



# Council of Three Rivers American Indian Center - Early Head Start: Onboarding Handbook for Teachers

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# Background Information

## What is the Council of Three Rivers American Indian Center (COTRAIC)?

- ❖ Founded in 1972, focused on dispersed Eastern Indigenous Peoples
- ❖ Expanded to include people in low socioeconomic status (SES) in Pittsburgh area
- ❖ Programs include: Elders Program, Food Pantry, Native American Employment & Training Program



## What is Early Head Start (EHS)?

- ❖ Federally-funded programs that serve infants and toddlers under the age of 3 and pregnant women
- ❖ EHS programs provide intensive, comprehensive child development and family support services to low-income families

# COTRAIC - EHS and the Community

## What is the Mission of COTRAIC?

- ❖ “To promote the socio-economic development of the Native American community and others who experience similar types of economic difficulties in the Greater Pittsburgh metropolitan area.”
- ❖ EHS partners with many child care centers to enhance their services. As part of this comprehensive network, EHS puts into practice creating high quality, seamless services for children and their families with three COTRAIC-owned classrooms in the Pittsburgh area.



# Roles at COTRAIC - EHS

## Home Visitors

- ❖ Meet with child and parent at home on a weekly basis
- ❖ Craft lesson plans, do teaching observations to track progress
- ❖ Encourage guardian participation in lesson, provide resources

## Child Care Liaisons

- ❖ Visit child care centers once a month
- ❖ Meet with program directors and teachers to ensure compliance with EHS curriculum, provides classroom materials
- ❖ Ensure paperwork is done for each child in program

## Family Support Specialists

- ❖ Meet with families once a month to create goals together
- ❖ These can include financial, educational, and family focused goals
- ❖ Find additional outside resources and help with referrals

# Finding the Focus: What is the need of the site?

## Difficulties in Expansion

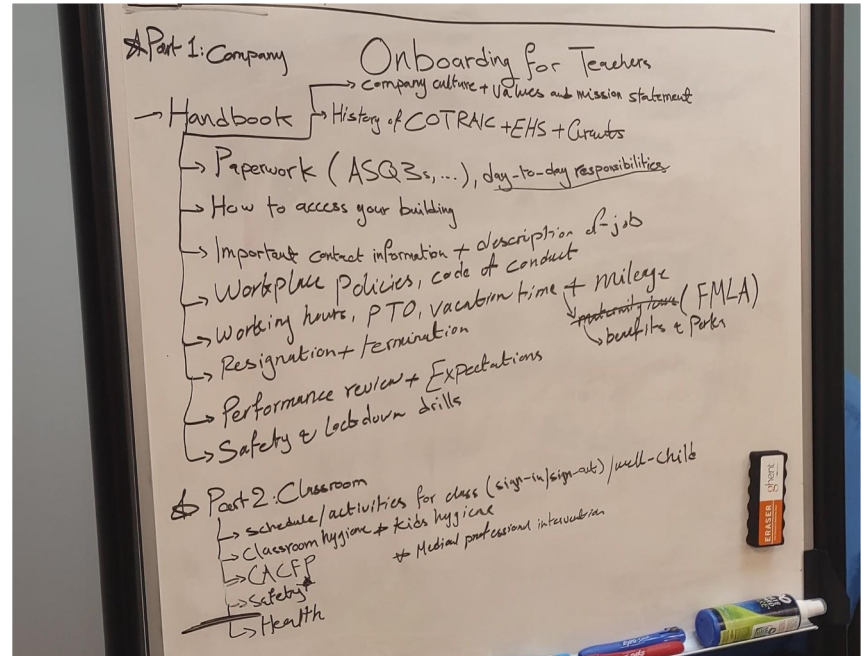
- ❖ Onboarding process does not exist for many positions
- ❖ Problems with specific direction of job tasks and expectations

## Presented with a Need

- ❖ Asked to work on a staff onboarding handbook
- ❖ Brainstormed what should be included
- ❖ Focused down from general onboarding to specific onboarding

## Solution: an Onboarding Handbook for COTRAIC EHS Teachers

- ❖ Interviewed management on procedural inclusions
- ❖ Interviewed current teachers at ALL child care centers about onboarding process






# What Is in the Staff Handbook?

Introduction  
Organization Policies  
Classroom Policies  
Health Education  
Resources



## Goals of Staff Handbook

- ❖ Clarify important organization policies
  - ❖ Streamline classroom policies across all three classroom sites
  - ❖ Provide a resource for other areas of concern
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# Section I: Introduction

Examples:

- ❖ Mission Statement
- ❖ History of COTRAIC
- ❖ History of Early Head Start
- ❖ Grants



# Section II: Organization Policies

Examples:

- ❖ Paperwork Expectations
- ❖ Day to Day Responsibilities
- ❖ Building Access
- ❖ Workplace Policies/Code of Conduct





# Section III: Classroom Policies

Examples:

- ❖ Classroom Schedule
- ❖ Sign in/Sign out Procedures
- ❖ Lesson Planning
- ❖ Teaching Strategies Gold
- ❖ Ages and Stages Questionnaire (ASQs)



# Example: Ages and Stages Questionnaire (ASQs)

## How to Screen with ASQ-3

### Step 1: Try the items

- Teachers complete the items of the questionnaire in conjunction with the parent.
- Be sure the correct age interval is being used.

The image shows a screenshot of the ASQ-3 questionnaire interface. A yellow box at the top contains the text: "STEP 1: TRY THE ITEMS. Parents can easily try activities with their child . . . and then check the box that best describes what the child can do." Green arrows point from this box to the questionnaire items. A white box on the right contains the text: "NEW 2- AND 9-MONTH QUESTIONNAIRES! Now choose from 21 questionnaires to screen children from 1-66 months." A green circle with the word "NEW" is next to it. The questionnaire itself is titled "ASQ-3 2 Month Questionnaire page 3 of 5". It has two sections: "GROSS MOTOR" and "FINE MOTOR". Each section has a "GROSS MOTOR TOTAL" or "FINE MOTOR TOTAL" column. The items are numbered and have radio buttons for "YES", "SOMETIMES", and "NOT YET".

	YES	SOMETIMES	NOT YET	
<b>GROSS MOTOR</b> (continued)				
6. After holding her head up while on her tummy, does your baby lay her head back down on the floor, rather than let it drop or fall forward?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
<b>GROSS MOTOR TOTAL</b>				—
<b>FINE MOTOR</b>				
1. Is your baby's hand usually tightly closed when he is awake? (If your baby cannot do this, that's all right. Check "Not Yet".)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
<b>FINE MOTOR TOTAL</b>				—

Ages & Stages Questionnaires® and ASQ® are registered trademarks of and the ASQ logos are owned by Paul H. Brookes Publishing Co., Inc. Copyright © 2018 Paul H. Brookes Publishing Co. All rights reserved.

### Step 2: Score the questionnaire

#### The Scoring System

- Yes = 10 points, Sometimes = 5 points, Not Yet = 0 points
- Transfer scores to Information Summary page

## Goals

- Provides reliable developmental and social-emotional screening for children between birth and age 6.
- Teachers are required to complete (up to 16) ASQ-3s for their students, on a frequent basis.
- Often a confusing task because they receive training only once during orientation.

## Section IV: Health Education



Examples:

- ❖ Well-Child
- ❖ Importance of Dental Exams
- ❖ Importance of Immunizations
- ❖ Recognizing Common Infectious Diseases

# Example: Recognizing Common Infectious Diseases

## Goals

- ❖ Familiarization of easily transmissible diseases in classroom
- ❖ Quick identification of health concern
- ❖ Visualization of presentation on black skin when relevant

Disease Transmission →

Symptoms →

Timeline →

Treatment →

Reporting →

Visualization →

### Chickenpox

Chickenpox, caused by the varicella-zoster virus, is an easily transmissible disease. It spreads through the air and via direct contact (touching), and is contagious 1 to 2 days before the signature rash appears until after the blisters have crusted over. It takes about 2 weeks after exposure to a person with chickenpox for someone to develop chickenpox. Symptoms include the rash (present all over the body), tiredness, headache, and fever. Complications of the disease could include infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection of the lungs), and in severe cases, death. It takes about 2 weeks for the infection to clear, which is signaled when all the blisters have crusted over. Chickenpox is prevented by getting the Chickenpox (Varicella) vaccine, which comes in two doses.

The treatment focuses on relieving the itching symptoms, which is commonly done by giving uncooked oatmeal baths, or by applying calamine anti-itching lotion (which can be found at a local drug store). Keeping the child's fingernails trimmed short will also help keep kids from scratching, but having them wear mittens or socks over their hands helps and will limit scarring.

For fever, it is important to use *non-aspirin* medications, like acetaminophen (Tylenol) or ibuprofen (Advil). Aspirin medications combined with chickenpox have been shown to be associated with a severe disease called Reye's syndrome, which affects the liver and brain and can cause death.

Below is a visual of chickenpox. If a case of chickenpox is found, the child care facility must notify all staff members and parents/guardians of the outbreak.



### \*Diseases Included:

Chickenpox, Cold, Conjunctivitis (Pink Eye), Hand Foot & Mouth Disease, Hepatitis B, Influenza, Measles, Meningococcal ACWY, Mumps, Rotavirus, Rubella, Tetanus, Whooping Cough, Ear Infections, Diaper Rash

# Section V: Resources

- ❖ Important Contact Information
- ❖ Glossary of Terms
- ❖ Resource Guide for Websites



# Healthy People 2030 Relevant Objectives

## Child & Adolescent

Promote healthy development for children and adolescents

## Preventative Care

Help people get recommended preventative health care services

## Infants

Improve health and safety of infants

## Education Access & Equality

Increase educational opportunities and help children and adolescents do well in school

## Schools

Promote health, safety and learning in school settings

## Workplace

Promote the health and safety of people at work

## Vaccination

Increase vaccination rates

## Infectious Disease

Reduce rates of infectious disease and improve health for people with chronic infections

# Evaluating the Teachers Onboarding Handbook

## Goals of the Handbook

- ❖ Clarify important organization policies
- ❖ Streamline classroom policies across all three classroom sites
- ❖ Provide a resource for other areas of concern

## How to Evaluate the Goals

- ❖ Feedback from current teachers
- ❖ If they use it, when they use it, what sections are helpful, what they still want clarification on
- ❖ Can be in the form of a survey

## Future Work

- ❖ Creating an onboarding handbook for other positions by relying on this version as a skeleton.
- ❖ Self-Care Section
- ❖ Examples of ChildPlus
- ❖ Emphasis on the Creative Curriculum for lesson planning

# Summary

## Our Experience Working at COTRAIC EHS

- ❖ Appreciation for the work done
- ❖ What we learned from different employees
- ❖ What we learned about our community
- ❖ What we learned from working with each other



## What I Learned: Yousuf's Quote

“The experiences I have had at COTRAIC have been invaluable. Having recently moved to Pittsburgh, I had the opportunity to engage with the different communities in the greater Pittsburgh area and their history. I have learned about the hardships and disadvantages that people from these communities face, and the numerous ways we can help. I am grateful for being able to feel more connected to this city.”

## What I Learned: Larisa's Quote

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“I learned so much from shadowing and working with the various COTRAIC employees, but the common inspiration across all positions was the selfless dedication they have to their work. Being able to directly speak with parents and learning the positive impact made on their lives was humbling. Learning the importance of teamwork in interdisciplinary work was great, and I aim to use what I've learned with BTG in my future endeavors.”

# Thank You Slide

- ❖ We would like to thank our supervisors, Margot Russell (M. Ed.) and Debbie Gallagher (M. Ed.), for continuously supporting us and helping us learn about the organization, the Hazelwood community and how Early Head Start functions. We would also like to thank the amazing staff at COTRAIC for allowing us to be a part of them and teaching us about their roles and services.
- ❖ In addition, we would like to give a shoutout to Dr. John Maier, our faculty mentor, for providing us with guidance on child development and screening.
- ❖ Lastly, we would like to thank Thistle, Brandi, Antonio and the School of Public Health for allowing us this wonderful opportunity to help our community. We truly appreciate all that you do to ensure we have a great experience!