Appendix A

Definitions of Terms Used in Comprehensive Assessment Systems and Ongoing Child Assessment

Accommodations: Adjustments or changes in assessment procedures to obtain more accurate information. Examples include administering the assessment in a child's home language or providing additional response time for a child with a disability (Bodrova & Leong, 2018).

Assessment: Processes associated with gathering information to make informed decisions about children's development and learning (McLean et al., 2014).

Assessment instrument: Tests and tools such as rating scales, observation systems or checklists, or other instruments or devices that measure characteristics of programs, classrooms, or children (Snyder, McLean, & Bailey, 2014b).

Authentic assessment: Observing children during typically occurring activities and routines to gather information about children's development and learning (Snyder et al., 2014a).

Bias: Characteristics of an assessment that unfairly favor a child or group of children based on factors such as cultural or linguistic diversity, gender, or disability status (Bodrova & Leong, 2018).

Comprehensive assessment system: "[A] coordinated and comprehensive system of multiple assessments—each of which is valid and reliable for its specified purpose and for the population with which it will be used—that organizes information about the process and context of young children's learning and development to help Early Childhood Educators make informed instructional and programmatic decisions. A comprehensive assessment system includes, at a minimum—(a) Screening Measures; (b) Formative Assessments; (c) Measures of Environmental Quality; and (d) Measures of the Quality of Adult-Child Interactions" (U.S. Department of Education, 2011, http://www.ed.gov/early-learning/elc-draft-summary/definition).

Criterion-referenced assessment: A type of assessment that focuses on predetermined criteria or standards. Items on the assessment often are arranged sequentially or hierarchically. The assessment is often related to curricular content, goals, or early learning standards, but is not explicitly linked or aligned with a specific curriculum see Curriculum-based assessment; (Snyder et al., 2014a).

Curriculum-based assessment: A special type of criterion-referenced assessment that focuses on content mastered in a curriculum. The items on the assessment instrument often are arranged sequentially or hierarchically. There is typically a detailed scope and sequence of item content on the assessment. The content is explicitly aligned with a curriculum (Snyder et al., 2014). Examples include Teaching Strategies Gold (Heromen et al., 2010), which is linked to the Creative Curriculum (Dodge et al., 2002); the Assessment, Evaluation, and Programming System (Bricker, 2002); or the Hawaii Early Learning Profile (HELP; Parks, 1995).

Data: Factual information used as a basis for reasoning, discussion, or calculation.

Diagnostic assessment: To gather information about an individual child's strengths and needs and to determine whether the child has a delay in one or more areas of development and learning (McLean, 2014). Diagnostic assessment, often referred to as evaluation, helps determine whether a child is eligible for services and supports under the Individuals with Disabilities Education Act (IDEA) or whether the child has a diagnosed condition (e.g., autism spectrum disorder, Down syndrome).

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Direct assessment: These assessments use structured tasks or activities. The tasks come with specific administration instructions. Checklists or scoring rubrics are used to document children's responses to the task. Direct assessments can include standardized, norm-referenced assessment instruments, rating scales, and general outcome measurement.

Documentation: Gathering evidence and artifacts of children's learning, which can include work samples, observation notes, anecdotal records, and transcripts of children's conversations (Bodrova & Leong, 2018).

Early learning and development foundations (ELDF), early learning and development standards (ELDS), or early learning guidelines (ELG): These state what children are expected to know or be able to do. They are often organized chronologically under developmental or learning domains such as perceptual, motor, and physical development, social emotional development, language and literacy, cognitive, and approaches to learning (Scott-Little et al., 2003).

Fidelity: The extent to which assessment instruments and assessment processes are implemented as intended. Examples include administering items in a direct assessment as described in the administration manual or ensuring that staff complete all steps related to using a rubric to score a child's work sample. Curriculum fidelity refers to the extent to which staff implement the scope and sequence of the curriculum as intended. This means implementing the content of the curriculum as outlined in the curriculum guide and using the lesson plans or instructional strategies as the curriculum developer intended.

Formative assessment: Collecting and using assessment data to tailor instruction to children's strengths and needs (Riley-Ayers, 2014).

Generalized outcome measurement (curriculum-based measurement): Brief, frequently administered probes of children's progress toward desired generalized outcomes (e.g., learning to communicate, early literacy skills, learning to move in the environment). These assessments provide information about children's status and progress in key skill indicators. These assessments also are known as individual growth and development indicators (IGDIs; Carta et al., 2010).

Normative sample: A group of children whose scores on an assessment instrument are used to develop data so staff can make relative comparisons between a child's or children's performance on the instrument (Bodrova & Leong, 2018).

Ongoing child assessment: The continuing process of observing, documenting, and interpreting progress, then determining when to adjust practices to better support children's development and learning (National Center on Quality Teaching and Learning, 2014).

Observation-based assessment: An approach to assessment based on education staff regularly observing and documenting children's knowledge and skills. Observation can be open-ended, such as when education staff observe children in everyday routines and activities and document what they observe. It also can be more structured, with a rating scale or rubric that education staff use to record what she or he observes (Bodrova & Leong, 2018). Observation-based assessment is a type of authentic assessment.

Outcome: Description of the knowledge or skills that a child is expected to demonstrate (e.g., language, social, math). Within Head Start, outcomes are specified in the ELOF (U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start, 2015).

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Portfolio: A collection of children's work samples and other learning evidence collected over time, which can be an important repository to inform ongoing child assessment (Bodrova & Leong, 2018).

Rating scale: A rating scale is like a checklist in that a list of skills and behaviors is included; however, it includes a qualitative component that offers choices about how well, how often, or how independently children demonstrate a behavior (Wolery & Ledford, 2014).

Reliability (reliable): The consistency or accuracy of assessment scores over time, raters, items, or people (AERA et al., 2014).

Screening: Brief standardized process that identifies concerns impacting children's development or learning. When staff identify concerns, they monitor children's development and learning more closely or refer children for diagnostic assessment (McLean, 2014).

Standardized, normative-referenced assessment instrument: A type of assessment instrument that evaluates a child's development and learning relative to a normative group or standardization sample. Staff use standardized materials and administration procedures and items on the assessment based on statistical criteria. Examples include the Test of Early Reading Ability (Reid et al., 2001), the Brigance Diagnostic Inventory of Early Development (Brigance, 1978), the Bayley Scales of Infant and Toddler Development (3rd ed., Bayley, 2006), or the Social Skills Improvement System Rating Scales (SSIS; Gresham & Elliott, 2008).

Summative assessment: Refers to an evaluation that is conducted at the end of a specific time to summarize children's learning toward desired outcomes (Bodrova & Leong, 2018).

Test: Refers to the presentation of a standard set of stimuli or questions and observations of responses to the stimuli or questions. Tests are one type of assessment instrument (Snyder, McClean, Bailey).

Validity (valid): Refers to evidence that supports the adequacy and appropriateness of inferences made or actions taken from scores derived from an assessment (AERA et al., 2014; Messick, 1993; Snow & Van Hemel, 2008).

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ONGOING CHILD ASSESSMENT PLANNING AND IMPLEMENTATION WORKSHEET

Planning	People	Timeline
1. Form a planning team to oversee the planning and implementation of a system of ongoing assessment. Members include program directors, education managers, coaches, a data coordinator, a disabilities coordinator, teaching and home visiting staff, and family engagement staff.		
2. Develop a process for ongoing child assessment, which includes collecting data, aggregating and analyzing data, and using and sharing data.		
3. Identify education teams who will complete training together and plan and implement ongoing assessment in classrooms, family child care homes, and home visitor caseloads.		

4. Develop a process for collecting data including:
 	
a. What to assess
    i. Select an assessment instrument and the process staff will follow to use the assessment tool
b. When to assess
    i. Plan the schedule and related assessment processes
c. How to assess
    i. Plan for and support observation strategies staff use in ongoing assessment, including anecdotal notes, checklists, work samples, videos
d. How to involve families in ongoing assessment
e. Strategies to ensure access to equipment needed, including computer, digital camera
f. Strategies for data entry and storage		

5. Analyze any previously collected data—examine results for subgroups of children and have focused conversations with the leadership team and key stakeholders.		

Planning	People	Timeline
6. Plan what to assess, how to assess and document, and where, when, and who should assess for each week.		
7. Ensure assessment in home language and/or English for children who are DLLs: **a.** Identify the children who are DLLs **b**. Identify a protocol for gathering information from families about the child's language dominance and background **c.** Establish a DLL assessment team to facilitate access to staff or interpreters who can provide culturally and linguistically appropriate ongoing assessment **d.** Ensure that any standardized or norm-referenced assessments have norms and procedures appropriate for children who are DLLs		

8. Ensure appropriate assessment for children with disabilities:
 	
a. Train all education staff to assess children with disabilities
   i. Review information in the IEP or IFSP
   ii. Break down IEP goals or IFSP outcomes for observation
   iii. Accommodations children need in the classroom or home environment
   iv. Engage and gather information from families
b. Supervise assessment of children with disabilities		

9. Develop protocols to engage with families and gather information about child preferences and typical functioning at home.		

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Planning	People	Timeline
Training		
10. Provide training for all staff who will conduct ongoing child assessment.		
11. Train supervisors, coaches, or child development specialists to visit each classroom, family child care provider, and home visitor regularly to observe and provide feedback on ongoing child assessment.		
12. Train supervisors to implement fidelity checks for ongoing child assessment and data entry.		
Collection		
13. Plan what to assess, how to assess and document, and where, when, and who should assess for each week.		
14. Check documentation collection weekly to track what observations have been completed.		
15. Enter data into a computer or other data organization system weekly.		
16. Monitor the data entry for each classroom and home visitor caseload.		
17. Monitor the fidelity of data collection for each classroom and home visitor caseload.		

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Aggregate	People	Timeline
18. Create or obtain data files of ongoing child assessment information and relevant variables to aggregate and analyze and disaggregate the data (program, classroom/teacher, or home-based setting/caregiver, or home visitor caseload with which the child is associated, assessment cycle with which the data are associated, age of child, DLL status, child with IFSP/IEP, years in program, etc.).		
19. Ensure the integrity of the data set that staff analyze.		
20. Evaluate progress toward ELOF indicators, ELDS, and school readiness goals by having focused conversations with the leadership team and other key stakeholders.		
21. Address questions the leadership team and other key stakeholders posed during the planning phase.		
22. Examine results for subgroups of children and have focused conversations with the leadership team and other key stakeholders.		

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Use & Share	People	Timeline
23. Use aggregated child data to inform decisions related to curricular scope and sequence, domains and subdomains from the ELOF, and school readiness domains.		
24. Use aggregated child data to inform decisions about assessment processes and instruments.		
25. Use aggregated child data to inform decisions about program improvement activities.		
26. Consider the 4As (accuracy, appealing, accessible, audience-specific) when developing strategies for sharing data with different stakeholders.		
27. Share program-level aggregated and disaggregated data with education staff so they understand how their ongoing child assessment data contributes to program-level data.		
28. Share program-level data with families and other key stakeholders so they are aware of the progress children are making toward desired outcomes and school readiness goals and to engage them in the assessment processes.		
29. Share aggregated child data and assessment fidelity data with program leaders to determine if or what overall changes need to occur.		
30. Share data with key stakeholders to support conversations about meeting the needs of children who are DLLs, have disabilities, are from different age groups, or represent other populations identified in your program.		

Appendix C
Ongoing Assessment for Children Who Are Dual Language Learners

The HSPPS address the unique challenges and opportunities of assessing children who are dual language learners (DLLs). The standards require that assessment of children who are DLLs include:

- Assessing language development in both the home language and English
- Determining the language staff will use to assess the child
- Using alternative culturally and linguistically responsive assessment practices when necessary
- Finding qualified staff or interpreters who speak the home language(s) of DLLs and their families
- Using valid and reliable assessment tools, when administered in children's home languages

These standards that ensure staff accurately assess children who are DLLs and that assessments provide useful information. Staff might tailor learning opportunities and teaching practices to promote each child's progress in culturally and linguistically responsive ways. The assessment standards apply to center-based and family child care settings and to home-based programs.

The HSPPS require that programs design and implement a coordinated approach that ensures the full and effective participation of children who are DLLs and their families (1302.101(b)(2)). This coordinated approach includes systematically and comprehensively addressing child and family needs. Ongoing assessment of children's progress is one way to ensure that they have meaningful access to the educational program and are ready for school.

Identify qualified, bilingual person(s) to assess in home language(s) and English

Whenever possible, Head Start programs are required to use qualified, bilingual staff or interpreters to conduct assessment in children's home languages and English. Your program needs to develop and implement effective hiring practices to acquire and retain qualified, bilingual staff or interpreters who are a match for the languages and cultures of children and families. It is important to create interpretation or translation guidelines to ensure high-quality and consistent ongoing assessment for children who are DLLs.

Find resources that provide guidelines for working with interpreters on pages 11 and 12 of **Screening Dual Language Learners in Early Head Start and Head Start : A Guide for Program Leaders.**

Some urban communities and school districts use qualified, bilingual/bicultural educational staff who can readily observe children in their home language and in English. This often happens in communities where only two languages—English and another language—are predominantly spoken (Spanish and English, Hebrew and English, Chinese and English, etc.). However, programs seldom have individual staff members with the necessary qualifications for many languages.

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Consider the need for additional bilingual/bicultural staff

Programs can create assessment teams to help implement ongoing assessments. The teams include staff members (e.g., education staff, family outreach workers, interpreters, etc.) who, together, have backgrounds in early childhood development and assessment, as well as proficient bilingual/bicultural skills. Assessment team members will need time to collaborate to plan for and conduct ongoing assessments and review assessment results.

Assessment teams with bilingual/bicultural members will also be helpful in meeting with families to gather information about each child's language background. As indicated earlier, it will be important to ask families about their child's language history and current language environments.

Interpreters will need time to learn about ongoing assessment procedures, review the assessment tool, and review interpretation etiquette with other team members. As a program leader, you need to determine if team members need additional training on dual language learning, working with interpreters, using the assessment instrument, collecting observations, or interpreting assessment results. Your program might consider collaborating with your school district or other community partners in early care and education. You can help each other find interpreters/translators and staff trainings related to second language acquisition or specific language assessment tools.

Remember! Assessing children who are DLLs requires a combination of staff skills.
- Cultural knowledge and language proficiency in the children's home language
- Knowledge and training in early childhood development
- Knowledge of early dual language learning
- Knowledge of the assessment instrument
- Training, experience, and professional development to help them use it with fidelity

Relevant Head Start Program Performance Standards for ongoing assessment of children who are DLLs

§1302.33(c) Characteristics of screenings and assessments.

(1) Screenings and assessments must be valid and reliable for the population and purpose for which they will be used, including by being conducted by qualified and trained personnel, and being age, developmentally, culturally and linguistically appropriate, and appropriate for children with disabilities, as needed.

(2) If a program serves a child who speaks a language other than English, a program must use qualified bilingual staff, contractor, or consultant to:

> (i) Assess language skills in English and in the child's home language, to assess both the child's progress in the home language and in English language acquisition;
> (ii) Conduct screenings and assessments for domains other than language skills in the language or languages that best capture the child's development and skills in the specific domain; and,
> (iii) Ensure those conducting the screening or assessment know and understand the child's language and culture and have enough skill level in the child's home language to accurately administer the screening or assessment and to record and understand the child's responses, interactions, and communications.

(3) If a program serves a child who speaks a language other than English and qualified bilingual staff, contractors, or consultants are not able to conduct screenings and assessments, a program must use an interpreter in conjunction with a qualified staff person to conduct screenings and assessments as described in paragraphs (c)(2)(i) through (iii) of this section.

(4) If a program serves a child who speaks a language other than English and can demonstrate that there is not a qualified bilingual staff person or interpreter, then screenings and assessments may be conducted in English. In such a case, a program must also gather and use other information, including structured observations over time and information gathered in a child's home language from the family, for use in evaluating the child's development and progress.

Appendix D
Ongoing Assessment for Children with Individualized Family Service Plans (IFSPs) or Individualized Education Programs (IEPs)

Head Start has a long history of fully including young children with disabilities in its infant and toddler and preschool programs. The Head Start Program Performance Standards (HSPPS) require that young children with disabilities have access to the full range of activities and services offered in Head Start programs. Programs are required to provide any necessary modifications to the environment, variations in instruction, and accommodations and supports to support the full participation of children with disabilities. Each Head Start program must ensure that at least 10% of its total funded enrollment is filled by children eligible for services under the Individuals with Disabilities Education Act (IDEA).

Programs need to take additional steps in planning and implementing ongoing child assessment for children with disabilities. Ongoing child assessment serves a different purpose than formal evaluation, which helps determine whether a child is eligible for early intervention or early childhood special education and related services (McLean, 2014).

Learn about the child's disability and typical functioning
Initially, the teaching team, which includes all staff who are working with the child meet to share and review all information about the child's typical functioning and area(s) of disability. Gather information from the family about the child's skills at home. If the family cannot attend a meeting with the teaching team, have someone from the team meet with the family at home to gather this information. Staff should have regular conversations with families to share information about the child's progress and discuss strategies for intervention at home and at the center.

Consider accommodations the child may need
Discuss accommodations that the child may need to function as independently as possible soon after the child begins to attend a program or receive home-based services. The accommodations a child needs will vary but may include the following:
- An augmentative or alternative communication system or device
- An alternative mode for written language
- Assistive technology to facilitate movement, fine motor, or adaptive skills
- Strategic positioning strategies
- Visual support
- Auditory support

What to assess
Planning ongoing assessment for children with disabilities will be different from planning for children without disabilities. Each child with an IEP or IFSP will have either goals from the IEP or outcomes from the IFSP that need to become part of ongoing assessment and instructional plans for the child. IEP goals have a 12-month timeline, and IFSP outcomes have a 6-month timeline. Staff need to break down goals into a series of smaller steps before beginning to observe for them. The early intervention or early childhood special education teacher assumes responsibility for breaking down goals or outcomes and working with the teacher or home visitor to plan observations.

Ongoing child assessment for goals, outcomes, or learning targets take place weekly. Staff teach these small steps during ongoing activities throughout the day. Children move to the next step in the sequence when they achieve the current step.

The IFSP or IEP usually describes accommodations. The teaching team will need implement them in the classroom or home environment. In addition to accommodations, staff may make environmental changes in lighting, sound, or the physical arrangement of spaces.

For more information, go to the adaptations gallery at the Desired Results Access Project website, sponsored by the California Department of Education, Special Education Division https://www.draccess.org/AdaptationsGallery.html.

How to assess

Write observable and measurable learning targets for children. Embed opportunities to practice these targets within ongoing activities throughout the day. Teachers can count the number of times the child performs the targeted behavior. Below is an example of data that staff collected by tallying an observable and measurable learning target for a 3-year-old named Jared.

Jared briefly shares a toy he is using during play time when an adult asks him for a turn.	
Monday	– – + +
Tuesday	– + –
Wednesday	+ + – + +
Thursday	+ + + + + +
Friday	+ + +

From: 15-Minute In-Service Suite: Ongoing Child Assessment

Observe his skills throughout the week. Staff discuss documentation together to determine whether a learning target has been met. When the child is ready to move toward the next learning target, teachers will include supports within the classroom context to assist the child and continue to observe and document. This data collection should occur within the context of ongoing child assessment as the teacher or home visitor observes and collects data related to the ongoing assessment tool they use.

Relevant Head Start Program Performance Standards for ongoing assessment of children with disabilities

§1302.14(b) Children eligible for services under IDEA.

(1) A program must ensure at least 10 percent of its total funded enrollment is filled by children eligible for services under IDEA, unless the responsible HHS official grants a waiver.

(2) If the requirement in paragraph (b)(1) of this section has been met, children eligible for services under IDEA should be prioritized for the available slots in accordance with the program's selection criteria described in paragraph (a) of this section.

§1302.61 Additional services for children.

(a) Additional services for children with disabilities. Programs must ensure the individualized needs of children with disabilities, including but not limited to those eligible for services under IDEA, are being met and all children have access to and can fully participate in the full range of activities and services. Programs must provide any necessary modifications to the environment, multiple and varied formats for instruction, and individualized accommodations and supports as necessary to support the full participation of children with disabilities. Programs must ensure all individuals with disabilities are protected from discrimination under and provided with all services and program modifications required by section 504 of the Rehabilitation Act (29 U.S.C. 794), the Americans with Disabilities Act (42 U.S.C. 12101 *et seq.*), and their implementing regulations.

Appendix E
Additional Resources

Accommodations or Adaptations for Children with IEPs or IFSPs

Children with Disabilities: Environmental Support
https://eclkc.ohs.acf.hhs.gov/children-disabilities/article/environmental-support

Desired Results Access Project: Desired Results Developmental Profile (2015) Adaptations Gallery
https://www.draccess.org/AdaptationsGallery.html

Early Childhood Technical Assistance Center: Outcomes FAQ
http://ectacenter.org/eco/pages/faqs.asp

Children Who Are Dual Language Learners

Child Screening & Assessment – Screening Dual Language Learners in Early Head Start and Head Start: A Guide for Program Leaders
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/screening-dual-language-learners.pdf

Dual Language Learners Program Assessment (DLLPA)
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/dllpa-child-screenings-508.pdf

Gathering and Using Language Information That Families Share: Collecting Information From the Families of Dual Language Learners (DLLs)
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/gathering-using-language-information.pdf

Inviting and Supporting Cultural Guides and Home Language Models Tip Sheet
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/dll-supporting-cultural-guides-language-models.pdf

Curriculum Fidelity

Implementation of Curriculum with Fidelity
https://eclkc.ohs.acf.hhs.gov/video/implementation-curriculum-fidelity

The Head Start Early Learning Outcomes Framework

https://eclkc.ohs.acf.hhs.gov/school-readiness/article/head-start-early-learning-outcomes-framework
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/elof-ohs-framework.pdf

(U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start, 2015)

Ongoing Child Assessment

15-Minute In-Service Suite: Ongoing Child Assessment
https://eclkc.ohs.acf.hhs.gov/child-screening-assessment/article/ongoing-child-assessment

Tailored Teaching: Teachers' Use of Ongoing Child Assessment to Individualize Instruction
https://www.acf.hhs.gov/sites/default/files/opre/40158_cpm_final_report_vol_i.pdf

Prepare, Collect, Aggregate and Analyze, and Use and Share

Measuring What Matters: Exercises in Data Management

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/measuring-what-matters-exercises-intro.pdf

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/measuring-what-matters-exercises-01.pdf

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/measuring-what-matters-exercises-02.pdf

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/measuring-what-matters-exercises-03.pdf

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/measuring-what-matters-exercises-04.pdf

Using Data to Tell a Story: Tailoring a Data Story for Different Audiences
https://eclkc.ohs.acf.hhs.gov/publication/using-data-tell-story-tailoring-data-story-different-audiences

Using a Data Narrative to Tell a Story
https://eclkc.ohs.acf.hhs.gov/publication/using-data-narrative-tell-story

Quality Data for Programs Serving Infants and Toddlers

What Is Quality Data for Programs Serving Infants and Toddlers?
https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/what-is-quality-data-infants-toddlers.pdf

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https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii

https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/hspps-final.pdf (U.S. Department of Health and Human Services, Administration for Children and Families, 2016)

§1302.14 Selection process.

(b) Children eligible for services under IDEA.

(1) A program must ensure at least 10 percent of its total funded enrollment is filled by children eligible for services under IDEA, unless the responsible HHS official grants a waiver.

(2) If the requirement in paragraph (b)(1) of this section has been met, children eligible for services under IDEA should be prioritized for the available slots in accordance with the program's selection criteria described in paragraph (a) of this section.

§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.

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(2) A program must use one or more research-based developmental standardized screening tools to complete the screening. A program must use as part of the screening additional information from family members, teachers, and relevant staff familiar with the child's typical behavior.

(3) If warranted through screening and additional relevant information and with direct guidance from a mental health or child development professional a program must, with the parent's consent, promptly and appropriately address any needs identified through:

> (i) Referral to the local agency responsible for implementing IDEA for a formal evaluation to assess the child's eligibility for services under IDEA as soon as possible, and not to exceed timelines required under IDEA; and,
> (ii) Partnership with the child's parents and the relevant local agency to support families through the formal evaluation process.

(4) If a child is determined to be eligible for services under IDEA, the program must partner with parents and the local agency responsible for implementing IDEA, as appropriate, and deliver the services in subpart F of this part.

(5) If, after the formal evaluation described in paragraph (a)(3)(i) of this section, the local agency responsible for implementing IDEA determines the child is not eligible for early intervention or special education and related services under IDEA, the program must:

> (i) Seek guidance from a mental health or child development professional to determine if the formal evaluation shows the child has a significant delay in one or more areas of development that is likely to interfere with the child's development and school readiness; and,
> (ii) If the child has a significant delay, partner with parents to help the family access services and supports to help address the child's identified needs.

> > (A) Such additional services and supports may be available through a child's health insurance or it may be appropriate for the program to provide needed services and supports under section 504 of the Rehabilitation Act if the child satisfies the definition of disability in 29 U.S.C. section 705(9)(b) of the Rehabilitation Act, to ensure that the child who satisfies the definition of disability in 29 U.S.C. 705(9)(b) of the Rehabilitation Act is not excluded from the program on the basis of disability.
> > (B) A program may use program funds for such services and supports when no other sources of funding are available.

(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 development level and progress in outcomes aligned to the goals described in the *Head Start Early Learning Outcomes Framework: Ages Birth to Five*. Such assessments must result in usable information for teachers, home visitors, and parents and be conducted with enough 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.

(3) If warranted from the information gathered from paragraphs (b)(1) and (2) of this section and with direct guidance from a mental health or child development professional and a parent's consent, a program must refer the child to the local agency responsible for implementing IDEA for a formal evaluation to assess a child's eligibility for services under IDEA.

(c) Characteristics of screening and assessment.

(1) Screenings and assessments must be valid and reliable for the population and purpose for which they will be used, including by being conducted by qualified and trained personnel, and being age, developmentally, culturally and linguistically appropriate, and appropriate for children with disabilities, as needed.

(2) If a program serves a child who speaks a language other than English, a program must use qualified bilingual staff, contractor, or consultant to:

> (i) Assess language skills in English and in the child's home language, to assess both the child's progress in the home language and in English language acquisition;
>
> (ii) Conduct screenings and assessments for domains other than language skills in the language or languages that best capture the child's development and skills in the specific domain; and,
>
> (iii) Ensure those conducting the screening or assessment know and understand the child's language and culture and have enough skill level in the child's home language to accurately administer the screening or assessment and to record and understand the child's responses, interactions, and communications.

(3) If a program serves a child who speaks a language other than English and qualified bi- lingual staff, contractors, or consultants are not able to conduct screenings and assessments, a program must use an interpreter in conjunction with a qualified staff person to conduct screenings and assessments as described in paragraphs (c)(2)(i) through (iii) of this section.

(4) If a program serves a child who speaks a language other than English and can demonstrate that there is not a qualified bilingual staff person or interpreter, then screenings and assessments may be conducted in English. In such a case, a program must also gather and use other information, including structured observations over time and information gathered in a child's home language from the family, for use in evaluating the child's development and progress.

(d) Prohibitions on use of screening and assessment data.

The use of screening and assessment items and data on any screening or assessment authorized under this subchapter by any agent of the federal government is prohibited for the purposes of ranking, comparing, or otherwise evaluating individual children for purposes other than research, training, or technical assistance, and is prohibited for the purposes of providing rewards or sanctions for individual children or staff. A program must not use screening or assessments to exclude children from enrollment or participation.

1302.102 Achieving program goals.

(c) Using data for continuous improvement.

> (1) A program must implement a process for using data to identify program strengths and needs, develop and implement plans that address program needs, and continually evaluate compliance with program performance standards and progress towards achieving program goals described in paragraph (a) of this section.

(2) This process must:

(i) Ensure data is aggregated, analyzed and compared in such a way to assist agencies in identifying risks and informing strategies for continuous improvement in all program service areas;

(ii) Ensure child-level assessment data is aggregated and analyzed at least three times a year, including for sub-groups, such as dual language learners and children with disabilities, as appropriate, except in programs operating fewer than 90 days, and used with other program data described in paragraph (c)(2)(iv) of this section to direct continuous improvement related to curriculum choice and implementation, teaching practices, professional development, program design and other program decisions, including changing or targeting scope of services; and,

(iii) For programs operating fewer than 90 days, ensures child assessment data is aggregated and analyzed at least twice during the program operating period, including for subgroups, such as dual language learners and children with disabilities, as appropriate, and used with other program data described in paragraph (c)(2)(iv) of this section to direct continuous improvement related to curriculum choice and implementation, teaching practices, professional development, program design and other program decisions, including changing or targeting scope of services;

(iv) Use information from ongoing monitoring and the annual self-assessment, and program data on teaching practice, staffing and professional development, child-level assessments, family needs assessments, and comprehensive services, to identify program needs, and develop and implement plans for program improvement; and,

(v) Use program improvement plans as needed to either strengthen or adjust content and strategies for professional development, change program scope and services, refine school readiness and other program goals, and adapt strategies to better address the needs of sub-groups.

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ONGOING CHILD ASSESSMENT:
A GUIDE FOR PROGRAM LEADERS