



**2017 Needs Assessment and
2017–2021 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 (KHSCO) by the Administration of Children and Families (ACF), KHSCO 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 2017, KHSCO worked in partnership with WordCraft, LLC to create an assessment instrument and analyze the survey results.

METHODOLOGY

Following the trajectory established by the 2016 assessment, which was more qualitative in nature than the previous two years, the 2017 assessment featured a number of open-ended questions. Such questions allow respondents the opportunity to craft answers specific to their site/program. In an effort to increase the survey's response rate, the 2017 assessment balanced those qualitative options with a number of quick-answer questions (so that the instrument would not appear onerous to respondents). Thus, the 2017 instrument offers a balance of qualitative and quantitative responses (See Appendix for a full list of survey questions and responses.)

All Head Start grantees in Kansas were invited to participate in the survey, and 16 programs responded. Survey findings from all respondents were aggregated and compiled for this needs assessment summary report. The following is a summary of the major themes that emerged from the data, organized by priority area.

OVERALL FINDINGS

Responses to the 2017 needs assessment reveal the challenges faced by program directors when collaborating with child care providers, Local Education Agencies (LEAs), and when providing specialized services to young children and their families. Based on these 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:

- Facilitate partnership with HS/EHS programs and child care providers by identifying and sharing resources that increase program capacity. The KHSCO

will continue to work to align policies and practices and exchange information and resources with child care providers.

- Identify professional development resources for HS/EHS programs directors to use with staff and child care providers. The KHSCO can facilitate partnership with organizations that provide professional development and facilitate joint training or cross training opportunities.
- Coordinate between HS/EHS program directors, child care providers and LEAs to provide examples of strong partnerships between LEAs and HS programs.
- Provide information/resources for Health Care, Dental, and Mental Health.
- Build partnerships between HS/EHS programs and community services providers, specifically those that provide in-kind community services, literacy services, and family engagement.

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 2017 Program Information Report (PIR), Kansas has 49 programs, including 2 Native American Head Start Programs and 2 Native American Early Head Start Programs. Over all there are 29 that provide Head Start services and 20 that provide Early Head Start services. In the state of Kansas, 6,796 children are served by Head Start and 3,760 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.

HEAD START COLLABORATION OFFICE

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 in order 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

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 2017 survey. (See the Appendix for a full list of survey questions and responses.)

2017 FINDINGS

A total of 16 programs (out of 24) responded to the 2017 KHSCO Needs Assessment Survey (the Survey). Their responses cover a wide range of both accomplishments and challenges that programs in Kansas face. Those accomplishments and challenges are summarized below.

Challenges

Asking programs to report on the challenges they face in serving children and families can provide important insights into opportunities for improvement or strengthening. The Top 10 Challenges noted by respondents were:

1. Finding, recruiting and retaining qualified staff.
2. Maintaining Enrollment in both home base and center base programs.
3. Dealing with family crisis situations and children with behavioral needs.
4. Assisting families in obtaining a dental provider who will take Medicaid or who can treat non-English speaking patients.
5. Concerns about meeting the Federal requirements for background checks and fingerprinting.
6. Finding time to appropriately train staff on the New Head Start Program Performance Standards.
7. Finding adequate funding to pay staff a living wage.
8. Selection of new curriculum and assessment tool.
9. Coordinating and collaborating with the local school districts.
10. Loss of Services due to changes in funding.

Accomplishments

All 16 programs were able to provide multiple examples of achievements that had occurred in the last year of which they were proud. The Top 10 Accomplishments for these HS programs were:

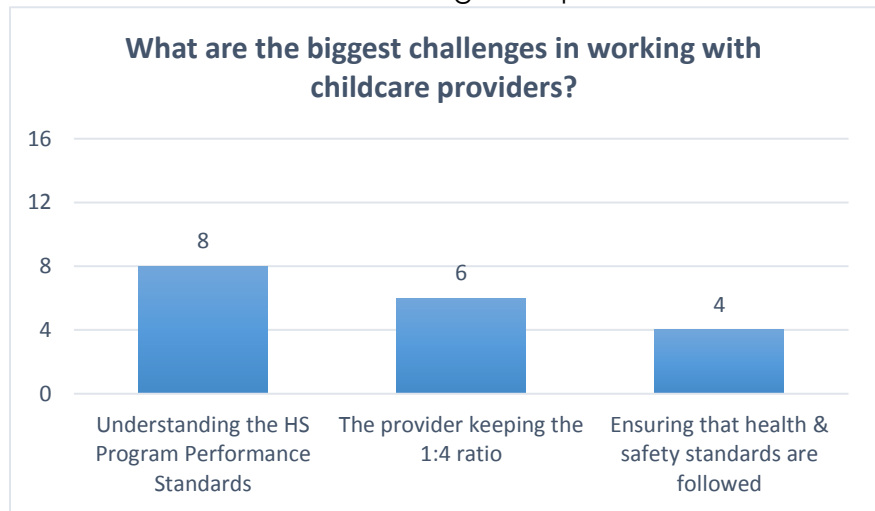
1. Increased professional development.
2. Established a partnership with a community mental health agency.
3. Improved culture at the agency and improved relationships with families.
4. Maintain full enrolment in all but 1 county.

5. Working with families to maintain regular attendance.
6. Received Duration Dollars for classrooms and hiring staff.
7. Adding classrooms to accommodate full day services.
8. Secured community funding to serve children between 101 and 185 Federal Poverty Level.
9. Marketing Committee was formed.
10. Creating and piloting of a family Engagement Certificate.

Child Care Partnership Initiatives

Of the 16 respondents, 7 state that they partner with one or more childcare providers in their communities. In total, this represents 32 childcare partners, serving nearly 200 children.

Child Care Partner Challenges: Inquiries into challenges faced when working with partners focused on how partners responded to some of the key regulatory features of HS programs. In particular, 6 of 16 respondents noted that partners were challenged by the need to the required 1:4 ratio. Further, 4 of 16 respondents felt that their partners were challenged by the need to ensure that health and safety requirements of performance standards were followed at all times. The largest response—8 of 16 respondents—perceived understanding the expectations of the Program Performance Standards and Child Care Subsidy Policies as an obstacle faced by their partners. Other responses that emerged shared obstacles similar to the HS programs themselves: staff turnover, behavioral issues, and funding.



Child Care Partner Successes: Those respondents who currently have child care partnerships were also asked about the rewards they have experienced in working with child care providers. The most popular response, given by 50% of programs, was the ability to better meet the needs of working families. Respondents also felt like their

partnerships had resulted in an increase in the quality of the services provided by the

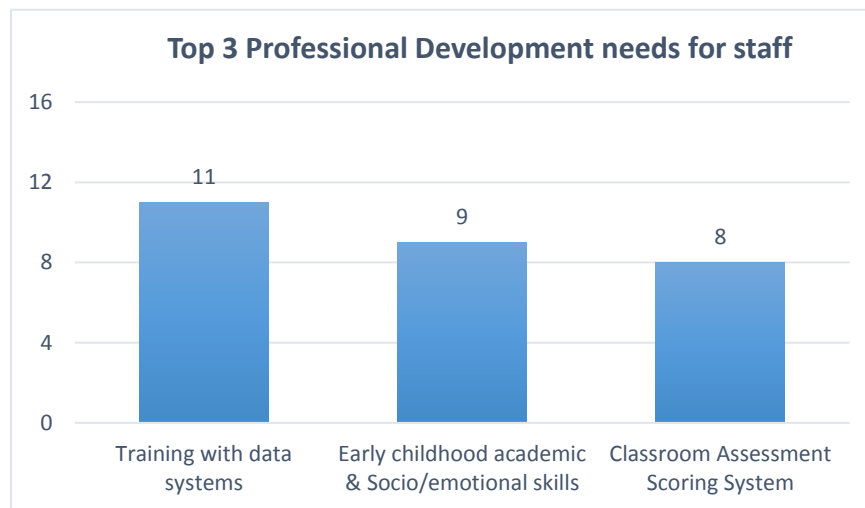


child care centers, and also noted that their partnerships had resulted in the ability to serve more children. A final respondent also noted that partnering had allowed for increased networking and share professional development opportunities.

Support for Professional Development

Survey respondents also identify a variety of training needs. All respondents perceived a need for additional Professional Development for their staff.

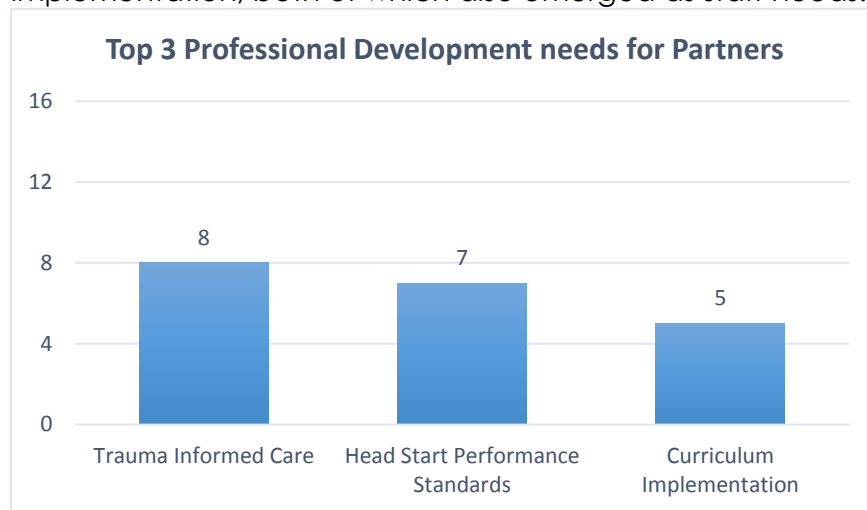
Those needs fall primarily into three categories: 1) coursework/educational opportunities, 2) data collection/assessment skills, and 3) how best to serve the students and their families.



- Education: Respondents expressed a need for the courses that would allow their staff to get their CDA or other degree, noting a lack of qualified teachers, particularly in early childhood. More than half of the respondents expressed a need for professional development in early childhood academic and social/emotional skills.

- Program Expectations: Other respondents would like their staff to receive training on the data systems and classroom assessment systems that they are using. Particularly, they mentioned the TS Gold and Child Plus programs. Similarly, respondents would like their staff to be trained on program performance standards. In a similar vein, respondents would like their staff to be trained in implementation of the HS curriculum with fidelity.
- Student/Family Services: A final theme that emerged was training for their staff in best serving the student and family population in the HS program. Specifically, respondents would like their staff to receive training in Trauma-Informed Care, setting family goals, and classroom behavior management.

Professional Development for Child Care Partners: When asked about Professional Development needs for their child care partners, the needs that emerged were similar to those of the HS staff. Partners are perceived as needing additional training in two key areas of the HS program: the HS Performance Standards, and curriculum implementation, both of which also emerged as staff needs. Additionally respondents



perceive their partners as benefitting from additional training in Trauma Informed Care, which is also a perceived need for staff. These similarities demonstrate a potential for shared training opportunities for HS staff and their provider partners.

Head Start programs leverage a variety of developmental resources and identify a variety of needs for their staff and child care providers.

Successful efforts to support the expansion and access to high-quality workforce and career development opportunities for staff include:

- Form partnerships with service providers/organizations to provide staff training, including joint training and cross-training opportunities
- Exchange information on roles and resources with other providers/organizations regarding professional development
- Provide opportunities (e.g., time) for staff to participate in professional development

Collaboration with State School Systems

All 16 respondents report that they work with their local school district(s). The nature of those relationships appears to vary from loosely to tightly coupled, based on their responses.

- Grantee: Six respondents are part of the school district/the district is the grantee. As such, they share resources, and work together to serve families who are homeless or are migrant.
- Space: Three more respondents state that they share space with the district. This close relationship also allows for monitoring of students with special needs and recruiting families into the HS program.
- Other Resources: Four respondents note that they work closely with their district to provide services for children with special needs, and to generate their IEPs. Others serve on their district's School Readiness Committee, to ensure that their students are prepared for Kindergarten and beyond.

Kindergarten Readiness Tool: When asked if they used a Kindergarten Readiness Assessment tool, 9 of 16 responded that they do (some of them more than one tool). Six different tools were listed, with multiple forms of the ASQ being the most prevalent.

Assessment	Number Using
ASQ 3	4
ASQ-SE 2	1
GOLD	2
COR	1
Galileo	1
Assessments for All Children	1
School District's Assessment	1

Data Collection and Reporting: All 16 HS programs are using at least one data collection tool as a method for sharing data with their local school district(s). Often, grantees want to know what other programs are using and how effective it is. In order to get an idea of what tools are being used grantees were asked what type of data collection tool they used. Respondents listed eight different tools, with Child Plus being by far the most commonly used system.

Collection Tool	Number Using
Child Plus	10
Promis	2
GOLD	2
Teaching Strategies	2
Galileo	1
Apricot	1
CAP60	1
School District's Assessment	1

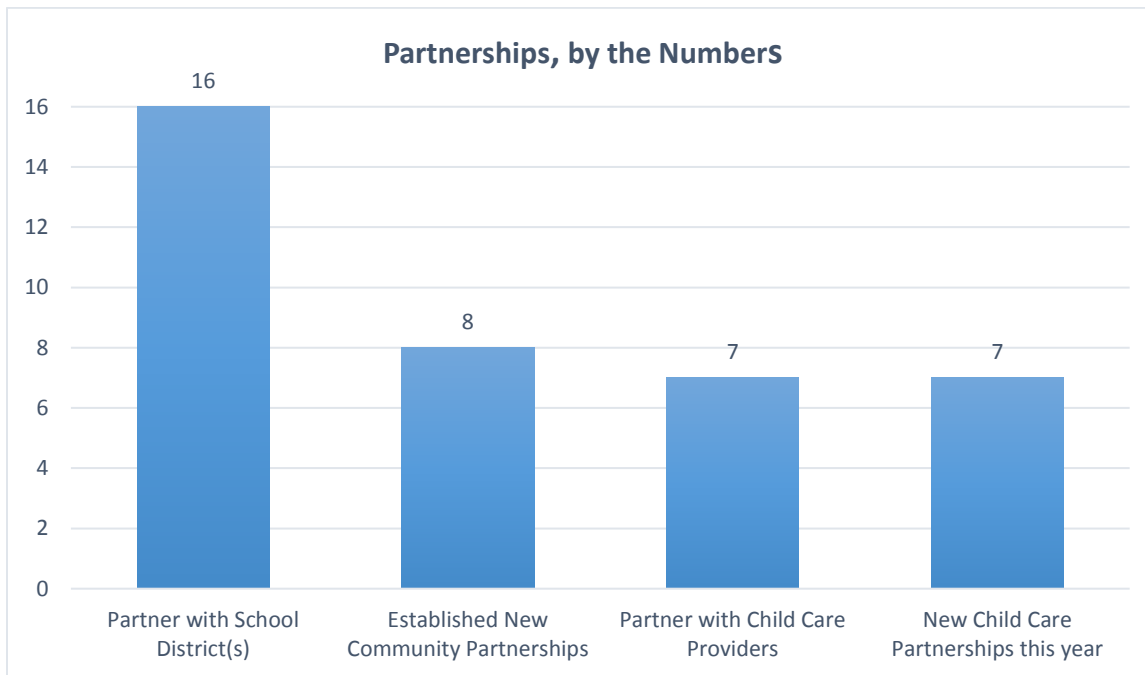
Continuity between Head Start and kindergarten will be a focus of KHSCO in the coming years.

Successful efforts to promote continuity of services include:

- Establish and implement comprehensive transition policies and procedures with LEAs
- Link LEAs and Head Start services relating to language, numeracy, and literacy
- Coordinate with LEAs to implement systematic procedures for program records to school

Community Partnerships

Half of the survey respondents stated that they have established new community partnerships in the past year. A number of these partnerships are with healthcare providers, including mental health, in an attempt to secure more healthcare options for their families. Other programs formed corporate partnerships, and established relationships with nearby universities.

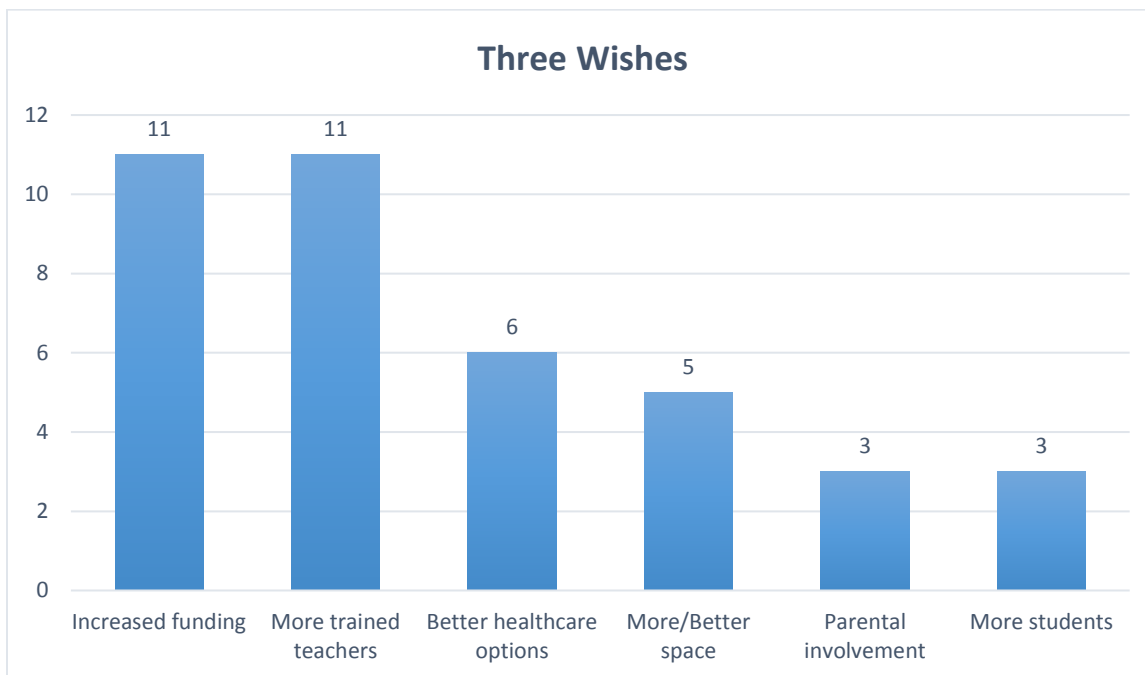


Final Thoughts

Respondents were asked to complete a list of three wishes for their programs. Their responses serve as a fitting conclusion to the 2016-17 Needs Assessment, as they cover a wide range of opportunities to grow and improve HS offerings in Kansas.

Wish List:

- **Funding & Teachers:** Funding to hire more staff was most often expressed, but other responses included a wish for “flexible funding” and for “more money to do what is needed.”
- **Healthcare:** As arose in earlier categories, respondents would also like more/more accessible healthcare and mental health options for students and families, and health benefits for their own employees.
- **Space:** A desire for new, improved, and/or larger space was a common request of the respondents. Some would like to make improvements to their existing facility, while others would prefer a new building with more usable space.
- **Parental Involvement:** Respondents used descriptors such as “fully engaged,” providing “an abundance of in-kind,” and “thrilled” to be involved as characteristics they would desire in their relationships with parents.
- **More Students:** A final category that emerged with three respondents, but is likely inherent in many other themes, is the wish to serve more students. Respondents would like full programs, with students who stay with the program and receive services as long as possible. In such a way, these HS programs could provide the most benefit to the largest number of students and families.



CONCLUSION

Based on the 2017 Needs Assessment data, ongoing areas of needs in regard to the federal and regional priority areas were identified, and strategies for addressing those needs are listed:

Continuity between Head Start and Kindergarten Entry Assessment

Kindergarten transition is a federal priority, and will be a focus of KHSCO efforts in the coming years. Successful efforts to improve these services include:

- Development of, and access to resources that assist programs in establishing and implementing comprehensive transition and policies and procedures with LEAs; and
- Facilitation of joint trainings, including transition-related trainings for school and HS staff

Support for Professional Development

The expansion of high-quality career development opportunities is a federal priority. In Kansas, improved partnerships and access to resources are needed. Successful efforts to improve these services include:

- Providing access to Information on roles and resources regarding professional development;
- Partnering to increase access to early childhood degree programs in the community; and
- Facilitating expanded opportunities for staff to participate in professional development

Support for implementing the Federally required background checks/ fingerprinting

Successful efforts to support implementation include:

- Gathering information from the Head Start programs regarding fingerprinting and background check policies at both the Federal and local levels.
- Coordinating with Kansas Department for Aging & Disability Services (KDADS), Kansas Bureau of Investigation (KBI), and KDHE to further determine the needs of Head Start programs in meeting the federal fingerprint and background check requirements.
- Providing information and up-dates to the Head Start programs on the progress of the state system.

2017 STRATEGIC PLAN YEAR IN REVIEW

Since the 2016 Needs Assessment, the KHSCO has been actively engaged in addressing identified areas of need as indicated in the 2016-2021 Strategic Plan. Below is an overview of efforts in 2017 with reference to the strategic plan goals that have been addressed.

Homelessness

Activity Involvement: As part of the Child Care Development Fund (CCDF) State Plan to provide outreach to homeless families, the KHSCO developed an Early Childhood Services Resource Guide. These services include finding child care or a preschool program and how parents can identify a quality program. Information was sent as an email blast to the food distribution sites, soup kitchens, homeless shelters, and health departments in the state.

Long Range Goal #2; Process Goal 2; Short Term Objective 1; Outcome 1

Activity Involvement: *McKinney-Vento and Head Start – Ensuring Access to Early Education* was a 1 page resource guide developed by the KHSCO. This resource guide was sent electronically to the Head Start and Early Head Start grantees across the state. In addition, it has been posted on the DCF website. This resource guide was designed to provide information on where the McKinney-Vento Programs are located in Kansas and how to contact a local McKinney-Vento liaison. The purpose of this document is to promote better communication and coordination between Head Start and the local school districts.

Long Range Goal #2; Process Goal 2; Short Term Objective 1; Outcome 1

Child Welfare & State Child Care Systems

Activity Involvement: The KHSCO attends the annual State and Territories Administrators Meeting (STAM). In addition, the KHSCO participates in weekly meetings with the CCDF Child Care Unit and is involved in the development of the CCDF State Plan. The KHSCO also provides input into the development of the Temporary Assistance for Needy Families (TANF) State Plan.

Long Range Goal #2; Process Goal 4; Short Term Objective 1; Outcome 2

Activity Involvement: KHSCO, DCF Prevention & Protection Services (PPS) and DCF Economic and Employment Services (EES) have a long-standing agreement with HS/EHS grantees. This agreement allows the KHSCO to provide reports to send quarterly to Head Start programs for recruiting purposes. These reports include lists of families who receive SNAP, TANF or Child Care Subsidy. Head Start programs have indicated that the lists have been helpful in recruiting.

Long Range Goal #2 ; Process Goals 2 & 4

Activity Involvement: The KHSCO has developed a document titled *Head Start and Early Head Start in Kansas- Supporting healthy development to give every Kansas child a chance to succeed*. The purpose of this document was to provide some brief facts about HS and EHS and where services may be accessed. This documents was sent electronically to the HS and EHS directors to help promote HS and EHS services in their communities. This document is also located on the KHSCO page of the DCF website.

Long Range Goal #1; Process Goal 1; Short Term Objective 1; Outcomes 1

Activity Involvement: *Collaboration in Action – Examples of Successful Head Start Partnerships in 2016*, was another document that was developed by the KHSCO. This document was also designed to help promote HS and EHS services by featuring a combination of program highlights from across the state. This document was sent electronically to the HS and EHS programs and is posted on the KHSCO page of the DCF website.

Long Range Goal #1; Process Goal 3; Short Term Objective 1; Outcomes 1

Activity Involvement: DCF, Head Start Collaboration Office (KHSCO) and Kansas Head Start Association (KHSA) have participated on planning calls with KDHE and other state agencies involved in the project. Those Head Start (HS) and Early Head Start (EHS) programs that have a child care license through KDHE will be served through the new state fingerprint and background check system. Discussions have taken place to address the needs for the HS and EHS programs who are not licensed under KDHE Child Care. The KHSCO has gathered information from the HS and EHS directors to further determine their needs in meeting background check requirements.

Long Range Goal #3; Process Goal 2; Short Term Objective 1; Outcome 1

Activity Involvement: The Region VII OHS, KHSA, KDHE Child Care Licensing, DCF CCDF State Administrator and staff and the KHSCO coordinated to organize a Kansas Head Start Leadership Meeting. The purpose of the meeting was to bring together the Head Start grantees to provide regional up-dates and networking opportunities for the Head Start grantees. In addition, clarification was provided regarding the implementation of

the new Head Start Program Performance Standards (HSPPS) with a specific focus on background checks. The KHSCO provided an up-date from the planning calls with KDADS and KBI regarding the background check system currently being built.

Long Range Goal #3; Process Goal 2; Short Term Objective 1; Outcome 2

Early Head Start/ Child Care Partnerships

Activity Involvement: KHSCO participates in the Region VII monthly EHS-CC Partnership phone calls and quarterly DCF calls with EHS-CC Partnership grantee, The Family Conservancy (TFC). To help further promote the EHS-CC Partnerships the KHSCO developed a document titled *Partnering with Early Head Start – A Primer for Child Care Providers*. This document can be found on the KHSCO page of the DCF website.

Long Range Goal #1; Process Goal 3; Short Term Objective 1; Outcome 2

Professional Development Systems

Activity Involvement: DCF funds through a competitive grant for CCDF Quality Initiatives the following projects: Child Care Consumer Education Resource & Referral, Statewide Infant-Toddler Specialist Network, and the Early Childhood Workforce Development. The KHSCO is part of the CCDF Team and is actively involved in the grant selection process.

Long Range Goal #3; Process Goal 1; Short Term Objective 1; Outcome 1

Activity Involvement: In June, the KHSCO was invited to a stakeholder meeting for Professional Development of the Workforce for Early Care and Education. 54 stakeholders from both Missouri and Kansas attended the meeting to discuss core competencies for the early learning workforce. Because of this meeting 3 sub-committees were formed to focus on community based training, higher education and workforce professional development planning. The KHSCO will be participating in the Workforce Professional Development workgroup.

Long Range Goal #3; Process Goal 1; Short Term Objective 1; Outcome 3

Activity Involvement: To address the growing concern with challenging behavior in preschool children, the KHSCO coordinated efforts with KHSA to hold a Teaching Pyramid Observation Tool (TPOT) training. In February, the KHSCO contact Brookes Publishing for information regarding the training. In addition, the KHSCO polled the Head Start directors to determine the level of interest in the training. Based on the feedback from the directors KHSCO and KHSA moved forward with organizing the

training. KHSA set up the contract with Brookes Publishing Company and the registration for the event. KHSCO shared information regarding the training opportunity with the early childhood partners at KSDE. The training date was set for October 11th and 12th of 2017.

Long Range Goal #2; Process Goal 4; Short Term Objective 1; Outcomes 1 & 3

QRIS Development

Activity Involvement: The DCF CCDF Team of which the KHSCO is a part of has initiated the task of developing a statewide network of resources named the Kansas Quality Network. The Kansas Quality Network (KQN) is a new website offered by the Kansas Department for Children and Families that directs child care providers, families and communities to resources available for the advancement, support and recognition of continuous quality improvement efforts in child care in Kansas. KQN provides information on child care assistance and other services available to children and families, including eligibility requirements for early childhood education programs. KQN supports parents with information about how to choose quality child care for their families that goes beyond health and safety and assists child care providers in enhancing their professional skills by providing professional development and other opportunities that will help provide better early-learning experiences for children. KQN can be found at: <http://ksqualitynetwork.org/>

Long Range Goal #2; Process Goal 1; Short Term Objective 1

Activity Involvement: The DCF CCDF Team has taken the lead of developing a child care Quality Rating Improvement System (QRIS). The KHSCO has been actively involved in this work. The Kansas QRIS model has been named Links to Quality (L2Q). Kansas is currently working to develop and implement a QRIS system of recognition for early child care providers. This system will recognize, rather than rate, quality. L2Q has defined Quality Indicators in three topic areas: Program Leadership, Family Partnerships and Learning and Development. Each topic area contains benchmarks participants must meet to achieve a Quality Recognition Link. L2Q will use a portfolio to collect evidence to determine if participants have reached the benchmarks in each topic area. Plans for a pilot are in process. The pilot will include 30-40 providers across the state who agree to participate. The pilot project will extend over a two-year period to ensure all L2Q materials and procedures operate as planned.

Long Range Goal #3; Process Goals 2 & 4

Activity Involvement: To help further promote access to information regarding quality child care, the KHSCO developed a document titled *Finding Quality Child Care – A Step-by-Step Guide for Kansas Families*. This document was designed specifically for

Head Start and Early Head Start programs to share with families who are needing child care. The document briefly highlights what to look for in quality child care and provides reference information to the Child Care Aware of Kansas Resource and Referral Network. This document can be found on the KHSCO page of the DCF website.

Long Range Goal #2; Process Goal 1; Short Term Objective 1; Outcome 1

Coordination with State Systems

Activity Involvement: The KHSCO was invited to participate in a Kansas State Department of Education (KSDE) lead work group to address the Kansas State Board of Education's goal of Kindergarten Readiness. The overall goal of the workgroup was to purpose a way to measure Kindergarten Readiness for students enrolled in Kansas Kindergarten. The work group identified the ASQ-3 and the ASQ-SE for a Kindergarten Readiness screening tool. This project was piloted during the 2016-2017 school year with approximately 30,000 kindergarten students. During the 2017-18 school year trainers will train teachers and support staff on administering the tool. Full implementation with data collection is set to begin for the 2018-19 school year.

Long Range Goal #1; Process Goal 2; Short Term Objective 1; Outcome 1

Long Range Goal #1; Process Goal 2; Short Term Objective 2; Outcome 1

Activity Involvement: In the spring of 2017 the Kansas Department of Education (KSDE) began gathering with educators to discuss early learning in Kansas. This event was dubbed the Early Learning Roadshow. Throughout the spring a total of 8 meetings were held around the state. Staff members from KSDE, Multi-Tier System of Supports (MTSS), Kansas Parent Information Resource Center (KPIRC), DCF and the KHSCO attended the meetings to share information regarding early learning programs and child care subsidy. The Early Learning Roadshow gave educators an opportunity to learn about kindergarten readiness, plan early learning services, and address implementation changes at the local level.

Long Range Goal #2; Process Goal 2; Short Term Objective 1; Outcome 2

Children with Disabilities

Activity Involvement: The State Agencies Early Childhood Leadership Team initiated the task of updating its Memorandum of Understanding (MOU) between governing state and federal agencies. Through coordinated efforts with the Kansas Department of

Health and Environment, the Kansas State Department of Education, and the Kansas Department for Children and Families, the MOU updates have been completed and signed by all agencies.

Long Range Goal #2; Process Goal 4; Short Term Objective 2; Outcome 1

Health Care

Activity Involvement: The Dental Program Director for Oral Health Kansas invited the KHSCO to participate in Pregnancy, Infant and Toddler Planning Team (referred to as the PIT Crew). The purpose of the PIT Crew is to determine ways Kansas can improve the oral health of pregnant women and children birth to three. The group has been charged with developing a well-designed action plan to guide further steps in creating a sustainable system for achieving this goal.

Long Range Goal #2; Process Goal 3; Short Term Objective 1; Outcome 1

Activity Involvement: The information document, *Working with Head Start and Early Head Start- A Guide for Healthcare Providers*, was created by the KHSCO to provide information to health care providers about Head Start and Early Head Start. This document was shared electronically with the Head Start programs to share with their local healthcare providers. This document is also available on the KHSCO page of the DCF website.

Long Range Goal #2; Process Goal 3; Short Term Objective 1; Outcome 2

Family Literacy

Activity Involvement: The information document, *Looking to boost literacy in your community? – Libraries can help*, was created by the KHSCO. The purpose of this document was to provide literacy resource information to families and share information with HS programs on developing partnerships with local libraries. The document was shared electronically with the Head Start programs and it is also available on the KHSCO page of the DCF website.

Long Range Goal #4; Process Goal 2; Short Term Objective 1; Outcome 1 & 2

2016 – 2021 Strategic Plan

Using the priority areas, the KHSCO developed the following five-year strategic plan to guide its work from 2016 to 2021.

LONG RANGE GOAL #1

Enhance connections and information sharing 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 Area:

Partner with State child care systems emphasizing the EHS-CC Partnership Initiatives

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

Regional Priority Area:

Community Services

PROCESS GOAL 1

Promote and support the identification and connection of public and private resources at the State and local level.

Short Term Objective 1: Identify and share resources—in both English and Spanish—to connect consumers and service providers with resources to stimulate state and community-based program/partner development and relationship building.

Outcome 1: Develop a KHSCO page on the DCF website to be utilized as an accessible resource library by programs, partners, and agencies.

Outcome 2: Create a plan for promoting and increasing awareness about the KHSCO website and resources.

Short Term Objective 2: Convene and facilitate information sharing to Kansas Head Start Directors of collaborative efforts encouraging program/partner development and relationship building.

Outcome 1: Coordinate with Head Start programs and partners to facilitate the production of a “Program Profiles” document and resource guide for community partnerships.

PROCESS GOAL 2

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 outcomes.

Short Term Objective 1: 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.

Outcome 1: Assess and survey existing systems to identify data currently captured and determine what data is most necessary to collect.

Outcome 2: Identify resources to assist programs in requesting critical information from service providers to ensure clear and concise documentation allowing for easy transition to schools, access to health information, and Part C services.

Short Term Objective 2: Support efforts to integrate early childhood data into the State's longitudinal data system.

Outcome 1: Continue to work with state education organizations and Head Start programs to make connections where needed with the goal of streamlining data collection efforts.

PROCESS GOAL 3

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

Short Term Objective 1: Maintain and grow successful partnerships by informing communities on the presence of Head Start, Head Start services, and the community impact of Head Start.

Outcome 1: Identify key messaging/marketing materials purposes and place on the KHSCO website for promotional use by programs, partners, and service providers.

Outcome 2: Develop and distribute information to childcare providers about partnering with Head Start.

LONG RANGE GOAL #2

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:

Collaboration with State QRIS

Work with State school systems

Regional Priority Area:

Community Services

Health Care

Inclusion

Services for Children (and Families) Experiencing Homelessness

Services for Children with Disabilities

PROCESS GOAL 1

Continue to encourage Head Start program involvement with State and Regional level development, planning, and policy initiatives to address childcare issues.

Short Term Objective 1: Participate in policy discussions related to state quality rating improvement systems (QRIS) for childcare providers.

Outcome 1: Promote family consumer education on how to find quality child care.

PROCESS GOAL 2

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.

Short Term Objective 1: Identify local McKinney-Vento homeless liaisons at public schools to coordinate supports for children and families experiencing homelessness.

Outcome 1: Develop and Identify toolkits and resources on homeless family eligibility.

Outcome 2: Identify difficulties that prohibit collaboration with LEAs.

PROCESS GOAL 3

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.

Short Term Objective 1: Assess the existing resources and capacity in communities throughout the state.

Outcome 1: Develop a survey that enables communities and programs to identify key partners, resources and areas to coordinate/integrate efforts as they relate to medical, dental, mental health, public health, etc.

Outcome 2: Develop appropriate strategies and materials to educate and inform health care providers on the value of Head Start services and partnerships.

Outcome 3: Provide examples of successful partnerships with health care providers, clinics and health departments. Examples of health care partnership initiatives include "clinic days" or a "healthy start fair."

PROCESS GOAL 4

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

Short Term Objective 1: Increase coordination of services for children with disabilities, including professional development for teaching staff to improve their work with children who have disabilities.

Outcome 1: Promote local collaborations among Head Start programs, LEAs, and Special Education cooperatives.

Outcome 2: Disseminate information gained from meetings on the KHSCO website.

Outcome 3: Disseminate information, resources, and materials about web-based learning opportunities and evidence-based instructional strategies.

Short Term Objective 2: 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.

Outcome 1: Facilitate communication between HS/EHS and Part B and Part C services by providing shared guidance at the quarterly KEHS meetings and APM meetings.

PROCESS GOAL 5

Optimize existing funding and leverage additional funding resources. Locate funding opportunities for the purpose of building and sustaining quality Head Start services across Kansas.

Short Term Objective 1: Identify existing webinars, toolkits, and available materials on exemplary collaborative efforts.

Outcome 1: Research other state collaboration office resources and identify successful examples. Collect and share innovative solutions and resources.

Short Term Objective 2: Develop and distribute information on funding opportunities.

Outcome 1: Participate in meetings between state agencies to make connections between the agencies and Head Start programs where needed.

Outcome 2: Facilitate information gathering about outside funding and relay information, resources, and connections to Head Start programs where needed.

LONG RANGE GOAL #3

Promote the availability and accessibility of quality childcare to ensure families have greater access and opportunity to services.

Federal Priority Area:

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

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

Collaboration with State QRIS

Regional Priority Area:

Community Services

PROCESS GOAL 1

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

Short Term Objective 1: Maximize accessible quality professional development opportunities and activities.

Outcome 1: Promote awareness of the KCCTO shared training calendar as a resource for Head Start directors to encourage participation.

Outcome 2: Develop a framework to promote the availability and accessibility of online training opportunities. Disseminate information through the KHSCO website and quarterly meetings.

Outcome 3: Support state efforts to up-date the Kansas Early Childhood Career Lattice to be used as a resource for program staff and encourage degree advancement.

Short Term Objective 2: Promote Child Care Partnership training opportunities for Head Start programs.

Outcome 1: Support outreach to community organizations that provide child care services outside of Head Start to determine capacity and potential for partnership.

Outcome 2: Identify toolkits and resources on child care subsidies, in-kind matching, and non-federal match.

Outcome 3: Develop a resource guide to understanding child care subsidy.

Short Term Objective 3: Enhance initiatives on inclusive and culturally sensitive training to early childhood professionals in an effort to support cultural competency and increase awareness and understanding of children and families.

Outcome 1: Identify childhood development tip-sheets and resources that are in non-English languages.

Outcome 2: Identify and disseminate culturally sensitive training materials and resources.

PROCESS GOAL 2

Assist child care providers in improving the quality of their programs.

Short Term Objective 1: Participate in efforts to develop a more streamlined background check process for teachers with KDHE and DCF.

Outcome 1: Seek opportunities to connect with programs about issues concerning provider background checks and child care licensing. Collect and prepare information to be discussed at meetings.

Outcome 2: Dedicate time during meetings to address program concerns on the background check process to coordinate policies and procedures between Head Start and child care.

PROCESS GOAL 3

Identify existing resources and capacity of child care in communities throughout Kansas as they relate to the development and sustainability of child care partnerships.

Short Term Objective 1: Provide support to connect providers with child care quality programs and resources to ensure working relationships with local organizations to provide training based on staff needs.

Outcome 1: Seek opportunities to connect with child care training providers in the state about partnerships and services.

PROCESS GOAL 4

Promote expansion of child care provider skills to meet the needs of the whole family.

Short Term Objective 1: Support and promote training opportunities to child care providers on approaching family needs and connecting families with resources and services.

Outcome 1: Seek opportunities to connect with child care training providers in the state about partnerships and services.

Long Range Goal #4

Provide support and motivation for family involvement and active family engagement. Identify examples of successful and lasting participation in family literacy services and early childhood systems.

Regional Priority Area:

Community Services

Family Literacy

PROCESS GOAL 1

Promote community collaboration with educational organizations and institutions of higher education.

Short Term Objective 1: Support increased opportunities for parent education programs and services through partnerships with educational organizations and higher education programs/services/resources.

Outcome 1: Develop and share information with programs about partnering with Adult Education Centers.

Outcome 2: Support grants that work with English Language Learner families.

PROCESS GOAL 2

Encourage community opportunities that assist families with obtaining and completing required documents and paperwork in an effort to make more seamless the connection of resources and services.

Short Term Objective 1: Facilitate public/private support for literacy initiatives.

Outcome 1: Seek out sponsorships that promote literacy resources and opportunities to Head Start families.

Outcome 2: Share information with programs to help Head Start programs develop partnerships with local libraries.

Appendix

2017 Head Start Collaboration Office Survey Results

What are the three biggest obstacles your program faced in the last year?

1. Finding dentist that accept Medicaid 2. Finding qualified staff that want to work 3. Other services have been cut (including schools) that we all have to protect our funding that it makes it difficult to partner

1. Family crisis situations 2. Coaching 3. Curriculum Selection

1. Shortage of staff 2. Under-enrollment in one community 3. Dental treatment for non-English speaking children

1. Money 2. Finding qualified staff 3. Turn-over of children and families

1. Homebased enrollment 2. Recruiting new child care partners 3. Working with the Davis Bacon Act and funding

1. Staff Absenteeism 2. Home Based program enrollment

1. Finding qualified staff 2. Efficient and effective monitoring process

1. Dealing with Kansas funding changes 2. Dealing with school districts who don't value Head Start 3. Staff turn over

1. New director 2. Needing new curriculum and assessment tools 3. Collaboration with our districts and getting better at this

1. New standards 2. New staff – turnover of staff 3. Immigration Concerns (ICE)

1. Dental Care 2. Staff maintenance 3. Maintaining enrollment in counties with declining population

1. Staff turnover/hiring and retaining qualified staff 2. Lack of parent involvement 3. Children with significant behavioral needs; children who have or are currently experiencing trauma

1. DRS for Butler Co. 2. Employee retention 3. Summer services

1. Moving to full day 2. Behavior challenges 3. Demands exceed time available

1. Under enrollment 2. Staff retention 3. Transitioning mid-year to new grantee

1. Recruitment of families and staff 2. Renovations and construction 3. Staff morale

What are the three most common obstacles the families you served faced in the last year?

1. Cannot afford health insurance and do not qualify for Medicaid 2. Finding doctors and dentist that accept Medicaid 3. Providing for their families whether it is keeping a job, paying utilities and rent or having enough food

1. Chronic crisis 2. Housing 3. Basic needs

1. Dental treatment for non-English speaking children 2. Staff shortage 3. Absenteeism

1. Homelessness 2. Addictions 3. DCF/Abuse situations

1. Mental health services 2. Homelessness 3. Health Care

1. Safety in their home/neighborhood 2. Affordable housing 3. Living wage jobs

1. Lack of dental providers 2. Inability to obtain health insurance for parents 3. Adequate, affordable housing

1. Lack of affordable transportation 2. Lack of employment opportunities 3. Lack of affordable, quality housing

1. Money 2. Transportation to and from school 3. Finding doctors that will take them since they do not have insurance

1. Immigration concerns (ICE) 2. Attendance 3. Lack of local health providers

1. Dental Care 2. KanBeHealthy physicals completed fully 3. Maintaining employment

1. Lack of employment 2. Lack of affordable housing 3. Lack of access to affordable mental health services

1. Food deserts 2. Transportation 3. Summer services

1. Challenges with behavior 2. Court system/ incarceration 3. drugs

1. Transportation 2. Affordable dental care 3. Strong family support system

1. Access to dental care 2. Access to social services in general 3. Meeting mental health needs of Families

What are the biggest obstacles your program is facing in implementing the new Head Start Program Performance Standards?

Getting the finger printing going and all the additional training

Background checks and licensing

Learning the new standards

Finding qualified staff and background checks

Time to get things done

Personnel policy changes in qualifications and background checks

Finding qualified staff

Background checks/ state has no system available

Time to make sure everything is completed and done as directed

Time, money, and space/room availability

New requirements which all require time and staff; i.e. parent curriculum, family development credential and practice-based coaching

Interpreting newly added standards – for example, data management procedures

Training time for staff

I am still concerned with Background Check requirements

Resistance to change

NA

What three accomplishments in the last year are you most proud of?

1. Relationship building with families 2. Successful transition 3. Teamwork amongst staff

1. Improved culture at the agency 2. Improved relationships with families 3. Engaged Policy Council

1. High levels of academic achievement 2. Staff culture 3. Family focus

1. Maintained full enrollment in all but one community 2. Working with families to maintain regular attendance 3. Completed a federal EPICCS audit

1. Our Head Start and Early Head Start programs are working together more cohesively 2. Created a partnership with our local mental health facility to better serve our families and children 3. Hired a qualified Fiscal Assistant

1. Expanding services in Ottawa 2. EHS expanding services 3. Hired a couple staff with Duration Dollars

1. Growth of program leadership team 2. Use of support contract with data system (Child Plus) 3. Planning for Conscious Discipline improvements

1. Child Care partnership 2. Adding classrooms to accommodate full day model 3. Passing CLASS monitoring review

1. Development of our Data System/software 2. Ongoing monitoring 3. New CFO

1. New curriculum 2. New assessment 3. Strategic planning has improved

1. We're still here 2. Staff is willingly participating in professional development activities, even outside contract time 3. Some of our staff have also been former HS parents

1. Training completed on PBC 2. Sherman County Early Childhood Center had a successful year 3. Great quality new home visitors

1. Significant number of children moved off of speech IEPs before entering kindergarten 2. Secured community funding to serve children between 101 and 185 FPL 3. Hired an Early Head Start parent as kitchen lead

1. Receipt of DRS funds for Sedgwick and Butler Counties 2. Increase in staff wages 3. Summer services for working families

1. Partnership with community mental health agency 2. Coaching – goal setting process 3. New family engagement assessment

1. Marketing committee was formed 2. Receiving funds for duration classrooms 3. Creation and piloting of a family engagement certificate

If you had three wishes for the program, what would they be?

1. A pool of qualified applicants 2. Funding to pay better wages 3. Funding to hire additional staff

1. Recruit the best and most qualified staff 2. To pay our classified staff higher wages. A living wage 3. Education reimbursement opportunities for families and staff

1. Increased wages for staff 2. Consistent full enrollment 3. Consistent staff year to year

1. Better wages for staff 2. Improvements made to facilities 3. Hire own mental health consultant

1. More money (increased salaries) 2. Affordable employee health benefits for agency 3. Additional time to complete new standards

1. Conscious Discipline training with Becky Bailey 2. Safe, reliable care for sick children when parent works 3. Affordable/low deductible health care

1. We had an abundance of qualified staff who stayed with us forever 2. Our communities and parents provided us with an abundance of in kind 3. Families were fully engaged and thrilled to be Policy Council members and attend all of our events

1. More Federal Early Head Start Funding 2. Strong staff retention / can offer competitive wages 3. More staff coaches

1. More time to do what is needed 2. More money to do what is needed

1. We'd be able to serve more students and families in our community who don't meeting the qualifiers
2. A larger campus with more usable classrooms 3. Health care for our families that is easily accessible in our community

1. Finding and retention of quality staff 2. Retaining families in the EHS program 3. Successful transition to full-day programming

1. Better qualified staff, particularly in middle management 2. Fewer children experiencing trauma 3. Better partnership with the local school district

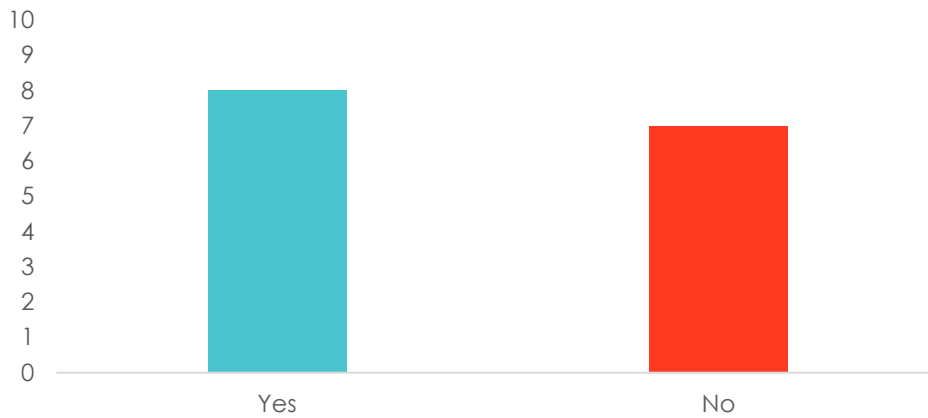
1. More funding 2. Better communication across programs regarding KDHE changes and implementation 3. Reduced funding for HS teaching staff within the state

1. New building with adequate space 2. Flexible funding to be utilized as needed 3. Additional mental health support for children

1. Increased parent involvement 2. Top notch marketing plan 3. A brand new building for our program

1. Space, funding and teachers to fully implement duration 2. No communication barriers 3. Fewer mental health issues for our families and staff

Have you established any new community partnerships in the last year?



If yes, please give an example of a new partnership.

Advisor's Excel as Corporate Partner

Parents as Teachers Partnership

Mental Health

Child Care partner

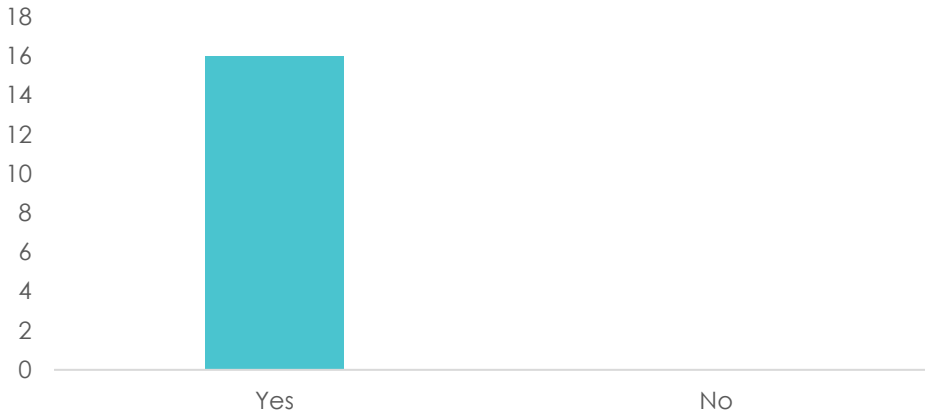
Medical Heights, Family Practice, Family Care Clinic, CNS Medical, & Genesis were all medical offices our program contacted this year to inform them of our program and try to establish partnership. Our community's Ministerial Alliance was another new partnership made this year.

Family Center for Health

FHSU College Club

In the beginning stages of partnering with a new child care center

Does your organization work with your local school district? (This might be through the sharing of information, making referrals, identifying families who are homeless and other coordination efforts.)



Please explain your efforts to work with your local school district.

We work with a couple of them to ensure children have all day services

We are the LEA

Collaborated on the School Readiness Plan with USD 428

USD 379 Clay Center

Monthly meetings attended

Special Education, shared classrooms, ERSEA planning

Head Start classrooms in school district buildings

Have established contracts with 2 districts

We are part of the district

Our school district is the grantee. We share resources, make referrals, help identify homeless and migrant families

Sharing of space, recruitment of families, invites to community/school events

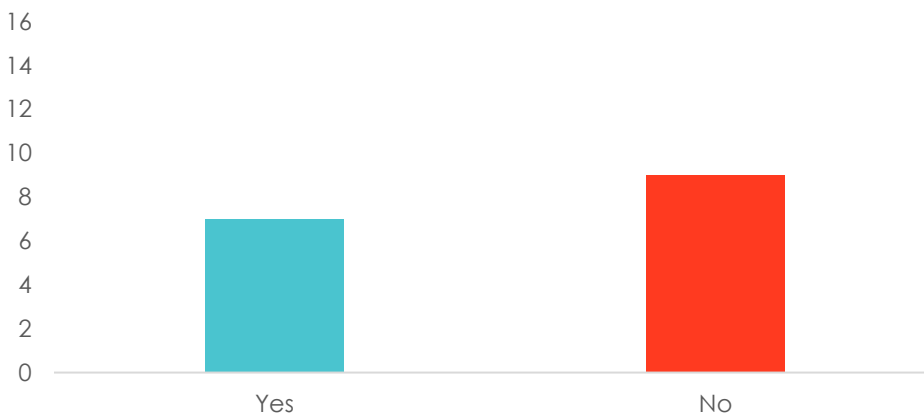
Sharing of information for children on IEPs

IEP coordination

Strong School Readiness Committee

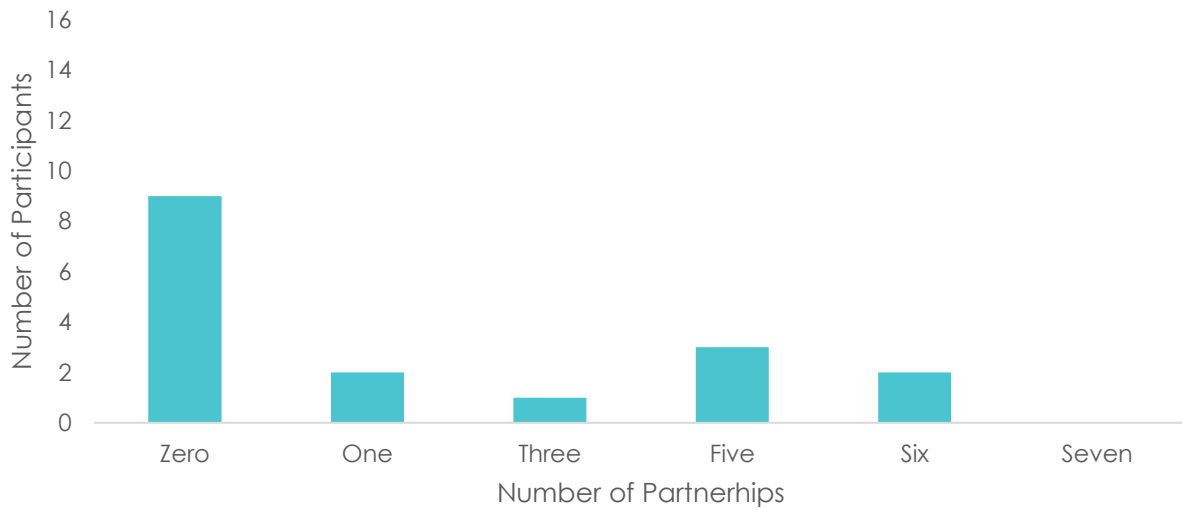
Local Education Agency assist with observation of a child with suspected delay

Does your program currently have any partnerships with child care providers?



How many?

PARTNERSHIPS WITH CHILD CARE PROVIDERS



What are some of the biggest challenges you experience in your partnerships with child care providers?

The provider staying at the 1 to 4 ratio with the licensing regulations being different.

Understanding the expectations of the HS Performance Standards and Child Care Subsidy policies.

Ensuring that Health and Safety requirements of performance standards are followed at all times

Tolerance of parents – previous partners expelled children with no notice

Providers don't wish to partner for the amount they receive from DCF

Less and less direct work with children and more expectations of Head Start providing the services.

Increased cost-we pay considerably more than the market rate.

Staff turnover; mental health behaviors of children

What are some of the biggest rewards you experience in your partnerships with child care providers?

Increased quality in child care centers with whom we partner

The ability to meet the needs of working families

The ability to serve more children

More children are served, additional options for families

Provide 2-3 examples of activities you do to promote family engagement.

1. Parent Committees 2. Well-planned family engagements and socializations

1. Social Media 2. Groups designed around parent request and needs 3. Consistent Family Service Workers

1. Host monthly meetings 2. Newsletters 3. Activities for families

1. "Hubie" slips-home activities that parents can do with their children 2. Family Fun Nights – social gathering for parents where we provide education to parents and activities for them to do with their children while attending

1. Socials 2. Fatherhood events

1. Pancake breakfast for "Pops" (male family figures) 2. Muffins with Mom (female family figures)

1. Fatherhood café 2. Family dance 3. Triple P parenting program

1. Community events – monthly 2. Invite to participate in Parent Committee's/ Volunteer 3. Financial Literacy, Health Literacy, and Emotional Literacy events

1. Fatherhood events 2. Parent meetings 3. Parenting classes

1. First Aid/CPR training 2. Make-it, Take-it activities 3. Family Literacy events

1. Social events 2. Shared goal work 3. Training of staff to better assist families

1. Home based socializations/playgroups 2. Parent surveys to gauge interest in topics

1. All families have goals 2. Dedicated family partnership staff 3. Family goal assessment

1. Goal setting process/ Family Partnership 2. Program-wide socialization opportunities

1. Make it take it night 2. Seasonal festivals 3. Provide food and child care

1. Family Connections classes 2. Classroom volunteers 3. Family engagement certificate

What top three professional development needs do you see for your staff?

1. Training with data systems and interpretation 2. Early childhood academic social/emotional skills 3. Using the Classroom Assessment Scoring System (CLASS) 4. Curriculum Implementation with fidelity 5. Performance Standards

1. Time Management – making the most of the time 2. Self-Care 3. Secondary Trauma 4. Burn-out Prevention
Using the Classroom Assessment Scoring System (CLASS)

1. Training with data systems and interpretation 2. CLASS

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional Skills
3. Using the Classroom Assessment Scoring System (CLASS)

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional Skills
3. Using the Classroom Assessment Scoring System (CLASS)

1. Training with data systems and interpretation 2. Using the Classroom Assessment Scoring System (CLASS) 3. Family engagement

1. Using the Classroom Assessment Scoring System (CLASS)

Training with data systems and interpretation

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional Skills
3. Using the Classroom Assessment Scoring System (CLASS) 4. TS Gold-Individualizing learning/Family Goals 5. Curriculum Fidelity 6. HSPPS 7. Child Plus 8. Trauma Informed Care

Early Childhood Academic and Social/Emotional Skills

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional Skills
3. Using the Classroom Assessment Scoring System (CLASS) 4. Meeting the educational requirements...there is a shortage of qualified teachers especially EHS staff

1. Training with data systems and interpretation 2. Early Childhood Academic and Social/Emotional Skills

Training with data systems and interpretation

1. Early Childhood Academic and Social/Emotional Skills 2. Lack of degreed teachers and CDA candidates

If applicable, what top three professional development needs do you see for your child care partners?

Trauma informed care

1. Head Start Performance Standards 2. Curriculum implementations 3. Trauma informed care

NA

1. Head Start Performance Standards 2. Curriculum implementation

Trauma informed care

NA

1. Head Start Performance Standards 2. Trauma informed care 3. Benefits of being relationship based

1. Head Start Performance Standards 2. Curriculum implementations 3. Trauma informed care

Trauma informed care

NA

NA

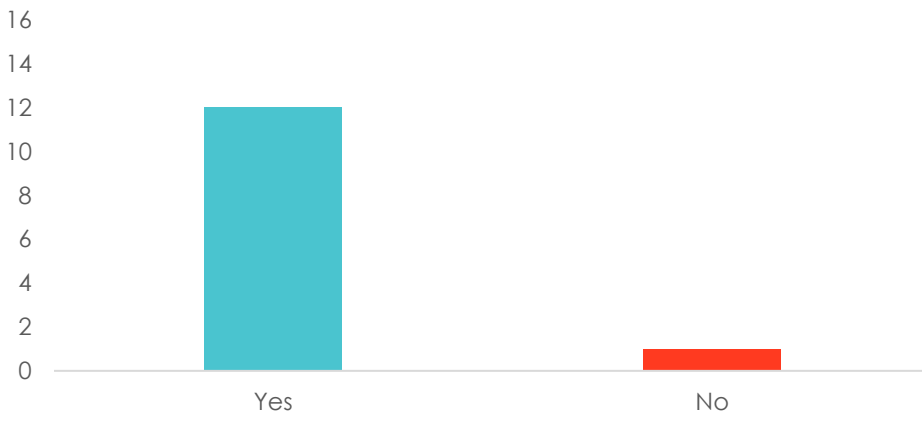
1. Head Start Performance Standards 2. Curriculum implementations 3. Trauma informed care

1. Head Start Performance Standards 2. Trauma informed care 3. Early Childhood Curriculum implementation

NA

Head Start Performance Standards

Did you find the KHSCO Resource Documents (Collaboration in Action, A Guide for Healthcare Providers, HS & EHS in Kansas, etc.) to be helpful?



What additional resources information could the KHSCO provide?

Skipped Question

Skipped Question

Skipped Question

Skipped Question

Skipped Question

Skipped Question

Skipped Question

Actual collaboration with School districts/ state funders

Skipped Question

Our program is not aware of receiving these resources

Skipped Question

Perhaps examples of strong school district/ Head Start partnerships from other states

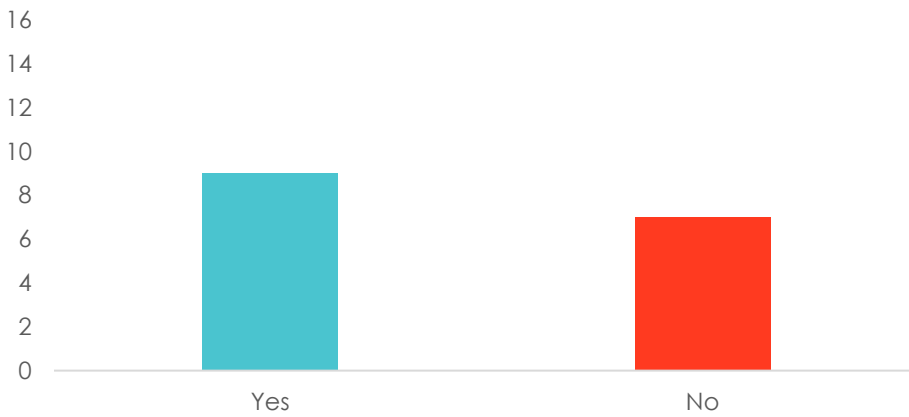
On site observations/feedback

Skipped Question

Skipped Question

Skipped Question

Does your program use a kindergarten readiness assessment tool?



If so, which one?

Topeka Public Schools – Preschool Monitoring System

Teaching Strategies GOLD

NA

NA

NA

ASQ-3

Teaching Strategies GOLD

ASQ-3 & ASQ-SE 2

COR & ASQ-3

NA

Assessments for all children

ASQ

NA

Galileo

NA

NA

What system does your program use for data collection?

Child Plus

Child Plus

Child Plus

Child Plus

PROMIS

Child Plus

Child Plus

APRICOT

Teaching Strategies GOLD

Child Plus

Child Plus

Child Plus

Child Plus and Teaching Strategies

CAP60 and Teaching Strategies GOLD

My Head Start Promis

**How open would you be to trying a new data system?
(Responses recorded on a scale of 0 to 100.)**

4 respondents indicated their interest level at 0

1 respondent indicated an interest level at 1

1 respondent indicated an interest level at 39

1 respondent indicated an interest level at 55

1 respondent indicated an interest level at 35

1 respondent indicated an interest level at 100

1 respondent indicated an interest level at 50

1 respondent indicated an interest level at 52

Head Start Background Check Questionnaire Summary – June 2017

In the spring the KHSCO began gathering information to better assist the Kansas EHS and HS grantees with implementing the new federal fingerprinting and background check requirements. A brief questionnaire was sent to the HS and EHS grantees. The information gathered from the questionnaire will be used to help facilitate further discussions and planning on how to address the needs of HS and EHS for fingerprinting and background checks in our state. The summary is as follows:

- 23 Head Start programs were sent the survey
 - 12 of the programs are run by a local school district (USD grantee)
 - 4 are Community Action Agencies
 - 7 are Private/Public Non-Profit Agencies
- Of the 13 of the 23 programs completed the survey
 - The majority of those who did not complete the survey are programs run by the school district. In these cases, it is possible the school district handles all of the background checks, but do not have enough information to confirm.

Questions Asked:

1. Who processes the background checks for your program?
 - From the responses received all background checks are handled through the agency or USD internal HR department.
2. What is your program policy regarding background checks and could you send me a copy of the policy?
 - All respondents indicated having a policy in place that references the HSPPS 1302.90.
3. How many staff will need background checks outside of the child care licensing system?
 - It is estimated that roughly 797 staff will need to have a background check run with in the next year and roughly 260 the following year.
4. Does your program work with a contractor and if so who?
 - The majority that responded indicated they do not use contract services.
 - 3 indicated using the following contract services providers:
 - Criminal Watch Dog
 - ADP's Screen & Selection Services
 - Intellicorp
 - 4 respondents noted other background check services used include:

- KBI
 - NATSB
 - Background Online, Sacramento, CA
 - KS DCF CANIS
 - First Advantage
5. Are you familiar with the contractor service called *Validity*?
- None of those responding indicated being familiar with the vendor *Validity*. 1 respondent thought her agency used *Validity* in the past but is not familiar with it.
 - All respondents indicated their HS Agency (whether USD ran or otherwise) covers the cost of the background checks for all employees.

CDA Training & Access Questionnaire Summary – January 2017

In January KHSCO began gathering information in order to better assist the Kansas EHS and HS grantees with accessing CDA information and training. A brief questionnaire was sent to the HS and EHS grantees. The information gathered from the questionnaire will be used to help facilitate further discussions and planning on how we make the CDA process more accessible in our state. The summary is as follows:

1. How are programs currently accessing CDA training courses?
 - 5 responses indicated they received CDA training on-line
 - 4 responses indicated they received the training face to face

2. Who do you go through to complete the CDA course work and why do you choose that provider?
 - 3 reported accessing course work through Community Colleges
 - 2 reported to be going through the CDA Center
 - 1 reported to be utilizing CC R&R
 - 2 reported to be going through KCCTO
 - 2 reported to be accessing the course work through within their own agency
 - 1 reported to be using CCELOnline to access the course work

3. Who provides the TA support for the CDA process? Does this support come from within your agency or outside the agency?
 - The majority reported to have TA support for the CDA process from within their agency
 - 1 indicated they have gone out-side of their agency for TA support

4. How is the CDA coursework funded? Are there grants within your agency that fund the CDA and if so where do they come from?

Reported Funding Sources are as follows:

- Federal Head Start Funding
- Federal TA Grants
- Tribal Funding
- CCDF Funding (Tribal)
- Funds are built into the agency budget

5. What is the anticipated need for CDAs in this coming year?

Based on the responses received it is estimated there will be a need for 27 Infant/Toddler CDAs and 31 Preschool CDAs.

6. Do you see more of a need in the coming year for the CDA credentialing? Please state why, if the answer is yes.

The majority responded "yes" to this question. Indicating issues with staff turn-over and the difficulty to find staff who already have a CDA. 1 grantee indicated they would need additional CDA credentialing for the coming year as they were adding an additional classroom.

7. What is the biggest challenge your program has faced with the CDA process?

Challenges are listed as follows:

- High cost the company puts on the CDA process
- Lack of PD specialist
- Lack of applicants with infant/toddler CDA
- Staff Compliance
- Unclear Communication and guidance from the Council on PD when contacted them about issues or questions

Head Start Transportation Questionnaire Summary – January 2017

At the KHSA APM meeting last fall, the topic of Head Start transportation partnerships with local school districts came up. Challenges with ensuring public school buses have proper child passenger restraints and bus monitors, as per HSPPS, were noted. As a result of this discussion the KHSCO emailed a brief questionnaire to the HS & EHS grantees to gather more information. A total of 8 responses were received with 5 of those being from grantees within a USD. The summary of responses are as follows:

Question

1. Do you have a transportation agreement with a LEA?

Response

- 2 grantees indicated having a MOA in place and one of these grantees reported they have separate agreements with the 3 partnering school districts.
- 6 grantees reported they did not have a formal MOA in place.
- The 3 grantees that are in a school district reported having no formal agreement in place and reported the current arrangement that is in place with the school district is working well.
- 1 grantee indicated they did not have an agreement at this time, but hope to have one next school year.

Question

2. If you have an agreement with your LEA please indicate:
 - a) What benefits have you experienced with the agreement?

Response

Our agreement briefly spells out responsibilities of each party regarding hiring of staff, costs associated with transportation and training expectations. We have assigned one staff member to follow up and coordinate with each individual district transportation director/coordinator throughout the year. This helps streamline information being exchanged and clarify training requirements and expectations.

We currently have multiple USD employees on site regularly at our center to provide support to children and staff with IEP's. We do not currently have any children with wheelchair needs, although in the past when we did and the USD took care of the transportation for that child.

Question

- b) What challenges have you experienced with the agreement?

Response

Scheduling of training and following up on training opportunities or training completed is often a challenge. We can make our training required to attend for our staff, but balancing partnering district employees' availability to attend our trainings and/or ensuring that they receive the training or we receive documentation from the district of the training completed can sometimes be a challenge.

We also have to stay on top of the information that we need to be requesting. It is rare that the district transportation directors will initiate providing documentation or information on their own. We have created and provided to the districts specific forms for documentation of training and supervision for them to complete and return, which has helped to ensure we are getting the information that we need.

c) Would you be willing to share a template of the agreement?

Sample agreement content compiled from documents received:

Transportation	USD Provides/ Responsible	Head Start Provides/ Responsible
	<ul style="list-style-type: none"> • Qualified bus driver • Transportation for children living in a specific area, if room is available on the bus. • Transportation to children who with a disability. • Ongoing upkeep and maintenance of bus • CPR, safety training and other training required by Kansas Department of Transportation. • Transportation for classroom field trips • ½ cost associated with major bus repairs • Insurance for the school bus • Maintain bust transportation and general liability insurance. • Mon-Thurs transportation on regular bus route for all children enrolled in the HS program. • Ensure each vehicle used to transport HS children is equipped for use of height & weight appropriate child safety restraint systems. • USD is responsible for schedules and routes. 	<ul style="list-style-type: none"> • Head Start transportation training and materials for driver and monitor • Transportation for classroom field trips • Appropriately equipped school bus • Costs associated with bus monitor • ½ costs associated with major bus repairs • Insurance for school bus • General Liability Insurance • Harnesses for back-up school bus • HS to pay the USD hourly for transportation to and from field trips.

3. If you do not have an agreement with your LEA:

- a) Could you benefit for TA or resources regarding transportation agreements?
- 2 grantees indicated TA or other resources would be helpful.