

# Community Action's Early Head Start & Head Start 2016 Annual Report

Program Year: August 2015- August 2016



# About Us

Community Action's Head Start programs provide comprehensive child development and family engagement services to low-income children and their families. Both Early Head Start, serving pregnant women and children ages birth to 3, and Head Start, serving children ages 3 to 5, ensure that enrolled children receive adequate nutrition, medical and dental care, social/emotional interventions appropriate to their age, and a developmentally appropriate education.

The programs place substantial emphasis on the involvement of parents in the lives of their children through home visits, parent leadership councils, and social events. Head Start programs ensure that our community's neediest children receive the care and education necessary to meet their developmental milestones, are ready to enter school, and are prepared for a lifetime of productive learning. Comprehensive development services include, but are not limited to:

- **Early Learning** - Teachers facilitate individualized learning experiences to promote children's readiness for school and beyond. Through planned and spontaneous instruction, relationships with adults, and play, children grow in language and literacy, early math and science concepts, and social and emotional development.
- **Health** - Children receive health and development screenings, nutritious meals, oral health and mental health support. Programs connect families with medical, dental, and mental health services, ensuring children receive appropriate services.
- **Family well-being** - Programs support and strengthen parent-child relationships and engage families around children's learning and development. Parents and families are supported in achieving their own goals, such as housing stability, continued education, and financial security.

## What is school readiness?

The Office of Head Start (OHS) defines school readiness as children being ready for school, families ready to support their children's learning, and schools ready for the children who enter their doors. Children's school readiness is measured by the skills set out in the five domains of the Head Start Early Learning Outcomes Framework:

- Language and Literacy
- Cognition
- Approaches to Learning
- Perceptual, Motor, and Physical Development
- Social and Emotional Development

Families are engaged in their children's learning and development and are poised to support the lifelong success of their child. Head Start recognizes that parents are their children's primary teachers and advocates. Schools become ready for children when Head Start programs, parents, and schools work together to promote school readiness and engage families as their children make the transition to kindergarten.

# Children & Families Served

Program Option	Funded Enrollment	Total Children and Families Served	Average Monthly Enrollment
Early Head Start	196	241	100%
Head Start Center-based	68	74	100%
Head Start at Lincoln Public Schools	325	341	100%
Head Start at Wahoo Public Schools	44	46	100%
<b>TOTAL OR AVERAGE</b>	<b>633</b>	<b>702</b>	<b>100%</b>



# Medical & Dental Exams

Program Option	Funded Enrollment	Percentage that Received Medical Exams	Percentage that Received Dental Exams
Early Head Start	196	95%	91%
Head Start Center-based	68	92%	91%
Head Start at Lincoln Public Schools	325	89%	98%
Head Start at Wahoo Public Schools	44	96%	100%
<b>TOTAL OR AVERAGE</b>	<b>633</b>		



# School Readiness

Community Action's Early Head Start and Head Start School Readiness Goals were developed by the Community Action Early Head Start and Head Start School Readiness Committee, which built objectives that are fully aligned with the *Head Start Early Learning Outcomes Framework* and *Nebraska Early Learning Guidelines*. Facilitated by the Early Childhood Education Coordinator, the Committee is comprised of educators, program managers, Policy Council representatives, parents, and community members from all Early Head Start and Head Start program options. Additionally, the participation of representatives from local school districts on the Committee ensures that children and families leaving the program will be equipped to meet the requirements and expectations of the schools into which they will transition. The program's School Readiness Goals were last reviewed and approved by the Policy Council and Board of Directors in December of 2013. The School Readiness Committee plans to begin a thorough review of goals again next year.

## **Current School Readiness Goals:**

### **Language and Literacy**

- Children will use and comprehend language for conversation and communication.
- Children will demonstrate an understanding of print.
- Children will demonstrate an appreciation of books and engage with books every day.

### **Cognition and General Knowledge**

- Children will apply math knowledge and skills to everyday routines.
- Children will use scientific skills and methods.
- Children will understand the relationship between people and the world around them.

### **Physical Development and Health**

- Children will develop coordination, balance, spatial awareness, and strength needed for age-appropriate fine and gross motor activities.
- Children will demonstrate and practice healthy and safe habits.

### **Social-Emotional Development**

- Children will engage in positive relationships and interactions with others.
- Children will develop a sense of self and confidence in their abilities.

### **Approaches to Learning**

- Children will use initiative, curiosity, and persistence to learn about their world.
- Children will demonstrate sustained attention and cooperation when working with varied materials, activities, and information.

Information regarding children's developmental growth and progress towards meeting School Readiness Goals is shared with parents and the community via Policy Council/Committee meetings, Board meetings, Parent Committee meetings, and at home visits and conferences with families. The School Readiness Committee meets throughout the year to share and analyze collected assessment data from a variety of sources in order to identify trends within and across program options and plan corresponding professional development activities.



# School Readiness

Early Head Start and Head Start Family Educators and Teachers track children's progress through the ongoing child assessment system, Teaching Strategies GOLD. GOLD is an assessment system specifically designed for early childhood, comprised of 36 objectives that are predictive of school success and aligned with the *Head Start Early Learning Outcomes Framework*, *Nebraska Early Learning Guidelines*, and the *Common Core Standards*. In the 2015-2016 program year, the program compiled information from GOLD after each checkpoint period (October, February, May) to examine trends among children in the key areas of development (social-emotional, physical, language and cognitive), as well as key areas of content learning (math and literacy). The vast majority of children ended the year meeting developmental milestones. Results from the final checkpoints are listed in the tables below.

Early Head Start 2016 Final Checkpoint		
	Percentage of Children Meeting/Exceeding Widely Held Expectations	
Area of Development	Early Head Start Home-Based	Early Head Start Center-based
Social-Emotional	92%	95%
Gross Motor	90%	94%
Fine Motor	95%	98%
Language	81%	92%
Cognitive	92%	93%
Literacy	79%	81%
Mathematics	75%	80%

Head Start 2016 Final Checkpoint			
	Percentage of Children Meeting/Exceeding Widely Held Expectations		
Area of Development	Head Start Center-based	Head Start at Wahoo Public Schools	Head Start at Lincoln Public Schools
Social-Emotional	98%	81%	95%
Gross Motor	98%	90%	97%
Fine Motor	100%	93%	98%
Language	97%	88%	87%
Cognitive	98%	86%	96%
Literacy	97%	93%	91%
Mathematics	92%	84%	85%



# Family Engagement

In the 2015-2016 school year, Family Engagement Specialists hosted monthly parent workshops for Head Start families enrolled through the Part Day LPS delegate. These workshops included basic information and practice for parents on CPR and First Aid, craft ideas to do around the home, help with setting up routines for bedtime and transitions, and more. Several of these workshops were offered in two separate rooms so they could be done in both English and Spanish to accommodate families learning in their home language. We also had opportunities during some of the workshops for families to sit with their Arabic or Spanish speaking family engagement specialist to directly translate the information. Family Engagement Specialists also visited the children's classrooms every week and met with families directly for home visits to provide support in many different areas such as mealtime ideas and connections to community resources.

Family Engagement Specialists brought the school year to a close by sharing all the new options for Head Start services with families and helping all children and families to work on their individual goals to be school ready. Head Start celebrated with the end-of-the-year Pre-school Olympics, which was a huge success!



# Health

In 2012, we noticed that nearly 40% of the children in our Head Start program were overweight or obese. We knew we needed to implement a project that would promote healthy behaviors to reduce this percentage over time. As a result, with grant support from the Community Health Endowment of Lincoln and collaboration with a local non-profit /public health organization, Teach a Kid to Fish, we were able to develop an evidence-based nutrition education curriculum to be used specifically with children ages 0-3 in home-based learning environments. This curriculum is called “Growing Great Beginnings” and is used to guide nutrition education interventions within our Early Head Start Home-based program. It is composed of six lessons designed to positively change eating, sleep, and physical activity behaviors of young children to prevent them from becoming overweight or obese in later childhood years. In 2015-2016, our team revamped lessons to ensure cultural relevance and include the most engaging activities. Our Nutrition and Wellness Coach consulted with family engagement staff on effective strategies for sharing resources and addressing family’s questions and barriers to healthy habits. She also worked directly with families in their homes to guide them through setting and reaching their personal wellness goals. Early Head Start home-based held a successful playgroup at a local dairy and hosted several gardening-focused activities, promoting eating fruits and vegetables and eating seasonally.



# Mental Health

Early Head Start (EHS) and Head Start (HS) promote mental wellness for children and families in the home and classroom by integrating mental health consultation into education, health, and family engagement services. Early Childhood Mental Health Consultants from the UNL Clinical Psychology Training Program assist child development and family engagement staff to understand child and family mental health needs and to build skills that address those needs effectively. Consultants collaborate with parents and staff to increase capacity to promote self-regulation and problem-solving skills in children, address challenging behaviors, support parents experiencing depression or other mental health problems, and help families cope with the impact of family violence or substance abuse. Mental Health Consultants consulted with EHS/HS parents and staff, participated in team reviews of family needs and service plans, joined Family Educators for home visits, and provided psychological assessments and referrals for community services for child and family social, emotional, and behavioral health needs during the 2015 – 2016 year. The Consultants reviewed mental health screenings to identify specific child or family needs. In addition, they provided staff or parents trainings. Typical direct mental health assessment and services addressed challenges such as sleep problems, separation anxiety, and behavioral problems at home. Consultants helped families with goals such as improving parent-child relationships, developing routines, setting limits for children, and increasing praise and positive reinforcement.

Program wide, Early Head Start and Head Start mental health professionals consulted with staff three or more times for 318 children and consulted with 81 parents about their child's behavior or mental health. They also facilitated 60 referrals for mental health services in the community.



# Community Strengths and Needs

In 2016, Community Action partnered with University of Nebraska Omaha Support and Training for the Evaluation of Programs (UNO STEPS) to complete a comprehensive Community Strengths and Needs Assessment. Through review of secondary data and targeted collection of primary data from current and eligible families, the Community Assessment Team identified the following key trends:

- Lancaster County has approximately 4,308 families below poverty level with children under 5
- Saunders County has approximately 246 families below poverty level with children under 5
- Eligible families in Saunders County were more likely (76%) to be single parent households than those in Lincoln (50%)
- Overall, the racial and ethnic representation of Early Head Start and Head Start enrollment is reflective of the racial and ethnic representation of overall families below the poverty level in the service area
- Lincoln has greater racial and ethnic diversity than Saunders County and Rural Lancaster County
- In the service area, children in families with incomes above the poverty level were 2.5 to 5.9 times more likely to be enrolled in “nursery school” than those with incomes below the poverty level
- In Lancaster and Saunders Counties, 19% and 21% of families experience food insecurity, respectively
- Lincoln had the lowest rate (77%) of high school graduation among householders of families eligible for EHS and HS
- The highest rates of families without an employed adult occurred within Early Head Start
- Lincoln had the greatest linguistic diversity, with 12% of households speaking a language other than English at home
- Accessibility of safe, affordable housing is a crucial concern for eligible families
- Within the service area, Lincoln had the highest rate (53.1 per 10,000 children) of child removals to foster care
- Eligible families report access to medical care as a whole as a high concern
- Communication, cohesion, and resiliency strengths were commonly noted amongst enrolled families
- Many social services are available in Lancaster County, although waitlists are often lengthy
- Saunders County has fewer formal programs available

# Review & Financial Audit

The program was reviewed in July 2014 by the Administration for Children and Families Office of Head Start. At this time, it was determined that Community Action had corrected the deficiency given to the agency in June 2014 related to the following requirement(s): PART 1304 - Program Performance Standards For Operation Of Head Start Programs By Grantees And Delegate Agencies 1304.52 Human Resources Management. Following its July 2014 onsite review, Administration for Children and Families Office of Head Start closed the previously identified finding and determined that no further corrective action was required. Community Action Partnership of Lancaster and Saunders Counties' consolidated financial statements were audited by independent auditors in November 2015. Due to annual expenditures of greater than \$750,000 in federal funding, the audit was conducted in compliance with the requirements of U.S. Office of Management and Budget 2 CFR 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. The Head Start Program was tested as a major program. The audit contained no significant deficiencies or material weaknesses. A copy of the results is available at: [harvester.census.gov](http://harvester.census.gov).

Revenues	\$
Head Start	4,497,789
Early Head Start	2,458,725
USDA	76,963
Child Care	289,030
Community Funding	215,161
Donations	139,780
<b>Total Revenues</b>	<b>\$7,677,448</b>
Expenditures	\$
Delegate Costs	2,262,993
Salaries & Fringe	3,373,567
Indirect	984,974
Travel	66,654
Equipment	72,092
Supplies	182,245
Contractual	348,593
Other	386,329
<b>Total Expenditures</b>	<b>\$7,677,448</b>

