

**Chickasaw Nation Head Start
Subpart C: Community Partnerships Service Plan
1304.41**

| Performance Standards | Action Steps | Person/Team Responsible | Time Frame | Documentation and Resource Indicators | Resources Needed | Outcomes |
|---|---|--|---|---|---|--|
| <p>1304.41 (a)(1) (a) Partnerships</p> <p>(1) Grantee and delegate agencies must take an active role in community planning to encourage strong communication, cooperation, and the sharing of information among agencies and their community partners and to improve the delivery of community services to children and families in accordance with the agency's confidentiality policies. Documentation must be maintained to reflect the level of effort undertaken to establish community partnerships (see 45 CFR 1304.51 for additional planning requirements).</p> | <p>The Chickasaw Nation Head Start program will collaborate with partners in their tribal community agencies in order to provide the highest level of services for children and families.</p> | <p>Parents, Teacher, Teacher's Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Enrollment By 2nd Visit</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Staff to establish a friendly relationship started with families and that each head start families have their Family Partnership Agreement Form completed and their Family Goal Plan developed. The staff provided the highest level of services and appropriate resources to meet their needs.</p> |

| | | | | | | |
|---|---|--|---|---|---|---|
| <p>1304.41 (a)(2)</p> <p>(2) Grantee and delegate agencies must take affirmative steps to establish ongoing collaborative relationships with community organizations to promote the access of children and families to community services that are responsive to their needs, and to ensure that Early Head Start and Head Start programs respond to community needs, including:</p> | <p>Chickasaw Nation head Start will collaborate with the local agencies to establish a network of services for children and families Chickasaw Nation will develop community partnerships with local and tribal agencies, including but not limited to:</p> | <p>Parents, Teacher, Teacher's Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>yearly</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>To establish and maintain an ongoing collaboration with community organization for our families.</p> |
| <p>1304.41 (a) (2)(i)(ii) & (iii)</p> <p>Health care providers such as clinics, physicians, dentists, and other health professionals;</p> <p>(ii) Mental health providers;</p> <p>(iii) Nutritional service providers;</p> | <p>•Health Care Providers</p> <p>•Mental Health Providers</p> <p>•Nutrition Service Providers</p> | <p>Parents, Teacher, Teacher's Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Enrollment The Entire Program Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Provided some resource listings to each families in their Parent Handbook for the following, also the Resource Book in each classroom:</p> <ul style="list-style-type: none"> - Health Care Providers - Mental Health Providers - Nutrition Service Providers |

| | | | | | | |
|--|---|--|---|---|---|--|
| <p>1304.41(a)(2)(iv)</p> <p>(iv) Individuals and agencies that provide services to children with disabilities and their families (see 45 CFR 1308.4 for specific service requirements);</p> | <ul style="list-style-type: none"> •Disability Services | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Enrollment The Entire Program Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Provided resource listings and Resource Book in the classrooms for disability children and their families and to assist that these services are in the process of being provided.</p> |
| <p>1304.41(a)(2)(v) & (vi)</p> <p>(v) Family preservation and support services;</p> <p>(vi) Child protective services and any other agency to which child abuse must be reported under State or Tribal law;</p> | <p>Child Protective services and any other other agency to which child abuse must be reported to tribal law and under state law</p> <ul style="list-style-type: none"> •Family Preservation and Support Services •Child Protection Services/Related | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Enrollment The Entire Program Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Provided families with resources and making referral to the CN Family Preservation Program and provide support services.</p> |
| <p>1304.41(a)(2)(vii)</p> <p>(vii) Local elementary schools and other educational and cultural institutions, such as libraries and museums, for both children and families;</p> | <ul style="list-style-type: none"> •Local Schools and Education Programs •Public Libraries •Local/Tribal Museums •Cultural Institutes | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Enrollment The Entire Program Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Developed and signed inter-agency or MOU Agreement Local, State, Tribal resources/agencies.</p> |

| | | | | | | |
|---|---|---|--------------------------------|---|---|--|
| <p>1304.41(a)(2)(viii)</p> <p>(viii) Providers of child care services; and</p> <p>1304.41(a)(2)(ix)</p> <p>(ix) Any other organizational or business that may provide support and resources to families</p> | <p>•Childcare Providers</p> | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>The Entire Program Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Provided each families needing child care assistance or other child resources with a local, state, & tribal applications.</p> |
| <p>1304.41(a)(3)</p> <p>(3)Grantee and delegate agencies must perform outreach to encourage volunteers from the community to participate in Early Head Start and Head Start programs.</p> | <p>The Chickasaw Nation Head Start Program will encourage outreach, recruitment, and training efforts and will be continuous within the community for community volunteers.</p> | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal)</p> | <p>Year-Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Provided community partnership with information on our outreach program, recruiting, and training.</p> |
| <p>1304.41(a)(4)</p> <p>(4) To enable the effective participation of children with disabilities and their families, grantee and delegate agencies must make specific efforts to develop interagency agreements with local education agencies (LEA) and other</p> | <p>The Chickasaw Nation will develop interagency agreements with local education agencies for disability families.</p> | <p>Parents, Teacher, Teacher’s Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, & Tribal School)</p> | <p>Enrollment Year-Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Received signed Inter-Agencies agreements and MOU from each agencies and placing them in binders.</p> |

| | | | | | | |
|--|--|--|--------------------------------|---|---|---|
| <p>within the grantee and delegate agency's service area (see 45 CFR 1308.4(h) for specific requirements concerning interagency agreements).</p> | | | | | | |
| <p>1304.41(b) (b) Advisory committees</p> <p>Each grantee directly operating an Early Head Start and each delegate agency, must establish and maintain a Health Services Advisory Committee which includes Head Start parents, professionals, and other volunteers from the community. Grantee and delegate agencies also must establish and maintain such other service advisory committees as they deem appropriate to address program service issues such as community partnerships and to help agencies respond to community needs.</p> | <p>The Chickasaw Nation Head Start program will establish and maintain the Health Service Advisory Committee and Social Service Advisory Committee which will include Head Start Parents, Professionals and other volunteers from the community.</p> | <p>Parents, Teacher, Teacher's Assistant, Family Service Workers, Parent Involvement Manager, Disability Manager, Administrative Staff, & Community Agency Partnerships (Local, State, Tribal)</p> | <p>September Year-Year</p> | <p>Resource Book Family Partnership Agreement Form FPA Goal Plan Referral Form Family Contact Notes Individualized Education Plan Memoranda of Understanding Inter-Agency Agreement</p> | <p>Resource Book Updated yearly FPA FPA Goal Plan Referral Form IEP MOU Inter-agency Agreement Form</p> | <p>Established and maintained a quartly Advisory Committees made-up of parents, staff, and community partners by providing a reminders of meetings, agenda, sign-in sheet, and minutes.</p> |

| | | | | | | |
|--|--|--|--|--|--|--|
| 1304.41(c) (1)(i)(ii) (iii) & (iv) See Transition Manager's Service Plan | | | | | | |
| 1304.41(c)(2) See Transition Manager's Service Plan | | | | | | |
| 1304.41(c)(3) See Transition Manager's Service Plan | | | | | | |