways to expose children to the outside world in a safe way. The local Fire Department and/or Police Department are usually interesting field trip locations for children. The library or a petting zoo is another possibility. Yet a partnership does not always need to be a field trip. Alberta Health Services provides free services such as a fun hand washing workshop (where they work with glow gel), the dental clinic can provide a tooth brushing clinic and the local library may be a location for exposure to reading and story-telling. And there are numerous other options for partnerships with local agencies such as local Community Support Services.

Parent nights

Where Head Start is primarily focusing on children's health and well-being, the role of the parents can and may not be underestimated. Parent nights are an informative and fun way to involve parents into the

program. Getting to know the parents is a great way for staff to be informally acquainted with the child's background. Parents usually enjoy a parent night where there is (potluck) food, crafts to do with the children and time to get to know the Head Start staff. Parent nights may be – but do not necessarily have to – be organised around a theme such as Fall, Halloween, Christmas, Valentine's Day, Easter, Mother's Day or Summer.

The role of Head Start staff

Head Start staff is a Program Coordinator, a Program Assistant and sometimes a Family Support Worker. On top of that there may be casual staff to help out when one of the regular staff members can't make it to work, and volunteers.

Program Coordinator

The Program Coordinator (PC) supervises the Head Start program and the staff. This is the team leader. She is the first point of contact for the parents and for other agencies, as well as for the Executive Director. She initiates program planning, activities, and directs other staff members where necessary. Once the team is established, she may delegate tasks to other team members, which is recommended. Monthly reporting and all admin work connected with the Head Start program is part of her job as well. The PC must have a minimum of a Child Development Worker certificate or must be enrolled in a program to obtain this certification.

Program Assistant

The Program Assistant (PA) directly works under the PC. When the PC is absent, she takes over. On a day-to-day basis she is more involved with the details of the program as well as with cleaning and tidying up the program after the children have gone home. Because she must take over the program in the absence of the PC, it is essential that she is knowledgeable about the PC tasks. The PA must hold a Child Development Assistant certificate.

Family Support Worker

The Family Support Worker (FSW) has as primary task to connect with the families. This may entail home visits, or invite parents and caregivers into the program. The main goal is to establish a rapport with the parents. The FSW may also lend a hand in the program when the children are in. After all, she'll need to know the children before she can discuss anything with the parents. The FSW may take over the PA duties if necessary, but rarely will she take over the PC duties. The FSW must hold a Child Development Assistant certificate.

Casual staff

It is recommended to recruit some casual staff that can step in when regular staff members can't make it to work. Casual staff must hold a Child Development Assistant certificate.

The Child Development Assistant certificate can be obtained through an online course with Basecorp.

As can be seen in the Organisational Chart, there is (formally) a hierarchy within the organisation of Head Start programs. The reality is, that the organisation is fairly flat and that contacts between staff members – among each other and with the Executive Director – are quite informal.

Team meetings and Staff meetings

To organise and monitor the day to day operations of the Head Start program, staff are encouraged to organise team meetings. This may be through informal or formal meetings, essential is that planning and upcoming activities are streamlined and assigned so everything can be run as smoothly as possible.

On top of that, a staff meeting for all programs with the Executive Director is organised four times a year for the exchange of information and for teambuilding purposes. Teambuilding is especially essential due to the widespread locations of the Head Start programs, where team buildings offer the opportunity of mutual support, reflection on practices and exchange of information. The organisation of a staff meeting is initiated by the Executive Director.

Performance Assessments

The PC completes the performance assessment of the PA and the FSW once a year. Casual staff members and volunteers do not receive a performance assessment. The Executive Director will send the Performance Assessment form to the PCs well in advance. Typically, the PC performance assessments are completed in March and the PA and FSW performance assessments are completed in April of each year.

A new staff member will receive a performance assessment at the end of the mandatory probation of three months. If completion of probation is within six months of the regular performance assessment month, the performance assessment will be skipped that year.

Licensing

The Head Start programs are licensed by the Government of Alberta. A licensing officer will visit with the Head Start program twice a year, usually in October and in March-April.

Fundraising

In order to obtain sufficient financial support, Head Start programs are requested to fundraise. This can be any activity such as a bottle drive, a raffle, selling center pieces etc. A major fundraiser every three years is the Casino event.

Another method of fundraising is application for grants. This done by the Executive Director. Grants have been received from the Community Initiatives Program, from United Way and other agencies.

Occasionally donations are made. In 2011 the Society received a donation from an anonymous donor in Fort Vermilion, in 2014 the Society received a donation from Parkland Industries.

Budgets

Every program gets a budget assigned for the year. The Executive Director will keep track of the budget and connect with the PCs about the status quo.

Building Maintenance

Identifying needs for building maintenance is a responsibility of Head Start staff. At the beginning of each new school year, a building checklist needs to be completed and submitted before the end of the first work week. This will enable the Society to apply for funds for repairs and maintenance.

Inventory

Inventory is submitted to Admin annually in January. Each Head Start program will receive an inventory list from the previous year with the request to update.

The Role of the Executive Director

The Executive Director oversees the Head Start programs. This employee is part of the team and at the same time leads the teams. She performs all the administrative work for the Head Start programs such as preparing budgets for the funder, contacts with the funder, finance, contacts with the Board, preparing documents for Board meetings, contacts with the Auditor, contacts with licensing of the Government of Alberta and all other administrative work. Overseeing the Head Start programs, planning “the bigger picture” (such as conferences to attend by staff) and providing support for staff are probably one of the major tasks that do not let themselves describe in detail. Being there for staff, guiding staff, being there for parents, contacts with parents and children are all part of the Executive Director’s job. Organising staff meetings and Board meetings is one of the tasks, and if this gives the impression that the Executive Director is in the middle between staff and Board, that’s exactly how it is. Much of the work of the Executive Director is guided by incoming mail and emails, but initiatives such as looking for networking opportunities, looking for speakers for a conference, looking for opportunities for staff development, grant applications are definitely an important part of the job.

The Role of the Board

The Board is a volunteer Board that has adopted a governance structure: The Executive Director “runs” the Society and as long as everything goes as per policy, funder guidelines and other guidelines, the Board does not interfere. Board meetings are held every two months except for the summer months, and primarily serve information exchange and decision ability.

Central in the Society is a two-way street of information: communication lines shall be kept open as much as possible so everyone knows what is happening. The Board is informed by the Executive Director, the Executive Director is informed by both the staff and the Board, and the staff is informed by the Executive Director. Apart from those lines (as can be derived from the Organisational Chart) there are many other communication lines coming in and going out with agencies such as Alberta Child Care Licensing, Alberta Health Services (health inspections), fire chief (fire inspections) and other early childhood education agencies such as the Parent Link centre, the local day care, the local Support Services office and the local schools.

Appendix 1: Risk Factors

Risk Factors Rating System

Children and families may have risk factors. This sheet shows the possible, recognised risk factors. A child or family may have multiple risk factors.

How to work this sheet:

Check off risk factors that apply. Pick out each applicable risk factor. Multiply that number by the percentage for that category and add up the total score.

Example: A child has documented social/emotional challenges (rating 10). Percentage score for that section is 20%. Take 20% out of 10 = 2. Mark “2” in the right column. Then the same child also has a parent with alcohol and drug abuse (section B). That’s a score 9. Take 15% out of 9 = 1.35. Mark “1.35” in the right column. The child has no other risk factors. $2+1.35=3.35$. The child has in total 2 risk factors with a score of 3.35.

NOTE # 1: Children eligible for Program Unit Funding (PUF) only get a check mark for that particular risk because they get separate schooling. Maximum is four spots.

NOTE # 2: In order for a child to have a “documented” challenge, the child and/or family needs to be seeing medical doctor, specialist, or a therapist and there must be a written note from the specialist/therapist/family doctor.. “Undocumented” means the challenge is serious enough that the family is in the process of seeking outside help.

SECTION	CATEGORY	DETAILS	RATING	PERCENTAGE SCORE
A	CHILDREN'S CHALLENGES	Low birth weight/slow weight gain (less than 5 lbs. 8 oz)	3	20
		Documented social/emotional challenges	10	
		Undocumented social/emotional challenges (e.g. doesn't play well with others, separation difficulties, seems left out)	6	
		Documented sexual abuse	10	
		Undocumented sexual abuse	6	
		Documented FASD	10	
		Undocumented/suspected FASD	6	
		Documented cognitive challenges	10	
		Undocumented cognitive challenges (e.g. learns slowly, doesn't understand well, seems immature, easily distracted)	6	
		Documented behavioural challenges	10	
		Undocumented behavioural challenges (e.g. tantrums, destructive, unable to accept limits)	6	
		Documented delay fine motor	10	
		Undocumented delay fine motor (e.g. poor eye/hand coordination, poor control of body movements)	6	

		i.e. holding spoon, difficulty with sizes and shapes)		
		Documented delay in language development	10	
Section A continued		Undocumented delay in language development (e.g. unclear speech, grunts, groans, inappropriate answers)	6	(20 continued)
		ESL (child does not speak English)	4	
		Documented physical disability (vision, hearing, motion, medically frail)	10	
		Undocumented physical disability (vision, hearing, motion, medically frail)	6	
		Program Unit Funding (PUF)	YES/NO	
B	PARENT CHALLENGES	Parent health (physical/mental)	5	15
		Alcohol or drug abuse	9	
		Documented mental health challenges	10	
		Undocumented mental health challenges	6	
C	PARENT STATUS	Education less than grade 12 of one parent	6	
		Education less than grade 12 of both parents	8	
		Education less than grade 12 of teen parent (<19 yrs)	10	
D	FAMILY	More than 2 children 0-6 yrs of age	5	20
		Single parent (one caregiver)	4	
		Lone parent (one parent works away from home for a longer time, not shift work)	3	
		Recent family breakdown (within last year, e.g. separated and difficulty coping)	6	
		Involved with Child and Family Services	6	
	CULTURAL BACKGROUND	First year immigrant in Canada	5	
		ESL both parents	4	
		ESL one parent	2	

		First Nation, Metis, Inuit	4	
		Minority group in designated community (e.g. Aboriginal in Mennonite community)	4	
E	HOUSING	Inadequate housing (motel, condemned trailer, filthy, broken windows, unhealthy environment)	8	10
		Multi-family residing at the same place (non-culturally specific)	6	25
		Frequent moves: More than once in last year from outside of the area	5	
		More than twice in last year in the same area	4	
F	INCOME	Family income under \$20,000 annually	10	
		Receiving Social Assistance	10	

TOTAL NUMBER OF RISK FACTORS (COUNT NUMBER OF ITEMS IN A-F): _____

TOTAL SCORE _____