FSU 10 Components of Quality Care for Infants and Toddlers

Related Head Start Program Performance Standards

What constitutes quality child care?

Research defines ten essential components of quality child care programs that produce meaningful outcomes for the young children they serve. Child care programs that endeavor to improve often begin with tangible changes to physical layouts, equipment, and materials. Because young children learn best in secure relationships, quality programs also promote nurturing care and strong relationships between children, caregivers, and families. The best programs commit to participating in continuous quality improvement (CQI).

1. Safe & Healthy Program Practices

Quality programs exceed minimum state and local standards for licensing to ensure the health and safety of children and adults in both indoor and outdoor environments. Attentive and knowledgeable teachers follow detailed procedures and standards for maintaining hygiene, preventing illness, minimizing infection, and dealing with health and safety emergencies. Nutritious meals and snacks are provided to accommodate the unique dietary needs of infants and toddlers. Teachers follow strict guidelines for proper diapering, toileting, hand washing, sanitizing, and safe sleep practices.

Related Head Start Performance Standards

1302.47 Safety Practices

(a) A program must establish, train staff on, implement, and enforce a system of health and safety practices that ensure children are kept safe at all times. A program should consult *Caring for our Children Basics*, available at https://www.acf.hhs.gov/ecd/caring-our-children-basics, for additional information to develop and implement adequate safety policies and practices described in this part.

(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with §1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure:

(1) **Facilities.** All facilities where children are served, including areas for learning, playing, sleeping, toileting, and eating are, at a minimum:

(i) Meet licensing requirements in accordance with §§1302.21(d)(1) and 1302.23(d);
(ii) Clean and free from pests;
(iii) Free from pollutants, hazards and toxins that are accessible to children and could endanger children's safety;
(iv) Designed to prevent child injury and free from hazards, including choking, strangulation, electrical, and drowning hazards, hazards posed by appliances and all other safety hazards;
(v) Well lit, including emergency lighting;
(vi) Equipped with safety supplies that are readily accessible to staff, including, at a minimum, fully equipped and up-to-date first aid kits and appropriate fire safety supplies;
(vii) Free from firearms or other weapons that are accessible to children;
(viii) Designed to separate toileting and diapering areas from areas for preparing food, cooking, eating, or children's activities;

(ix) Kept safe through an ongoing system of preventative maintenance.

(4) **Safety training.**

(i) Staff with regular child contact. All staff with regular child contact have initial orientation training within three months of hire and ongoing training in all state, local, tribal, federal and program-developed health, safety and child care requirements to ensure the safety of children in their care; including, at a minimum, and as appropriate based on staff roles and ages of children they work with, training in:

(A) The prevention and control of infectious diseases;
(B) Prevention of sudden infant death syndrome and use of safe sleeping practices;
(C) Administration of medication, consistent with standards for parental consent;
(D) Prevention and response to emergencies due to food and allergic reactions;
(E) Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic;
(F) Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;
(G) Emergency preparedness and response planning for emergencies;
(H) Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants;
(I) Appropriate precautions in transporting children, if applicable;
(J) First aid and cardiopulmonary resuscitation; and,
(K) Recognition and reporting of child abuse and neglect.

(5) **Safety practices.** All staff, consultants, contractors, and volunteers follow appropriate practices to keep children safe during all activities, including, at a minimum:

(i) Reporting of suspected or known child abuse and neglect, as defined by the Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. 5101 note), including that staff comply with applicable Federal, State, Local, and Tribal laws;
(ii) Safe sleep practices, including ensuring that all sleeping arrangements for children under 18 months of age use firm mattresses or cots, as appropriate, and for children under 12 months, soft bedding materials or toys must not be used;
(iii) Appropriate supervision of children at all times;
(iv) Only releasing children to an authorized adult;
(v) All standards of conduct described in §1302.90(c)(1*)(ii)

(6) **Hygiene practices.** All staff systematically and routinely implement hygiene practices that at a minimum ensure:

(i) Appropriate toileting, hand washing, and diapering procedures are followed;
(ii) Safe food preparation; and,
(iii) Exposure to blood and body fluids are handled consistent with standards of the Occupational Safety Health Administration.

1302.44 Child nutrition.

(a) **Nutrition service requirements.**

(1) A program must design and implement nutrition services that are culturally and developmentally appropriate, meet the nutritional needs of and accommodate the feeding requirements of each child, including children with special dietary needs and children with disabilities. Family-style meals are encouraged as described in §1302.31 (e)(2).

(2) Specifically, a program must:

(i) Ensure each child in a program that operates for fewer than six hours per day receives meals and snacks that provide one third to one half of the child's daily nutritional needs;
(ii) Ensure each child in a program that operates for six hours or more per day receives meals and snacks that provide one half to two-thirds of the child's daily nutritional needs, depending upon the length of the program day;

2. Staff Well-Trained

Teacher education in early childhood development and ongoing in-service training promotes the teacher's ability to address the unique needs of infants and toddlers. Quality programs implement a system of observation, feedback, and reflective practice. Staff at all levels are offered opportunities for mentoring/coaching support and professional development specific to infants, toddlers, and families.

Related Head Start Performance Standards

1302.45 Supports for mental health and well-being.

(a) Program-wide wellness supports. To support a program-wide culture that promotes mental health, social and emotional well-being, and overall health and safety, a program must use a multidisciplinary approach that:

(1) Coordinates supports for adult mental health and well-being, including engaging in nurturing and responsive relationships with families, engaging families in home visiting services, and promoting staff health and wellness, as described in § 1302.93.

1302.90 Personnel policies.

(d) **Communication with dual language learners and their families.**

(1) A program must ensure staff and program consultants or contractors are familiar with the ethnic backgrounds and heritages of families in the program and are able to serve and effectively communicate, either directly or through interpretation and translation, with children who are dual language learners and to the extent feasible, with families with limited English proficiency.

1302.91 Staff qualifications and competency requirements.

(a) **Purpose.** A program must ensure all staff, consultants, and contractors engaged in the delivery of program services have sufficient knowledge, training and experience, and competencies to fulfill the roles and responsibilities of their positions and to ensure high-quality service delivery in accordance with the program performance standards. A program must provide ongoing training and professional development to support staff in fulfilling their roles and responsibilities.

(d) **Child and family services management staff qualification requirements.**

(2) **Education management.** As prescribed in section 648A(a)(2)(B)(i) of the Act, a program must ensure staff and consultants that serve as education managers or coordinators, including those that serve as curriculum specialists, have a baccalaureate or advanced degree in early childhood education or a baccalaureate or advanced degree and equivalent coursework in early childhood education with early education teaching experience.

(e) **Child and family services staff.**

(1) **Early Head Start center-based teacher qualification requirements.** As prescribed in section 645A(h) of the Act, a program must ensure center-based teachers that provide direct services to infants and toddlers in Early Head Start centers have a minimum of a Child Development Associate (CDA) credential or comparable credential, and have been trained or have equivalent coursework in early childhood development with a focus on infant and toddler development.

1302.92 Training and professional development.

(a) A program must provide to all new staff, consultants, and volunteers an orientation that focuses on, at a minimum, the goals and underlying philosophy of the program and on the ways they are implemented.

(b) A program must establish and implement a systematic approach to staff training and professional development designed to assist staff in acquiring or increasing the knowledge and skills needed to provide high-quality, comprehensive services within the scope of their job responsibilities, and attached to academic credit as appropriate, and integrated with employee engagement practices in accordance with § 1302.101(a)(2).

(2) If a majority of children in a class or home-based program speak the same language, at least one class staff member or home visitor must speak such language.

1302.93 Staff health and wellness.

(b) A program must make mental health and wellness information available to staff regarding health issues that may affect their job performance, and must provide regularly scheduled opportunities to learn about mental health, wellness, and health education.
(c)(1) A program must provide, for each staff member, regular breaks of adequate length and frequency based on hours worked, including, but not limited to, time for meal breaks as appropriate.
(d) A program should cultivate a program-wide culture of wellness that empowers staff as professionals and supports staff to effectively accomplish their job responsibilities in a high-quality manner, in line with the requirement at § 1302.101(a)(2).

3. Environments for Learning

Quality infant and toddler environments are designed to be comfortable for children and adults and offer enjoyable experiences. The atmosphere promotes children's feelings of security and competence. The physical arrangement of space and choice of equipment supports meaningful interactions between adults and children during caregiving routines and play. Adaptable environments accommodate the growth, changing abilities, and varied interests of infants and toddlers. Environments for infants and toddlers are separate from older children, offering them opportunities to safely experience a sense of freedom, adventure, and exploration.

Related Head Start Performance Standards

1302.21 Center-based option.

(d) **Licensing and square footage requirements.**
(2) A center-based program must have at least 35 square feet of usable indoor space per child available for the care and use of children (exclusive of bathrooms, halls, kitchen, staff rooms, and storage places) and at least 75 square feet of usable outdoor play space per child.

1302.31 Teaching and the learning environment.

(a) **Teaching and the learning environment**. A center-based and family child care program must ensure teachers and other relevant staff provide responsive care, effective teaching, and an organized learning environment that promotes healthy development and children's skill growth aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five, including for children with disabilities.
(c) **Learning environment.** A program must ensure teachers implement well-organized learning environments with developmentally appropriate schedules, lesson plans, and indoor and outdoor learning experiences that provide adequate opportunities for choice, play, exploration, and experimentation among a variety of learning, sensory, and motor experiences and:
(1) For infants and toddlers, promote relational learning and include individualized and small group activities that integrate appropriate daily routines into a flexible schedule of learning experiences;
(d) **Materials and space for learning.** To support implementation of the curriculum and the requirements described in paragraphs (a), (b), (c), and (e) of this section a program must provide age-appropriate equipment, materials, supplies and physical space for indoor and outdoor learning environments, including functional space. The equipment, materials and supplies must include any necessary accommodations and the space must be accessible to children with disabilities. Programs must change materials intentionally and periodically to support children's interests, development, and learning.

1302.47 Safety practices.

(b) A program must develop and implement a system of management, including ongoing training, oversight, correction and continuous improvement in accordance with §1302.102, that includes policies and practices to ensure all facilities, equipment and materials, background checks, safety training, safety and hygiene practices and administrative safety procedures are adequate to ensure child safety. This system must ensure
(2) Equipment and materials. Indoor and outdoor play equipment, cribs, cots, feeding chairs, strollers, and other equipment used in the care of enrolled children, and as applicable, other equipment and materials meet standards set by the Consumer Product Safety Commission (CPSC) or the American Society for Testing and Materials, International (ASTM). All equipment and materials must at a minimum:
(i) Be clean and safe for children's use and are appropriately disinfected;
(ii) Be accessible only to children for whom they are age appropriate;
(iii) Be designed to ensure appropriate supervision of children at all times;
(iv) Allow for the separation of infants and toddlers from preschoolers during play in center-based programs;

4. Small Groups with Optimal Ratios

Group size and ratios determine the amount of time and attention each teacher can devote to an individual child. Small groups promote a sense of intimacy and safety, which supports a rich learning environment. With small groups and more staff, teachers can build strong relationships with children and adapt activities to meet their changing interests and needs. Throughout the day, teachers remain engaged with the small group of children and serve as their "secure base" both indoors and outdoors.

Related Head Start Performance Standards

1302.21 Center-based option.

(b) **Ratios and group size.**

(1) Where state or local licensing requirements are more stringent than the teacher-child ratios and group size specifications in this section, a program must meet the stricter requirements. A program must maintain appropriate ratios during all hours of program operation, except:

(i) For brief absences of a teaching staff member for no more than five minutes; and,

(ii) During nap time, one teaching staff member may be replaced by one staff member or volunteer who does not meet the teaching qualifications required for the age.

(2) **An Early Head Start or Migrant or Seasonal Head Start class that serves children under 36 months old must have two teachers with no more than eight children, or three teachers with no more than nine children.** Each teacher must be assigned consistent, primary responsibility for no more than four children to promote continuity of care for individual children. A program must minimize teacher changes throughout a child's enrollment, whenever possible, and consider mixed age group classes to support continuity of care.

5. Primary Caregiving & Continuity of Care

In quality programs, each child is assigned a caregiver who has the primary responsibility for that child and with whom they build a meaningful relationship. The primary caregiver also builds a respectful relationship with the family and partners with them to ensure the best outcomes for their child. Optimally, children experience continuity of care when they remain with the same caregiver from entry into care until three years of age. This provides the foundational support for the child's healthy social emotional development and promotes readiness to start school.

Related Head Start Performance Standards

1302.21 Center-based option.

(b) **Ratios and group size.**

(2) An Early Head Start or Migrant or Seasonal Head Start class that serves children under 36 months old must have two teachers with no more than eight children, or three teachers with no more than nine children. **Each teacher must be assigned consistent, primary responsibility for no more than four children to promote continuity of care for individual children. A program must minimize teacher changes throughout a child's enrollment, whenever possible, and consider mixed age group classes to support continuity of care.**

6. Active and Responsive Caregiving

Responsive caregiving helps infants and toddlers begin to understand and regulate their emotions, and provides predictability, safety, and security. Responsive teachers take cues from each child and know when to expand on their initiative, when to guide, and when to intervene. They respond to signs of stress in children and provide comfort and security as needed. Teachers promote the child's emerging sense of self and relationships with others and show acceptance and respect for all children.

Related Head Start Performance Standards

1302.30 (Education and Child Development Program Services) Purpose.

All programs must provide high-quality early education and child development services, including for children with disabilities, that promote children's cognitive, social, and emotional growth for later success in school. A center-based or family child care program must embed responsive and effective teacher-child interactions.

1302.31 Teaching and the learning environment.

(a) **Teaching and the learning environment.** A center-based and family child care program must ensure teachers and other relevant staff provide responsive care, effective teaching, and an organized learning environment that promotes healthy development and children's skill growth aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five, including for children with disabilities.

(b) **Effective teaching practices.**

(1) Teaching practices must:

(i) Emphasize nurturing and responsive practices, interactions, and environments that foster trust and emotional security; are communication and language rich; promote critical thinking and problem-solving; social, emotional, behavioral, and language development; provide supportive feedback for learning; motivate continued effort; and support all children's engagement in learning experiences and activities.

1302.45 Supports for mental health and well-being.

(a) Program-wide wellness supports. To support a program-wide culture that promotes mental health, social and emotional well-being, and overall health and safety, a program must use a multidisciplinary approach that:

(1) Coordinates supports for adult mental health and well-being, including engaging in nurturing and responsive relationships with families, engaging families in home visiting services, and promoting staff health and wellness, as described in § 1302.93.

(2) Coordinates supports for positive learning environments for all children; supportive teacher practices; and strategies for supporting children with social, emotional, behavioral, or mental health concerns.

1302.90 Personnel Policies

(c) **Standards of conduct.**

(1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that:

(i) Ensure staff, consultants, contractors, and volunteers implement positive strategies to support children's well-being and prevent and address challenging behavior;

(iii) Ensure staff, consultants, contractors, and volunteers respect and promote the unique identity of each child and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, or family composition;

1302.93 Staff health and wellness.

(b) A program must make mental health and wellness information available to staff regarding health issues that may affect their job performance, and must provide regularly scheduled opportunities to learn about mental health, wellness, and health education.

(c)(1) A program must provide, for each staff member, regular breaks of adequate length and frequency based on hours worked, including, but not limited to, time for meal breaks as appropriate.
(d) A program should cultivate a program-wide culture of wellness that empowers staff as professionals and supports staff to effectively accomplish their job responsibilities in a high-quality manner, in line with the requirement at § 1302.101(a)(2).

7. Curriculum & Individualization

Curriculum for infants and toddlers happens within the context of relationships, predictable daily routines, and discovery through play. Teachers observe and reflect on the unique abilities, temperaments, and developmental needs of each child. Individualization occurs when those observations are used to shape interactions, offer experiences, and supply materials that promote curiosity and encourage children to follow their own interests.

Related Head Start Performance Standards

1302.30 (Education and Child Development Program Services) Purpose.

All programs must provide high-quality early education and child development services, including for children with disabilities, that promote children's cognitive, social, and emotional growth for later success in school. A center-based or family child care program must embed responsive and effective teacher-child interactions. A home-based program must promote secure parent-child relationships and help parents provide high-quality early learning experiences. All programs must implement a research-based curriculum, and screening and assessment procedures that support individualization and growth in the areas of development described in the Head Start Early Learning Outcomes Framework: Ages Birth to Five and support family engagement in children's learning and development. A program must deliver developmentally, culturally, and linguistically appropriate learning experiences in language, literacy, mathematics, social and emotional functioning, approaches to learning, science, physical skills, and creative arts.

1302.31 Teaching and the learning environment.

(c) **Learning environment.** A program must ensure teachers implement well-organized learning environments with developmentally appropriate schedules, lesson plans, and indoor and outdoor learning experiences that provide adequate opportunities for choice, play, exploration, and experimentation among a variety of learning, sensory, and motor experiences and:

(1) For infants and toddlers, promote relational learning and include individualized and small group activities that integrate appropriate daily routines into a flexible schedule of learning experiences.

1302.32 Curricula.

(a) **Curricula.**

(1) Center-based and family child care programs must implement developmentally appropriate research-based early childhood curricula, including additional curricular enhancements, as appropriate that:

(i) Are based on scientifically valid research and have standardized training procedures and curriculum materials to support implementation;

(ii) Are aligned with the Head Start Early Learning Outcomes Framework: Ages Birth to Five and, as appropriate, state early learning and development standards; and are sufficiently content-rich to promote measurable progress toward development and learning outlined in the Framework; and,

(iii) Have an organized developmental scope and sequence that include plans and materials for learning experiences based on developmental progressions and how children learn.

(2) A program must support staff to effectively implement curricula and at a minimum monitor curriculum implementation and fidelity, and provide support, feedback, and supervision for continuous improvement of its implementation through the system of training and professional development.

1302.33 Child screenings and assessments.

(a) **Screening.**

(1) In collaboration with each child's parent and with parental consent, a program must complete or obtain a current developmental screening to identify concerns regarding a child's developmental, behavioral, motor, language, social, cognitive, and emotional skills within 45 calendar days of when the child first attends the program or, for the home-based program option, receives a home visit. A program that operates for 90 days or less must complete or obtain a current developmental screening within 30 calendar days of when the child first attends the program.

(b) **Assessment for individualization.**

(1) A program must conduct standardized and structured assessments, which may be observation-based or direct, for each child that provide ongoing information to evaluate the child's developmental level and progress in outcomes aligned to the goals described in the Head Start Early Learning Child Outcomes Framework: Ages Birth to Five. Such assessments must result in usable information for teachers, home visitors, and parents and be conducted with sufficient frequency to allow for individualization within the program year.

(2) A program must regularly use information from paragraph (b)(1) of this section along with informal teacher observations and additional information from family and staff, as relevant, to determine a child's strengths and needs, inform and adjust strategies to better support individualized learning and improve teaching practices in center-based and family child care settings, and improve home visit strategies in home-based models.

1302.60 Full participation in program services and activities.

A program must ensure enrolled children with disabilities, including but not limited to those who are eligible for services under IDEA, and their families receive all applicable program services delivered in the least restrictive possible environment and that they fully participate in all program activities.

8. Emerging Language & Literacy

The path to language and literacy begins with interactions between adults and young children. In quality programs, teachers build language experiences within daily routines. When possible, teachers speak the primary or home language of the children. They respond to the sounds made by infants and toddlers and use words to give meaning to what children are expressing. Teachers maintain a balance between listening to and talking with each child. Books and other print materials are available throughout the classroom. Shared reading is enjoyed daily and families are encouraged to read with their children at home. Songs, nursery rhymes, finger plays, and pre-writing materials promote the development of language and literacy.

Related Head Start Performance Standards

1302.30 (Education and Child Development Program Services) Purpose.

All programs must provide high-quality early education and child development services, including for children with disabilities that promote children's cognitive, social, and emotional growth for later success in school. A center-based or family child care program must embed responsive and effective teacher-child interactions. A home-based program must promote secure parent-child relationships and help parents provide high-quality early learning experiences. All programs must implement a research-based curriculum, and screening and assessment procedures that support individualization and growth in the areas of development described in the Head Start Early Learning Outcomes Framework: Ages Birth to Five and support family engagement in children's learning and development. **A program must deliver developmentally, culturally, and linguistically appropriate learning experiences in language, literacy, mathematics, social and emotional functioning, approaches to learning, science, physical skills, and creative arts.**

1302.31 Teaching and the learning environment.

(b) **Effective teaching practices.**
(1) Teaching practices must:
(i) Emphasize nurturing and responsive practices, interactions, and environments that foster trust and emotional security; **are communication and language rich;** promote critical thinking and problem-solving; social, emotional, behavioral, and language development; provide supportive feedback for learning; motivate continued effort; and support all children's engagement in learning experiences and activities;

1302.90 Personnel policies.

(d) **Communication with dual language learners and their families.**
(2) If a majority of children in a class or home-based program speak the same language, at least one class staff member or home visitor must speak such language.

9. Family Engagement & Cultural Continuity

Families are essential participants in quality programs for infants and toddlers. They provide invaluable information about their children to teachers and center staff. Teachers communicate each day with families, welcome them into their child's classroom, and organize events that include family members. Families are informed about and have opportunities to influence the curriculum and program decisions. Programs incorporate practices that reflect the values, beliefs, cultures, and communities of the families they serve.

Related Head Start Performance Standards

1302.34 Parent and family engagement in education and child development services.

(a) **Purpose.** Center-based and family child care programs must structure education and child development services to recognize parents' roles as children's lifelong educators, and to encourage parents to engage in their child's education.

(b) **Engaging parents and family members.** A program must offer opportunities for parents and family members to be involved in the program's education services and implement policies to ensure:

(1) The program's settings are open to parents during all program hours;

(2) Teachers regularly communicate with parents to ensure they are well-informed about their child's routines, activities, and behavior;

(3) Teachers hold parent conferences, as needed, but no less than two times per program year, to enhance the knowledge and understanding of both staff and parents of the child's education and developmental progress and activities in the program;

(4) Parents have the opportunity to learn about and to provide feedback on selected curricula and instructional materials used in the program;

(5) Parents and family members have opportunities to volunteer in the class and during group activities;

(6) Teachers inform parents, about the purposes of and the results from screenings and assessments and discuss their child's progress;

(7) Teachers, except those described in paragraph (b)(8) of this section, conduct at least two home visits per program year for each family, including one before the program year begins, if feasible, to engage the parents in the child's learning and development, except that such visits may take place at a program site or another safe location that affords privacy at the parent's request, or if a visit to the home presents significant safety hazards for staff; and,

(8) Teachers that serve migrant or seasonal families make every effort to conduct home visits to engage the family in the child's learning and development.

1302.50 Family engagement.

(b) **Family engagement approach.** A program must:

(1) Recognize parents as their children's primary teachers and nurturers and implement intentional strategies to engage parents in their children's learning and development and support parent-child relationships, including specific strategies for father engagement;

(2) Develop relationships with parents and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of families in the program and community;

(4) Provide parents with opportunities to participate in the program as employees or volunteers;

(5) Conduct family engagement services in the family's preferred language, or through an interpreter, to the extent possible, and ensure families have the opportunity to share personal information in an environment in which they feel safe;

1302.51 Parent activities to promote child learning and development.

(a) A program must promote shared responsibility with parents for children's early learning and development, and implement family engagement strategies that are designed to foster parental confidence and skills in promoting children's learning and development. These strategies must include:

(1) Offering activities that support parent-child relationships and child development including language, dual language, literacy, and bi-literacy development as appropriate;

(2) Providing parents with information about the importance of their child's regular attendance, and partner with them, as necessary, to promote consistent attendance; and,

(3) For dual language learners, information and resources for parents about the benefits of bilingualism and bi-literacy.

10. Comprehensive Support Services

High quality child care serves as a protective factor for young children and plays a pivotal role in children's well-being. Child care professionals partner with families in careful observation of each child's development and recognize signs of stress and adversity. Specific protocols are established for routine developmental screenings and ongoing comprehensive assessment. Trauma-informed practices are in place to build in strategies and targeted supports for infants, toddlers, and families. Teachers and program administrators work with consultants and community agencies to ensure families are linked to social services, health services, therapeutic interventions, and early childhood mental health consultation, as needed. Ongoing communication and multidisciplinary support teams ensure continuity of services across settings, enrich child development, and promote positive outcomes that support and strengthen families.

Related Head Start Performance Standards

1302.46 Family support services for health, nutrition, and mental health.

(a) **Parent collaboration.** Programs must collaborate with parents to promote children's health and well-being by providing medical, oral, nutrition and mental health education support services that are understandable to individuals, including individuals with low health literacy.

(2) A program must provide ongoing support to assist parents' navigation through health systems to meet the general health and specifically identified needs of their children and must assist parents:

(i) In understanding how to access health insurance for themselves and their families, including information about private and public health insurance and designated enrollment periods;

(ii) In understanding the results of diagnostic and treatment procedures as well as plans for ongoing care; and,

(iii) In familiarizing their children with services they will receive while enrolled in the program and to enroll and participate in a system of ongoing family health care.

1302.50 Family engagement.

(a) **Purpose.** A program must integrate parent and family engagement strategies into all systems and program services to support family well-being and promote children's learning and development. Programs are encouraged to develop innovative two-generation approaches that address prevalent needs of families across their program that may leverage community partnerships or other funding sources.

(b) **Family engagement approach.** A program must:

(3) Collaborate with families in a family partnership process that identifies needs, interests, strengths, goals, and services and resources that support family well-being, including family safety, health, and economic stability;

(6) Implement procedures for teachers, home visitors, and family support staff to share information with each other, as appropriate and consistent with the requirements in part 1303 subpart C, of this chapter; FERPA; or IDEA, to ensure coordinated family engagement strategies with children and families in the classroom, home, and community.

1302.52 Family partnership services.

(a) **Family partnership process.** A program must implement a family partnership process that includes a family partnership agreement and the activities described in this section to support family well-being, including family safety, health, and economic stability, to support child learning and development, to provide, if applicable, services and supports for children with disabilities, and to foster parental confidence and skills that promote the early learning and development of their children. The process must be initiated as early in the program year as possible and continue for as long as the family participates in the program, based on parent interest and need.

(b) **Identification of family strengths and needs.** A program must implement intake and family assessment procedures to identify family strengths and needs related to the family engagement outcomes as described in the Head Start Parent Family and Community Engagement Framework, including family well-being, parent-child relationships, families as lifelong educators, families as learners, family engagement in transitions, family connections to peers and the local community, and families as advocates and leaders.

(c) **Individualized family partnership services.** A program must offer individualized family partnership services that:

(1) Collaborate with families to identify interests, needs, and aspirations related to the family engagement outcomes described in paragraph (b) of this section;

(2) Help families achieve identified individualized family engagement outcomes;

(3) Establish and implement a family partnership agreement process that is jointly developed and shared with parents in which staff and families to review individual progress, revise goals, evaluate and track whether identified needs and goals are met, and adjust strategies on an ongoing basis, as necessary, and;

(4) Assign staff and resources based on the urgency and intensity of identified family needs and goals.

(d) **Existing plans and community resources.** In implementing this section, a program must take into consideration any existing plans for the family made with other community agencies and availability of other community resources to address family needs, strengths, and goals, in order to avoid duplication of effort.

1302.53 Community partnerships and coordination with other early childhood and education programs.

(a) **Community partnerships.**

(1) A program must establish ongoing collaborative relationships and partnerships with community organizations such as establishing joint agreements, procedures, or contracts and arranging for onsite delivery of services as appropriate, to facilitate access to community services that are responsive to children's and families' needs and family partnership goals, and community needs and resources, as determined by the community assessment.

(2) A program must establish necessary collaborative relationships and partnerships, with community organizations that may include:

(i) Health care providers, including child and adult mental health professionals, Medicaid managed care networks, dentists, other health professionals, nutritional service providers, providers of prenatal and postnatal support, and substance abuse treatment providers;

(ii) Individuals and agencies that provide services to children with disabilities and their families, elementary schools, state preschool providers, and providers of child care services;

(iii) Family preservation and support services and child protective services and any other agency to which child abuse must be reported under state or tribal law;

(iv) Educational and cultural institutions, such as libraries and museums, for both children and families;

(v) Temporary Assistance for Needy Families, nutrition assistance agencies, workforce development and training programs, adult or family literacy, adult education, and post-secondary education institutions, and agencies or financial institutions that provide asset-building education, products and services to enhance family financial stability and savings;

(vi) Housing assistance agencies and providers of support for children and families experiencing homelessness, including the local educational agency liaison designated under section 722(g)(1)(J)(ii) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.);

(vii) Domestic violence prevention and support providers; and,

(viii) Other organizations or businesses that may provide support and resources to families.

(b) **Coordination with other programs and systems.** A program must take an active role in promoting coordinated systems of comprehensive early childhood services to low-income children and families in their community through communication, cooperation, and the sharing of information among agencies and their community partners, while protecting the privacy of child records in accordance with subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws.

1302.62 Additional services for parents (of children with disabilities).

(a) **Parents of all children with disabilities.**

(1) A program must collaborate with parents of children with disabilities, including but not limited to children eligible for services under IDEA, to ensure the needs of their children are being met, including support to help parents become advocates for services that meet their children's needs and information and skills to help parents understand their child's disability and how to best support the child's development;
(2) A program must assist parents to access services and resources for their family, including securing adaptive equipment and devices and supports available through a child's health insurance or other entities, creating linkages to family support programs, and helping parents establish eligibility for additional support programs, as needed and practicable.

1302.70 Transitions from Early Head Start.

(a) **Implementing transition strategies and practices**. An Early Head Start program must implement strategies and practices to support successful transitions for children and their families transitioning out of Early Head Start.
(b) **Family collaborations.** A program must collaborate with parents of Early Head Start children to implement strategies and activities that support successful transitions from Early Head Start and, at a minimum, provide information about the child's progress during the program year and provide strategies for parents to continue their involvement in and advocacy for the education and development of their child.
(c) **Early Head Start and Head Start collaboration.** Early Head Start and Head Start programs must work together to maximize enrollment transitions from Early Head Start to Head Start, consistent with the eligibility provisions in subpart A, and promote successful transitions through collaboration and communication.
(d) **Transition services for children with an IFSP.** A program must provide additional transition services for children with an IFSP, at a minimum, as described in subpart F of this part.

[1] U.S. Department of Health and Human Services, Administration for Children and Families. (2016). *Head Start program performance standards: 45CFR Chapter XIII RIN 0970-AC63.* Washington, DC: Office of Head Start.