



**2020 Needs Assessment and
2021–2026 Strategic Plan**

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**Kansas Head Start
Collaboration Office**

Kansas Head Start Collaboration Office

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Executive Summary

Alone we can do so little; together we can do so much.

—Helen Keller



Collaborate

Purpose

As part of the grant awarded to the Kansas Head Start Collaboration Office (HSCO) by the Administration of Children and Families (ACF), HSCO is required to conduct an annual needs assessment to identify the gaps in collaboration among Head Start (HS) and Early Head Start (EHS) agencies, their partners, and other service providers. In 2020, HSCO contracted with WordCraft, LLC to create an assessment instrument and analyze the survey results. These results will be used to drive the 2021-2026 Strategic Plan.

Methodology

The assessments from 2016-2018 were conducted via an online survey that featured several open-ended questions. These questions allow respondents the opportunity to craft answers specific to their site/program. To increase the survey's response rate, the 2018 assessment balanced those qualitative options with several quick-answer questions (so that the instrument would not appear onerous to respondents). While these surveys were relatively successful in garnering information from programs across Kansas, the HSCO decided to try a different method of gathering information in 2019. Rather than an online survey, HSCO sponsored a series of focus groups and invited program

directors to participate. The focus groups were held via Zoom, so no travel was required. This method was an effective way to gather data, so HSCO repeated the process in 2020. The HSCO also offered an online survey to further extend the reach of responses. In addition, data was collected from the weekly Head Start director's call hosted by the Kansas Head Start Association (KHSA).

All Head Start grantees in Kansas were invited to participate in the needs assessment. Transcripts from each focus group and results from the online survey were analyzed, and response trends were compiled for this needs assessment summary report. The following is a summary of the major themes that emerged from the data, organized by focus group and survey questions.

Overall Findings

Responses to the 2020 Needs Assessment reveal not only the traditional challenges faced by program directors in providing professional development for their staff, and working with school districts to ensure smooth Kindergarten transition, but also the efforts the programs were making to respond to COVID. Head Start staff--and their communities--were going to considerable lengths to ensure that their children were safe, fed, and still learning. Based on participant responses, this report suggests appropriate areas of focus for the KHSCO in the following year, to assist the program directors in addressing these challenges. These areas of focus are as follows:

- Help to identify professional development resources for HS/EHS programs directors to provide appropriate training for opioid and other substance misuse as

well as mental and behavioral health. The KHSCO can facilitate partnership with organizations that provide professional development and facilitate joint training or cross training opportunities.

- To assist in strengthening partnerships between HS/EHS programs and community services providers that have been formed or have grown during COVID, specifically those that provide in-kind community services, literacy services, and family engagement.
- Coordinate between HS/EHS program directors, child care providers and LEAs to provide examples of strong partnerships between LEAs and HS programs. In particular, provide information and assistance to create a seamless transition from HS to Kindergarten.
- Participate in the Early Childhood Systems Building subgroup; Workforce Advisory Development to increase access to early childhood degree programs in the community.

Background

Head Start in Kansas

Head Start provides comprehensive services to young children and their families. Using a whole child approach, Head Start programs focus on building relationships, improving opportunities for the families of enrolled children, and increasing an enrolled child's readiness for school.

According to the 2019 Program Information Report (PIR), Kansas has 46 programs, including 2 Native American Head Start Programs and 3 Native American Early Head Start Programs. Over all there are 24 that provide Head Start services and 17 that provide Early Head Start services. In the state of Kansas, 6,028 children are served by Head Start and 3,177 children are served by Early Head Start. The entities that provide Head Start and Early Head Start services consist of Community Action agencies, Unified school districts, and private or public non-profit organizations. Unified school districts make up 41% of the grantees. Followed by private or public non-profit organizations at 39%. Then Community action agencies at 20%.

What is the Head Start Collaboration Office?

Established by the 2007 Head Start Act, Head Start Collaboration Offices (KHSCO) exist "to facilitate collaboration among Head Start agencies...and entities that carry out activities designed to benefit low-income children from birth to school entry, and their families."

ACF awards Head Start collaboration grants to support the development of multi-agency and public and private partnerships at the state and national levels.

These partnerships are intended to:

- Assist in building early childhood systems
- Provide access to comprehensive services and support for all low-income children
- Encourage widespread collaboration between Head Start and other appropriate programs, services, and initiatives
- Augment Head Start's capacity to be a partner in state initiatives on behalf of children and their families
- Facilitate the involvement of Head Start in state policies, plans, processes, and decisions affecting target populations and other low-income families

How does the Collaboration Office accomplish its work?

With the shared commitment to improving the lives of young children and their families through better collaboration between Head Start, state governments and agencies, Head Start Associations, and local communities, the role of the KHSCO is to build relationships to create an integrated early childhood system. To reach that goal, the federal government authorizes the KHSCO to perform certain duties. These include (1) providing support for activities in the KHSCO priority areas and (2) contracting with relevant non-profit organizations.

In Kansas, the KHSCO is located within the Department for Children and Families (DCF) – the state’s child welfare agency. Built upon the fundamental premise that “strong families make a strong Kansas,” DCF supports KHSCO efforts to promote better linkages between Head Start and other child and family agencies that provide health, mental health, family, and special needs services to children and families in Kansas. Given the KHSCO’s knowledge of the unique characteristics of Kansas, the KHSCO coordinates and leads efforts for Head Start, state governments and agencies, Head Start Associations, and local communities to work together through:

- Communication
 - Attending stakeholder groups for information sharing, planning, and partnering
 - Serving as a conduit of information between regional offices, the state and local early childhood systems
- Access
 - Facilitating Head Start agencies' access to and utilization of appropriate entities so Head Start children and families can secure needed services and critical partnerships are formalized
- Systems
 - Supporting policy, planning, partnerships, and implementation of cross agency state systems for early childhood, including the State Advisory Council, that include and serve the Head Start community

What are the priorities of the Collaboration Office?

To leverage common interests around young

children and their families, Head Start Collaboration

Offices provide a structure and a process for the Office of Head Start (OHS) to work and partner with State agencies and local entities. OHS has established national priorities that guide Head Start Collaboration Office's work. These priority areas include:

- Partnering with state child care systems emphasizing the Early Head Start–Child Care (EHS-CC) Partnership Initiatives
- Working with state efforts to collect data regarding early childhood programs and child outcomes
- Supporting the expansion and access of high quality, workforce and career development opportunities for staff
- Collaborating with State Quality Rating Improvement Systems (QRIS)
- Working with state school systems to ensure continuity between Head Start and Kindergarten Entrance Assessment (KEA)

Other priority areas of focus on regional level may include:

- Services to Children Experiencing Homelessness
- Services to Children with Disabilities
- Health Services
- Child Welfare
- Parent and Family Engagement
- Community Services
- Military Families

2020 Annual Needs Assessment

Guided by its five-year strategic plan, the KHSCO works to address the needs identified in each year's needs assessment. This year's report analyzes the findings from the 2020 survey.

2020 Findings

A total of 12 Head Start and Early Head Start programs and one Early Head Start Child Care Partner participated in the 2020 KHSCO Needs Assessment Survey (the Survey). The survey captured many of the challenges the Head Start programs faced during the COVID-19 Pandemic. Programs had to quickly respond to rapidly changing information about safety, virus transmission, and health standards. In order to continue services and keep families and programs staff safe, they had to adapt a direct service delivery model to a virtual model. The Kansas Head Start Association (KHSA) promptly began having weekly Zoom meetings with all the HS/EHS directors, Region VII staff (including Training and Technical Assistance), early childhood partners from the Kansas Department of Education, and the KHSCO. These meetings provided directors the opportunity to share how programs were navigating around the complexities of the pandemic. Programs were able to support one another by sharing innovative ideas as well as receive federal and state guidance around policies and procedures being put into place.

Their responses cover a wide range of both accomplishments and challenges that programs in Kansas face. Those challenges and accomplishments are summarized below.

Focus Group Topic 1: Parent, Family, & Community Engagement during COVID

During these past 2 months, Kansas Head start programs have shared many wonderful and inventive ways to stay connected with families during the COVID-19 pandemic. What has your program done?

Teacher Pivots:

Many of the focus group participants could share stories about the efforts their teachers were making to pivot from in-person to online instruction—something that few, if any, had experience or training to do. Participants had several success stories to share about their staff's efforts to teach in this new learning environment:

Well, when all of this got started it was like juggling a million balls in the air 'cause the information kept coming and changing and so we were trying to figure things out pretty quickly so of course we are... Teachers got out of their comfort zone and got into the virtual learning platform pretty fast and ended up embracing it.

The teachers came in and developed all the weeks' lesson plans and divided them into each week. And then we did a pick-up, and then the teachers have been communicating with the families weekly through Seesaw and Zoom for each activities. And then we... Then at the end, we did these Summer Activities for Transition, like we would with some supplies and things.

For the home visitations, we've been using Zoom with the families and that's worked fairly well. We've had a pretty good participation rate. I ran some statistics that our Early Head Start families were out about 100%, our Parents as Teachers families in the upper 90s, and our three to five were in about the 90-ish percent.

Our Training Technical Systems Team has been meeting with [teachers] weekly to prepare either on teaching them technology when this first happened in March because really nobody was prepared for this. Now we're all Zoomers and Google Meeters and all these other things,

[O]ur staff are providing training, technical assistance and professional development to teachers, and doing all that virtually setting up Google Classrooms and all these different classroom spaces to be able to engage families from home. So it's been a huge learning experience on all sides. And even with our Policy Council of Parents, we've kind of talked about, would we still, once we can be back together again, include Zoom as an option for families that potentially have either childcare that falls out at the last minute or transportation barriers. So it's definitely something we'll be potentially taking with us when we move forward.

Other than a pause upon when things were really just disrupted, most things have resumed, so partnerships and meetings and things like that, instead of meeting in person, we're just all meeting virtually in other ways.

And our family advocates though have been able to stay on top of connecting with the families. So for our teachers we basically went to Facebook, private Facebook groups, but for our families we had to meet them where they were at. So for some it's still just a phone call that works best for them, others it's a Zoom like this.

And our family advocates have continued checking in with parents on a weekly basis, just to check in, see what needs are, and try to address those needs as they come up.

Yeah, so here with us being part of the school district and our classroom being in our elementary schools, we've really followed the District's guidance on the continuous learning plans so our teachers when this all started, started meeting together on a pretty frequent basis and that team was led by our education coordinator. So they spent about the first initial two weeks developing a continuous learning plan and what that was going to look like for families and then starting April 1st, then those plans were released to parents and then teachers have been providing lesson plans and that, or different lessons on a daily basis that are optional for our parents.

Our programs that are closed provided weekly care packages with Social Stories for families to discuss and have ways that parents can discuss COVID and everything that's going on and why they're not in school. We're also utilizing HighScope. And so HighScope has core messaging . . . so that we can send

videos to families and then get correspondence back from them in a secured way to kind of show how they're able to work on the curriculum at home.

Accessible Materials:

Participants reported that, in some cases, program staff took extra steps to ensure that their families had access to learning materials:

Some programs also shared about additional steps their staff had taken to make sure that learning materials were accessible to children and families:

[We've learned] a lot of great lessons learned along the way. And we did a lot of the same things they talked about with Knock N' Drops, and videos, and Zoom meetings, and... I would say a lot of us do the same great work.

Also, the ones that are having any of the families that have transportation barriers, some of our providers are even dropping off these care packages at their front door. And so that's kind of the nicer option of some of our programs, even our Family Child Care provider being a smaller entity, has the ability to do some of that.

Ark City specifically opened up access at different points around the community for families, they've done packet deliveries and packet pickups for activities and tried to do things that were obviously very family-friendly and engaging activities.

Food:

Ensuring that children and their families had enough food to eat was a theme that a number of participants touched on, sharing the ways that their communities are reaching out to people experiencing food insecurity:

Same thing with the meals, they've been doing all of that as well as the backpack weekend and foods as well.

And then part of those lunch or dinner packets also include breakfast for the next day. And then they also do weekend packets. So for Friday, if you go and pick up a lunch or a dinner pack on Friday, the families are also provided with a pack for the weekend, to kinda get them through the weekend as well.

As far as a lunch program, our students and families are able to participate in a district lunch program, so a couple of sites that are set up for to provide lunches for our families, but then they also have one site that's set up in the evening to provide an evening meal, to provide dinner for our families.

Grab and go meals, we have a site for that so we... Our kitchen staff is here every day handing those out.

We had a lot of local resources, we had a week that the school district cannot provide meals, so a lot of our local restaurants, coffee houses stepped up to do that. Some teachers did fundraising, and we're still giving out boxes of food to families that had been determined food insecure.

Returning to In-Person

When these participants were surveyed, the quarantine had been in place for 2 months, and some shared examples of how the families and their staff were ready to return to in-person instruction and care:

Yeah, and I think the parents are [tired], too. They're ready for a bit of a break, and we're trying to woo the Early Head Start world into going back... They're ready to go back into homes, and we're not sure that we think they should yet, but they really want to just be with their kids.

So that's something we're trying to figure out now is when do we go back into the house and do we need to go back into the house all the time, could we do a balance of this if they're more comfortable.

What we have found is over time viewership has gone down. I think our families are probably dealing with other stuff, I think being holed up in maybe a small apartment or house I think has probably caused other stressors and online learning probably just didn't become a priority.

Partner engagement:

The circumstances around offering Head Start/Early Head Start services during a quarantine meant that many participants were engaging with their partners in new or increased ways. One example is how school-based programs came to rely more heavily on the services their district can provide:

Just one of the things about being part of a school district grantee is just the different ways that those departments, child nutrition, maintenance and facilities, IT, and just those things that... I just want to make sure we don't take those things for granted that we have available to us and so appreciate what they've been able to do for our families.

IT at our community they gave families free internet access, worked it, set it up. Our IT and nutrition department in the school district were just amazing during this time.

I think with us I wouldn't say we necessarily developed new partnerships, but I think just relying on partnerships that we do, obviously with school districts collaborating more with our special education department to make sure that our students are still receiving services. And then also with our health and nutrition department now with lunch and just relying heavily on them. It's been kinda nice that we're able to rely on them and our kids are able to continue to get those services through the school district.

As a school district, we've always had an emergency preparedness team that meets on a regular basis with the fire and police and everybody, and so we'll be including them now during those meetings and including that information.

I know our superintendent's also have been participating in meetings with the Mayor and different local businesses and that just to tackle some of the issues that have come up with this.

Those not in school districts have relied on community/county partners in new ways:

We've always been partners with Fort Hays State, but . . . they reached out to us prior to the beginning of this, which was nice too. They wanted to do a resource, online resource for families, for early childhood, and wanted us to contribute to that. So that was nice. We did develop that and now we'll have that as a resource for early childhood activity

It's more extending the relationships or deepening the relationships with people that we do partner with. We have a great relationship with our Wyandotte County licensing rep, and so early on, when some of our partners were really trying to decide, do we stay open or do we close, we consulted with her and the guidance to make sure that we weren't conflicting with anything the Wyandotte County or KDHE, or anybody, of course consulting with the CDC and their decision through us, but also we collaborate quite a bit with Wyandotte County Health Department, and so during this time we met with their WIC Department in terms of expectant mothers and learned some new things about what WIC was offering during COVID with really rolling out their WIC app and things for families, and so knowing that so many of our partners are working with parents virtually, we had them come and present in our virtual directors' meeting last week and so...

Wyandotte County WIC Department was able to share how they're still supporting families virtually at this time and what their options are, and even for our dual language learners, which we have quite a few within Wyandotte County for sure that maybe can't even read... You know their app has photos and things for families, and so it was helpful to have that information so that family advocates could continue to support them. And of course, The Family

Conservancy collaborating with MARC for many, many years as a delegate on the Missouri side, but this whole task force and emergency preparedness piece and having this updated on our website. If you go to our website, it has a whole COVID page dedicated to resources and things that providers need. They've done surveys of childcare providers, family childcare providers, of what the gaps are and making sure that those that are open are able to continue to receive the needed things to keep children and family safe and the environment's clean

So it's really been just a deepening of existing relationships and just learning how all of us are kind of getting up on our feet and figuring this out.

We're working with the same people. We're just working with the same people under a completely different context, and so it's just, I guess, I just want to comment on how valuable those partnerships are, and we don't always realize it until it comes to a crisis. And a crisis can, if we didn't have those relationships in the midst of the crisis, would have been a terrible time to start to initiate a bunch of new things. Right? So yeah, just wanted to mention that.

I know all that it takes to make those partnerships happen and keep them going, and in the situation like this, these guys have been amazing outside the box, which is what Head Start's about, outside of what we normally do. And these families are just being so successful because of everybody in Head Start. I'm always involved with Head Start. It's a passion of mine. But it's just in awe to watch all that's been going on and see nobody being left out to take care of them.

We work with ICD in our Zero to Three Program, infant child development, and when all this got started, they very quickly said, "Let's work together to meet families and do ZOOM meetings and different things like that". But over the course of that time, the service kind of shifted back to them being part of our ZOOM visits because of the easier service delivery. And I think what ICD was using wasn't working as well as far as connectivity and all that kind of stuff.

But then also working with some of our community resources, as we've had some parents that have expressed the need for... That are maybe struggling fiscally with paying rent or paying some of the bills that we've been able to reach out to [get] support from them.

I think for us in McPherson, our family services coordinators have been . . . staying in touch with some of our community resources and reaching out to them when needed. And like Lisa said, we've been using Zoom a lot. I'm definitely more familiar with Zoom than I was.

The challenges of the quarantine also necessitated that programs make new connections/ find new partners. Many of those were with local internet providers, but not all:

I would say one of our new partners was just like the internet providers. [laughter] So meeting with them and figuring out how they could help our families, and they actually did kind of pull up a chair and come to the table and help some families in ways that they wouldn't have had to 'cause they let them get some short-term

contracts and then schools out here at the end of May will stop those contracts and that kind of thing, but they were able to hop on our meetings that way

Connectivity was an issue in most of the districts that I work in. Some of our smaller districts were able to... Not that this is a Head Start thing, but I think it was a really positive move, some of our rural communities were able to work with the providers, the internet providers, and actually get internet to homes that didn't previously have it due to COVID 19, which was really nice to see.

And then as far as community providers, a lot of our meetings and things we've just continued to hold on Zoom. One of the newer, I guess, providers.

In St Francis, we continue to work with them to offer referral services and following up on referrals. A local dance studio contacted us and said she was wanting to do some virtual music classes, and she offered that up to everybody, all our families, and not just our families, but childcare centers. So that was fun.

Cedar House, I don't know if you've heard of that, but that's a woman's Recovery Center. So there's a greenhouse in the back and . . . they always leave the doors open, so staff can go in there if they need a break, but it's full of, of course, plants, but then also a lot of art, interactive art and different things. That's kind of a new partnership that's forming now, not necessarily because of COVID, just because we moved into the front part of the building,

We've gotten to know our county health director very well.

Focus Group Topic 2: Collaborating with School Systems

What strategies or support have you found to be helpful in establishing successful kindergarten transitions with your local school district?

For programs that are located within the public school, transition to Kindergarten is relatively seamless. Children are already in the building and they (and their families) are familiar with the space and the administration:

Fortunately, we're set up with our classrooms already. Basically, our elementary schools are pre-K through Five buildings. As much as possible, when students enroll with us for preschool, we try to enroll them at their home school or the school that they'll be attending kindergarten at. So hopefully by the time . . . they get up to kindergarten, that student and their family has been part of that school community for two years. And so our principals are pretty involved with our preschool program. By the time kids get up there, [there's a] good chance that they're familiar with the families and with the students. We also do transition meetings as well, with our preschool staff and the kindergarten receiving team. This year we did 'em over Zoom, but usually on the receiving team, we've got the kindergarten teacher, special education teacher for kindergarten, and the principals attend those as well.

They already know the kindergarten teacher, and so some of it just happens fairly seamlessly in our world. And so we're blessed in that.

Now in our smaller communities, where we have a couple of classrooms, they're in the school so it's a real easy transition. They know where the kindergarten room is and that type of thing.

The transition meetings happen. And those teams, because they're in the buildings that they're going to attend do a great job with that. And the families are comfortable with the setting because maybe they have other children that have already been through the process or because they've been there through the preschool time, so I think we're fortunate in that aspect.

For programs that are not as closely tied to a single school district, the challenges of Kindergarten transition are surmountable, but more significant:

In our world, we have kids that bleed into 19 different school districts, so we're very rural. It's very, it's different.

we had to call 12 different superintendents and just see if they were game to have little kids in their buildings when they're in the midst of trying to get ready for August and that kind of thing. And so not one of them said no. They're all like, "Absolutely." We just need to do whatever we can to provide whatever we can for these kids.

When you're dealing with a lot of different school districts and a lot of different layers, that messaging and the timeliness of the loopback around in response is a little bit different.

Programs have found a variety of ways to ensure a smooth transition to Kindergarten, including timing, logistics, and communication:

And so, they start [Kindergarten Roundup] in February because we added three kindergarten classrooms this year. So that piece of it was already done. And already, I know where all of our children are going. We've already gathered the things that we send on to prepare for that. I've already talked to the principals about the children that they'll be receiving.

We bought some school lunch trays. So for the last five weeks, we didn't buy for all of them, but we would coordinate and one classroom would get them for a couple of weeks. And so our 4-year-olds would practice eating lunch with, kind of trying to assimilate the lunch room. So at least they were carrying a lunch tray and can say, I understand how to do that now.

For one of the final home visits it's giving us some information about transitions and how to enroll. And of course, we typically have a Kindergarten Round Up, which obviously didn't take place this year, but information was put on the website and families could enroll that way. But I think it is a big help to us, though, that a majority of our students that are transitioning up to kindergarten are familiar with the school.

The challenges presented by quarantine and isolation, however, were clearly on the minds of participants:

They're talking about doing some sort of a virtual, and I'm not sure how that's going to look. I think Kindergarten Round Up will happen in July, hopefully, if things have calmed down, and we can--group sizes can be a little bit better. But

we don't do anything crazy or real innovative, I don't think, but just constantly trying to connect.

So it's really been, how are we making sure that we are getting the information? What does that look like if the family doesn't have access to internet when we're social distancing?

Some families that have lost their jobs or temporarily are out of work, are staying with grandparents, and so on. And so, we're trying to understand--is that going to be your fall residence? Have you lost your housing? Is this temporary? What does that look like, too, because the school district information is potentially going to vary.

Our work has really been collaborating with school district staff to understand what their Kindergarten Round-Up process is going to look like because, of course, we were prepared for something pre-COVID. And now, post situation where we're at now, has changed and KCK has been kind of trying to decide if they're going to do summer programming or not. And it's influencing a lot of the way that they're doing intakes for kindergarten, and so they have a very short window for new enrollments. And so we've really been just trying to communicate that to our family advocates who are working with families who have dual language kind of issues,

Because school's over, it's feeling a little more challenging to keep them coming for a transition meeting,

And then also, last year Head Start hosted for all the preschools kind of a back-to-school night, where they had community resources, and the bus was here, and all kinds of health and nutrition information with the local agencies. And so I'm hoping we can have that again this year and be able to be back to some kind of normal grouping. But I'm also thinking about if we can't do that with a large group, how could we do that broken down into some smaller groups? And I don't know, I'm being hopeful for that kind of a thing.

What transition strategies do you have in place for children on an IEP?

With all of the potential for confusion as programs adjusted to quarantine, one service that did not seem to suffer is Special Education for students with an IEP. Consistently, programs reported that their SPED personnel pivoted to online offerings, and IEPs were delivered/transitioned as smoothly as they would have via in-person meetings.

Being with a school district where we have a great relationship with Special Education. And so even the transition meetings they've continued on through Zoom. So all of the children that were on IEPs, have completed their transition IEPs through Zoom. The Special Ed staff that serve our children are housed here with us, so they have their offices here, and so I don't see it as being a huge issue. It's just that meetings were held through Zoom instead of in person.

It's fairly seamless in our world, just because we're all employed by the same agency. And so they just know where our classrooms are, and they jump in whenever they're there, and it works. Transitions feel much like Andy and Donna

talked about. We are now doing a lot of IEP meetings and transition meetings virtually.

So as far as transition, I think, again, we probably all do very similar things. We kind of have a unique partnership with Special Education in our world because we are housed in a Special Education service center, which is primarily made up of OTs, PTs, speech paths, that little group. We rarely struggle with referrals and getting children the services that they need to be successful, either in our classrooms or to move on to transition, that kind of thing.

We continue to promote that it's about this classroom and the teaching team being ready for those students, no matter where they're at.

It's through a virtual process. Our education inclusion manager follows up on anybody that was up for renewals, and makes sure with the family advocate at the site, if the family has a virtual meeting scheduled, do they need support? Do they want any of our team to support them in that dialogue, just to have at least a familiar face? And so it's just been a lot of background work, but so far we've not had any delays. The districts have done a lovely job of keeping everything done because we really were worried with everybody developing these systems would delay, would they extend the time, the window that they would be engaging in this process? But so far we've had great communication with our SPED needs at the district and everything seems to be moving.

We have the cooperative. We have staff in our building that come in and work primarily with our kids, so they're part... They're helping our other staff work

with their goals. And then they lead us through the transition meetings to the individual schools. So that worked out really well. And then, just the individualized progress plans are put in their cumulative file as part of the school records, so that goes to the receiving school.

We've been doing those collaborative end of the year conferences, like I said, for the requirement for Head Start transition, and then also for that IEP team. And so that's been a really, really positive part of all of that, even pre-COVID. All of those were already scheduled.

We have an early childhood special education teacher that's assigned. We've got four elementaries in McPherson, and so we have one teacher that's assigned to each elementary. So we've got four ECSE teachers, and they work pretty close with those buildings. And of course, the special education services, they are still needing to follow that IEP and make sure the services are delivered and make sure that annual reviews that were due are completed or evaluations were completed, and then making sure that we're providing those services to students.

[The Special Education teachers] also participated in our weekly collaboration calls with our classroom teachers, as well. And kind of worked with our classroom teachers to look at the lesson plans that they were putting out and see if there's a way that they can support our students and accommodating those plans or support our families. And then with the transitions, they just really did their transition meetings like they normally would do, except just over Zoom.

Focus Group Topic 3: Health Services

Within the last year, what steps have you taken to connect with community partners around opioid and substance misuse?

Participants were clear that the problem with opioids has not dissipated in their communities:

I can tell you out here, we probably couldn't get enough training in that, to be honest, so we could certainly do better. We have had lots of meetings with police departments and sheriffs and different agencies in our world, trying to get some perspective around how we can be the most impactful and not scare families away, and type of thing. So that's been a bit of a challenge.

Front line teachers that are asking for more training on how to recognize potential issues of opioids that would come in. 'Cause opioids you can't smell it on them, you can't necessarily see it,

We had Central Kansas Foundation come and present information to them on the state's efforts in handling the opioid abuse.

While the original question posed to participants focused on opioid misuse, their responses made it clear that the issues they are facing are broader/more complex than just opioids. Mental health and methamphetamines emerged as problems at least as prevalent as opioids in their communities:

Right now, it doesn't seem to be what our biggest concern in our area is still is methamphetamines, that's still something that is a bigger problem, it seems in our area. And because of the pandemic right now, and I hope it's not true, but I

think domestic violence and child abuse is just probably and running rampant everywhere.

I would agree with that, the statement about methamphetamines being a bigger issue here as well.

We're thinking about the whole substance abuse that I think it's really important that here in Kansas that we keep in mind that while the national term that got a lot of attention and got branded as opioids, it's really about substance abuse substances and what those are in our area. So we shouldn't be thinking about just dealing with opioid, we should be thinking about whatever substance issues and mental health and issues that our families and staff are dealing with.

Domestic violence and uptick in intimate partner violence and so on, or families that are, you know, overly stressed with just the workpieces, and now there's you know alcoholism, those kinds of pieces. It's not as much... We know that opioids are a problem, I think it's just easier to hide them in some ways than others.

I don't think we have enough mental health resources in our county, unfortunately and I know that's probably true for a lot of the rural areas. And so building those collaborative efforts with them is hugely important.

Particularly in the area of mental health, participants were able to share some success stories:

We could also be better in mental health, but we have made some great strides in that world. So in one of our counties, we've got a partnership going with High Plains Mental Health, where they're actually going to have a provider that will

come to our site one or two days a week, and be there for either parents to just come into their space and get counseling services, or children throughout the day. And then we don't pay anything for that service, they are providing it just in a, alternate location for them. So it's really a win-win. They're getting to the families that need them, and we're getting help for our families.

So we've really been leaning on some of our partners at the Health Department for any information on how we can support. And then of course, we have some good mental health resources within our agency to support parents that are overly stressed right now. And then the domestic violence pieces trying to get them connected,

And as far as mental health, we continue to reach out to our mental health consultants. And our mental health consultant for McPherson has participated in some of our weekly phone calls with or some of our weekly Zoom meetings with our staff just to provide them some support and what resources might be out there from whether it's conscious discipline or some other sources.

What help could you use going forward with making connections to your community (resources, training, etc.)?

One topic that emerged regarding additional training was around the safety of staff whose work happens in the client's home:

Somebody that would run around and do presentations to like say home visitors who are going into homes, and what they should be aware of and watchful of, and for their own safety.

We just need to know kinda how to maintain safety for our staff.

A second theme emerged around the intersection of mental health and available services:

I would love to see some kind of... I don't know, a facilitated collaborative effort between mental health and all of us that serve children within our county and talking about the needs that we're seeing as a whole.

I think a collaborative facilitated conversation about what our families are telling us that they need.

Finally, participants expressed concern about the additional pressure that immigration status can place on a family already living in crisis:

We have a lot of families that continue to put up with domestic violence situations because of the status either of both parents or one of the parent.

How do you try to manage and work through getting people in counseling, those things with substance misuse or whatever, stemming. It's just so complex when you're dealing with families where their immigration status is the number one fear that outweighs food insecurity or any other factor. And so the more that the Kansas collab office can, you know, generate contacts with programs and experts in these areas would be very helpful.

Focus Group Topic 4: Collaboration with State QRIS (L2Q)

As the Links to Quality (L2Q) completes the 2-year pilot and moves forward with expansion, what considerations would you like to see as L2Q develops a plan to include HS?

In Kansas the QRIS process has been renamed Links to Quality (L2Q). Administrators were curious about how L2Q was being perceived by Head Start programs; however, the prevailing sentiment was that participants knew very little about it:

we don't know a whole lot about it. We're looking forward to figuring it out, and I don't know if there needs to be any special considerations.

I don't know enough about it to say if recommendations need to be considered for Head Start or not. I don't know enough about it to talk, to really give much insight on it.

I honestly know less about it than [another participant] does. So I don't know that I have a big opinion.

I can't say I am 100% familiar with how I set it up now 'cause I've seen different drafts. So, I am not sure that I can speak on this

The one consistent comment referred to the use of data. Participants asked that L2Q utilize data they already collect, rather than requiring any additional collection efforts:

The only thing I ask is that, they already use... If we're going to be rated that our [existing] data, and things that we have in place and not add on a whole additional system, of things we must . . . hoops and things to receive that type of

rating. I think an. . . I mean, I think we need to meet the qualifications but hopefully, that can be done through some of the data and things that we already have, but I completely agree with the data. We have so much data we hardly know what to do with all of it. So to create something different seems kind of...

Silly at this point

I would agree with that statement [about not collecting additional data]. I think we probably have enough data that we collect that we can use existing data to meet whatever needs or requirements that we need to for reporting?

Survey Question 1:

Please share a detailed example of a successful partnership or collaboration activity that took place in your program during the last year. You may select any one of the partnerships listed below to highlight.- Parent & Family Engagement- Community Services & Partnerships - Child Care Partnerships- School District Collaborations.

Survey respondents approached this question in different ways. Some gave examples of activities that brought their Head Start community together:

We had a Chili Supper that the parents cooked, and we made the cinnamon rolls. It was such a great night, that we cannot wait to do something like this again. The most important thing we noticed was after eating, the parents and families stayed and visited with one another. The kiddos ran around and enjoyed themselves, but the parents also had some grown-up time.

We had a back to school health night where we had over 75 families attend that received resources from different businesses around the community-ChildCare Aware, Shawnee County Health, Parents as Teachers, etc. We turned it into a fun activity where they got a hole punch after every station and who ever visited each station got put into a drawing for Dillons gift card. We picked 4 winners. Also did a small family run around the playground and the kids got medals afterwards. We heard great feedback.

Others talked about more formal collaboration/partnership efforts. In some of their examples, organizations are providing assistance and service to Head Start and their families:

Collaboration with the Infant/Toddler programs in Cloud, Republic, Washington and Clay Counties. These are two unique agencies. Cloud and Republic are funded through OCCK and I am the president of the ICC board for that program. The other is Pony Express out of Marysville and the two independent works are wonderful. We give them referrals when a need arises and they give us referrals when they see a need for our program.

TFC collaborated with the Sharon Lee Health Clinic to provide site-based dental exams to HS children and community children at sites. They also complete the follow up as need for children without dental homes. Their staff participated in our Policy Council and Directors meetings to educate parents and staff on the importance of regularly scheduled dental exams for children ages 1 and above. They also participated in our self-assessment. It is a wonderful partnership that we hope will renew once COVID-19 subsides.

As part of a K-LiNK grant, we provided a year-long early learning home day care institute. Providers received a stipend for participating, as well as free materials and toys for their daycare as well as their families.

At the initial onset of quarantine due to COVID 19, FHSU reached out to us to work together to develop a website of resources. This website was completed and will be available for use beyond the COVID 19.

In others, Head Start was seen as the leader, with information and supports from which others could benefit:

School districts are turning to the Head Start community to provide guidance and assistance as they expand the Early Childhood options in their schools.

Partnerships have proven to be important and effective.

Started a new HS classroom in Kennedy Elementary in Lawrence. HS classroom in their early childhood school. They have many 3-4 hour pre-k and special education classrooms, one 6.5 hour HS classroom.

Survey Question 2:

How has COVID-19 impacted your workforce? Have you seen more staff turnover or less?

It would be difficult to ignore the impact that the COVID-19 pandemic has had on all facets of family life in 2020. This thought is certainly true regarding program staffing. When asked about the impact of COVID-19 on staff/staffing, programs talked of stress, financial loss, and some turnover:

Staff were very stressed but have figured out how to do virtual interactions and lessons with children and parents. Most were very grateful to have jobs and be able to work from home. We have not had much turn-over, yet; however, we have several that have learned they can earn lots of unemployment and are now saying they are unavailable to do summer school, but volunteered to do summer school before. (Some have young children and some do not.) We will see what the fall brings.

There has been a great deal of anxiety reported by staff in returning to work. We have placed additional safety measures in place to protect them and our kiddos. We want them to feel safe and healthy.

It was hard to get them back for summer school. One teacher is wanting to stay home and get paid due to back health and the fear of COVID-19.

Biggest impact was to staff anticipating summer employment, which didn't happen. Turnover is still TBD. While we have experienced turnover, most of it was already in process before COVID-19.

We have had one staff turnover because of this. The worker was very verbal in her dislike of coming back to our program and working outside of her own home. We began home visits last week with half of our families and the other half continuing weekly packets. This week we will see the remaining half of families and next week we will go back to full time. Most families want us back in their homes.

We are seeing an increase [in] staff turnover due to schools being closed and staff needing to care for their own children. As sites are reopening, staff are forced to remain home to care for them.

Some programs, however, had not experienced very significant change on staffing due to COVID-19:

Since we have continued to pay staff throughout this time, there has been a very low turnover rate.

We have not seen much impact as far as turnover. We had a couple teachers retire/resign but no connection to COVID-19.

The program has not had much turnover. A few younger staff members left to go live back home and will not return.

Turnover has been about the same as usual.

Really no change in staff.

Survey Question 3:

What information would you like to receive from the Early Childhood Workforce Development Workgroup?

Given the timing of this survey, it is not surprising that a number of the programs were seeking information related to the pandemic, particularly suggestions for best practice during these unprecedented times.

Ideas for opening during COVID. Anything relevant to early childhood, i.e. hot topics, best practices, support for early childhood educators.

What other Head Starts are doing. how they are coping and how they foresee their year going.

What do you do with employees that won't come back, and have a doc note?

I appreciate continued information on how to keep staff, children, and families safe during COVID 19.

Others were more interested in broader, “best practice” topics:

Progress updates from partners and stakeholders and “promising” practice recommendations for local communities.

I wish there was a solid way that all new early childhood workers could come together and follow a plan... there are so many ways that they can get to the end of point that it overwhelms staff.

Two participants expressed a desire for a concerted effort to change staff recruitment efforts, particularly regarding the recruitment of a more diverse staff:

I am interested in knowing how the group ensures there are diverse voices at the table. How does the work group ensure there is representation during these discussions? If there is appropriate representation, I would like to know what is being done to increase staffing capacity of dual language staff, access for refugee/immigrants, and the inclusion of differing able staff in the workforce.

How does the work force promote early education programs within high schools and community colleges to change the perception from an underpaid wage to a professional field worthy of career advancement and investment?

Systems for notifying those interested in the field of education about current openings and a means for sharing contact information.

Survey Question 4:

What information would you like the workgroup to consider?

Some respondents are seeking information from the workgroup regarding staffing:

What others are doing to help staff transition back.

Start growing the workforce with high school students. Achieve support from business communities and municipalities for improving wages/benefits for the early learning workforce. Early learning needs to be elevated to that of the K-12 system.

Rural programs, maybe learning on the job - like an apprenticeship - however this more than like have to be accepted by the state and for us the office of Head Start.

Others had more general information requests:

Current information and best practices. Remember we are all VERY individual in our communities. :)

Grants, funding for requests, even waivers for mandatory items.

A large number of respondents, however, weren't familiar enough with the workgroup to provide a detailed response:

Unsure

I believe I need to know their full scope of work before I answer as I am sure they are working on topics that I am not aware of.

I am not familiar enough with the Early Childhood Workforce Development Workgroup to answer this question.

Survey Question 5:

What concerns or challenges do you have about partnering with child care?

The most consistent concern or challenge expressed by respondents revolved around program compliance. Child care partners are not always willing/able/informed enough to comply with program requirements:

Center-Based providers seem to think they cannot do mixed age group due to feedback from licensing surveyors. This creates concerns about continuity for children and families.

Our concern is after writing the MOU, they do not follow through on Parent Meetings, taking three-year olds, etc.

[Programs} struggle to follow HSPPS but they want the money;

We are continuously educating our partners about the high quality behind HSPPS. Head Start expects a lower ratio than licensing and is more stringent on safe environment standards.

Survey Question 5a:

Were they resolved, and if so, how?

For those with compliance issues, these responses seemed to sum up the potential for resolution:

We continued to educate them on the way and include them in the process to create buy-in.

This is a continuing challenge and we do the best planning we can. Survey

Question 6:

What resources would be helpful in establishing a child care partnership?

Two respondents thought that funding would be the most helpful resource in establishing new partnerships:

A federal expansion grant so we can get away from the state constrictions with dollars. Better communication with the local DCF offices and agencies (PAT) to collaborate and better utilize dollars and be real partners and not adversaries.

Funding

Other responses covered clearly stated program requirements and greater program visibility:

It is important to share the HS requirements up front as well as the scope of service so everyone is aware of their roles and responsibilities.

A handbook, places to go and observe, visiting with teachers/super. How they measure outcomes?

Other agencies that work with child care providers to be promoting partnerships as well.

2016 – 2021 Strategic Plan

The data collected from the 2020 Needs Assessment led to the creation of the KHSCO Strategic Plan. Using the priority areas set forth by the Federal Office of Head Start (OHS) and the Region VII Office of Head Start (RVII OHS), the KHSCO developed the following five-year strategic plan to guide the work from 2021 to 2026. The strategic plan is divided into six long range goals that include short term objectives and process goals. The long-range goals are based on areas of interest and/or concern identified by the Head Start and Early Head Start program directors surveyed. After the long-range goals were determined, the process goals were identified as the steps necessary in achieving the overall targeted goals.

Input for the KHSCO 2021-26 Strategic Plan was garnered from various stakeholders. The strategic planning process included the Kansas Head Start Association (KHSA), Head Start and Early Head Start program directors, state partners and other early childhood stakeholders.

Partners identified to collaborate in the implementation of the 2021-2026 Strategic Plan include, but are not limited to: Kansas Head Start Association, Kansas Department of Education, Kansas Department of Health and Environment, Kansas Department for Children and Families, Kansas Children’s Cabinet and Trust Fund, Kansas Child Care Training Opportunities, Child Care Aware of Kansas, State Interagency Coordinating Council, Kansas Early Childhood Recommendations Panel, Early Childhood Workforce Advisory Committee, Maternal and Child Health Home Visitation, Kansas state funded

Early Head Start, Early Childhood Integrated Data Systems Team, and Kansas Links to Quality.

LONG RANGE GOAL #1

Ensure that Head Start is involved in the development of state policies, plans, processes, and decisions impacting Head Start.

Federal Priority Area

- Partnering with state child care (and early education) systems

Regional Priority Area

- Community Services and Collaborations

Short Term Objective A: Head Start will be represented through active participation in state early childhood system building efforts.

Process Goals

A1. Identify committees and workgroups focused on issues impacting Head Start and early childhood.

A2. Ensure that a Head Start stakeholder is a member of each identified group. Groups may include but are not limited to: Early Childhood Recommendations Panel, Early Childhood Stakeholders, Early Childhood Workforce Advisory Committee, Links to Quality, State Interagency Coordinating Council and the State Home Visitation Workgroup

Outcomes

1. Increased awareness of the role of Head start in the Kansas early childhood system.

2. Increased Head Start representation in decisions impacting the Kansas early childhood system.

Short Term Objective B: Promote the expansion of information disseminated related to early childhood initiatives in the state.

Process Goals

B1. Ensure information from committee, workgroup, or stakeholder meetings is shared with Head Start.

B2. Disseminate information regarding the HSCO Annual Needs Assessment report and the 5 Year Strategic Plan.

Outcome

1. Increased community awareness of Head Start and early childhood initiatives in the state.

Short-Term Objective C: Maintain and grow successful partnerships by informing communities on the presence of Head Start, Head Start Services, and the community impact of Head Start.

Process Goal

C1. Effectively communicate and promote awareness on the value of Head Start and an equal opportunity for preschool. Increase availability and access to services that meet families' needs.

Outcomes

1. Key messaging/marketing materials are placed on the KHSCO website for promotional use by programs, partners, and service providers.
2. Information is distributed to childcare providers about partnering with Head Start
3. Production of a “Program Profiles” document and resource guide for community partnerships.

LONG RANGE GOAL #2

Enhance information sharing through data systems among Head Start Programs, partners, and state agencies to maximize resources and support for Head Start and low-income children, families, and child care systems.

Federal Priority Areas

- Work with State Efforts to collect data regarding early childhood programs and child outcomes

Regional Priority Areas

- Services to Children with Disabilities
- Health Services
- Child Welfare
- Services to Children Experiencing Homelessness

Short-Term Objective A: Share information for how to coordinate data sharing and collection that represents a range of options within intake and referral systems to support continuous quality improvement

Short-Term Objective B: Support efforts to integrate early childhood data into the State’s longitudinal data system.

Process Goals

A/B1. Encourage ongoing communication for the exchange and collection of sufficient data/information on children and families jointly served by Head Start and other agencies (health, medical, homelessness, special education, etc.) including data regarding early childhood programs and child Outcome.

Outcomes

1. An environmental scan of existing systems identifies data currently captured and determines other data collection needs.
2. Identification of resources that assist programs in obtaining critical information for easy transition to schools, access to health information, and Part C services.
3. Strengthened connections between state education organizations and Head Start programs to aid in streamlining data collection efforts.

Short-Term Objective C: Head Start is actively involved in efforts to share data and increase data-based decision making.

Process Goal

C1. Promote Head Start representation on working groups and committees, understand relevant, ongoing work of data sharing initiatives.

Outcome

1. Greater awareness of Head Start data and increased usage of data informed decision making.

LONG RANGE GOAL #3

Head Start is actively involved in the review of the KS L2Q program/initiative to ensure that it meets the quality improvement needs of HS programs in Kansas.

Federal Priority Area

- Collaboration with State QRIS,

Regional Priority Areas

- Child Welfare
- Parent and Family Engagement

Short-Term Objective A: Participate in policy discussions related to state Links to Quality (L2Q) recognition system for childcare providers.

Process Goals

A1. Ensure a Head Start stakeholder is a member of the L2Q Advisory committee.

A2. Share information about L2Q participation with the Head start grantees.

Outcomes

1. Provides feed back and resource information on best practices for portfolio assessment process.
2. Increased participation in the KS L2Q program.

Short-Term Objective B: Share information from the Kansas Quality Network (KQN) website to assist in connecting families and child care providers with resources.

Process Goals

B1. Provide information to families on how to make an informed decision in looking for quality child care.

B2. Share training and resource information with Head Start and child care providers.

Outcome

1. Increased consumer awareness of the KQN website.

LONG RANGE GOAL #4

Promote the recruitment and retention of a high quality early childhood workforce.

Federal Priority Areas

- Support the expansion and access of high quality, workforce and career development opportunities for staff

Regional Priority Areas

- Services to Children with Disabilities
- Health Services
- Child Welfare
- Services to Children Experiencing Homelessness
- Parent & Family Engagement

Short-Term Objective

A. Coordinate with state efforts to maximize accessible quality professional development opportunities and activities.

Process Goal

A1. Expand Head Start program capacity through increased education, training, and professional development opportunities to foster an environment of recruitment, hiring, and retention of quality staff.

Outcomes

1. Development of an EC Workforce registry system via participation in the EC Workforce Advisory Group.

2. Participate in state efforts to up-date the KS EC Career Lattice to be used as a resource for program staff and encourage degree advancement

Short-Term Objective B: Assess the existing resources and capacity in communities throughout the state.

Process Goal

B1. Identify existing and potential networks focused on health care and other related services for children and families. Improve coordination of early care and education providers with health care systems

Outcomes

1. Training on substance misuse identification is widely offered.
2. Head Start communities successfully identify recovery center options in their area.
3. Mental Health First Aid training made available for all Head Start staff, to address mental health issues for families and staff.

Short-Term Objective C: Identify existing webinars, toolkits, and available materials on exemplary collaborative efforts.

Process Goal

C1. Optimize existing early learning childhood training opportunities and resources.

Outcome

1. Stronger connections between state agencies and Head Start programs where needed.

Short-Term Objective D: Enhance initiatives on inclusive and culturally responsive teaching practices to early childhood professionals to support cultural competency and increase awareness and understanding of children and families.

Process Goal

D1. Expand Head Start program capacity through increased education, training and professional development opportunities to foster an environment of recruitment, hiring, and retention of highly qualified staff.

Outcomes

1. Childhood development tip-sheets and resources in non-English languages are readily available in HS centers.
2. Culturally responsive teaching practice materials and resources are readily available to HS staff.

LONG RANGE GOAL #5

Increase State and local level coordination and capacity of Early Childhood Systems.

Maximize resources and expand services and support for Head Start and low-income children and families.

Federal Priority Area

- Partner with State CC Systems emphasizing the EHS-CC Partnership

Regional Priority Areas

- Community Services
- Child Welfare

Short-Term Objective A: Promote Child Care Partnership training opportunities for Head Start programs.

Process Goal

A1. Expand Head Start program capacity through increased education, training, and professional development opportunities to foster an environment of recruitment, hiring, and retention of quality staff.

Outcomes

1. Identify community organizations that provide child care services outside of Head Start that are willing to partner.
2. Toolkits and resources on child care subsidies, in-kind matching, and non-federal match are available to all HS centers.
3. Development of a resource guide to understanding child care subsidy.

Short-Term Objective B: Actively participate in Early Head Start and Child Care Partnership initiatives.

Process Goals

B1. Participate in the Department for Children and Families writing the child care Development Fund State Plan.

B2. Convene a discussion group to better understand challenges and opportunities for community collaboration between Early Head Start and Child Care.

Outcome

1. Increase awareness about collaboration opportunities between Early Head Start and child care.

LONG RANGE GOAL #6

Increase Head Start and School District coordination by maximizing resources for Head Start and low-income children and families.

Federal Priority Area

- Work with State school systems to ensure continuity between Head Start and Kindergarten Entrance Assessment (KEA)

Regional Priority Areas

- Services to Children with Disabilities
- Services to Children Experiencing Homelessness

Short-Term Objective A: Identify local McKinney-Vento homeless liaisons at public schools to coordinate supports for children and families experiencing homelessness.

Process Goal

A1. Build and expand collaborative efforts and relationships between Kansas school districts, LEAs, and Head Start programs to aid and facilitate connections between low-income families and Head Start services.

Outcomes

1. Toolkits and resources on homeless family eligibility available in all HS centers.
2. Identification of hurdles that prohibit program collaboration with LEAs.

Short-Term Objective B: Identify service gaps for children with disabilities in Head Start programs and improve the level of partnership between state level Part C and Part B programs to address existing gaps

Process Goal

B1. Improve the availability, accessibility, and quality of services available to children with disabilities.

Outcomes

1. Increased local collaboration among Head Start programs, LEAs, and Special Education cooperatives.
2. Quarterly KEHS and APM meetings facilitate communication between HS/EHS and Part B and Part C services.
3. Meetings between state agencies strengthen connections between the agencies and Head Start programs.

Short-Term Objective C: Increase coordination of early childhood services, including professional development for teaching staff, to improve their work with all children.

Process Goal

C1. Optimize existing early learning childhood training opportunities and resources.

Outcome

1. Collaboration with KSDE for shared Early Childhood training (including web-based learning opportunities).

Short-Term Objective D: Increase coordination of services between public schools and Head Start Programs regarding transition to Kindergarten.

Process Goal

D1. Promote a coordinated Kindergarten transition process for children, families, and educators.

Outcomes

1. Development of a MOU template for transition between Head Start and LEAs.

Template is distributed for use to all HS programs.

2. Kindergarten Readiness partnerships between Head Start and LEAs strengthened through shared Kindergarten Transition activities.