

**Review of
Office of Head Start Program
Federal Review-
Focus Area 1
Head Start and EHS-CCP**





ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Head Start | 4th Floor – Switzer Memorial Building, 330 C Street SW, Washington DC 20024 eclkc.ohs.acf.hhs.gov

Program Performance Summary Report

To: Authorizing Official/Board Chairperson

Mr. Ron Nirenberg

City of San Antonio

106 S. St. Mary's Street, 7th Floor

San Antonio, TX 78205

From: Responsible HHS Official

Date: 03/20/2020

Dr. Deborah Bergeron

Director, Office of Head Start

From December 9, 2019 to December 13, 2019, the Administration for Children and Families (ACF) conducted a Focus Area One (FA1) monitoring review of the City of San Antonio Head Start and Early Head Start programs. This report contains information about the grantee's performance and compliance with the requirements of the Head Start Program Performance Standards (HSPPS) or Public Law 110-134, Improving Head Start for School Readiness Act of 2007.

The Office of Head Start (OHS) would like to thank your governing body, policy council, parents, and staff for their engagement in the review process. The FA1 review allows the OHS to understand how programs are progressing in providing services in the 5-year grant cycle. The report includes the performance measures used to understand grantee progress towards program goals. You can use this report to identify where your program was able to describe progress toward implementing program services that promote quality outcomes for children and families. Please contact your Regional Office for guidance should you have any questions or concerns. Your Regional Office will follow up on the content of this report and can work with you to identify resources to support your program's continuous improvement.

DISTRIBUTION OF THE REPORT

Mr. Kenneth Gilbert, Regional Program Manager

Ms. Melody Woosley, Chief Executive Officer/Executive Director

Ms. Audrey Jackson, Head Start Director

Ms. Audrey Jackson, Early Head Start Director

Glossary of Terms

Opportunity for Continuous Improvement (OCI)	An OCI is identified when the grantee is determined compliant in an area; however, through intentional, continuous improvement strategies, the agency has the opportunity to enhance overall program quality.
Area of Concern (AOC)	An area for which the agency needs to improve performance. These issues should be discussed with the grantee's Regional Office of Head Start for possible technical assistance.
Area of Noncompliance (ANC)	An area for which the agency is out of compliance with Federal requirements (including but not limited to the Head Start Act or one or more of the regulations) in one or more areas of performance. This status requires a written timeline of correction and possible technical assistance or guidance from the grantee's program specialist. If not corrected within the specified timeline, this status becomes a deficiency.
Deficiency	<p>As defined in the Head Start Act, the term "deficiency" means:</p> <p>(A) a systemic or substantial material failure of an agency in an area of performance that the Secretary determines involves:</p> <ul style="list-style-type: none">(i) a threat to the health, safety, or civil rights of children or staff;(ii) a denial to parents of the exercise of their full roles and responsibilities related to program operations;(iii) a failure to comply with standards related to early childhood development and health services, family and community partnerships, or program design and management;(iv) the misuse of funds received under this subchapter;(v) loss of legal status (as determined by the Secretary) or financial viability, loss of permits, debarment from receiving Federal grants or contracts, or the improper use of Federal funds; or(vi) failure to meet any other Federal or State requirement that the agency has shown an unwillingness or inability to correct, after notice from the Secretary, within the period specified; <p>(B) systemic or material failure of the governing body of an agency to fully exercise its legal and fiduciary responsibilities; or</p> <p>(C) an unresolved area of noncompliance.</p>



Program Design and Management

Program Design

The grantee’s program design and structure takes into account community strengths and needs.

Program Management

The grantee has an approach for providing effective management and oversight of all program areas and fiduciary responsibilities.

Program Governance

The grantee maintains a formal structure for program governance that includes a governing body, a policy council (or policy committee for delegates), and parent committees.

Program Design and Management Highlight

The City of San Antonio, Department of Human Services (DHS), Head Start Program provided services in 19 school districts located within Bexar County. San Antonio Independent School District (SAISD) and Edgewood Independent School District (EISD) had the highest need for program services due to several risk factors, such as homelessness, domestic violence, foster care, and children with disabilities. The DHS Head Start mission was to provide high-quality early childhood education and to improve child and family outcomes. Data was used to drive continuous improvement and to inform both the policy council (PC) and the governing body (GB).

The City of San Antonio monitoring team physically monitored all 28 sites by conducting classroom observations. Classroom monitoring of each content area took place at a minimum of two times a year except health and safety was monitored three or four times a year. The Classroom Assessment Scoring System (CLASS) was used to conduct observation in all 184 classrooms, and the program had 40 reliable CLASS observers on staff. The program also had bilingual CLASS observers and attended consortium quarterly with other grantees in the district.

Each Director developed and utilized professional development plans. They were reviewed periodically throughout the year with individual staff. During pre-service each year, the program covered topics such as working with dual language learners, child assessments, and coaching systems. Principals and coaches worked with teachers to help build skills and support targeted professional development.



Designing Quality Education and Child Development Program Services

Alignment with School Readiness

The grantee’s approach to school readiness aligns with the expectations of receiving schools, the Head Start Early Learning Outcomes Framework (HSELOF), and state early learning standards.

Effective and Intentional Teaching Practices

The grantee has strategies to ensure teaching practices promote progress toward school readiness.

Supporting Teachers in Promoting School Readiness

The grantee has an approach for ensuring teachers are prepared to implement the curriculum and support children’s progress toward school readiness.

Home-based Program Services

Not Applicable.

Designing Quality Education and Child Development Program Services Highlight

The City of San Antonio, Department of Human Services (DHS) Head Start Program and San Antonio Independent School District (SAISD) and Edgewood Independent School District (EISD) shared the same philosophy regarding school readiness. Creative Curriculum, Little Texan State Teachers, and Scholastic Big Day curriculum were used in Head Start to ensure alignment and a continuum of instruction to kindergarten classrooms. Early Head Start (EHS) classrooms used the Creative Curriculum. All curriculums were aligned with the Texas Prekindergarten Guidelines, the Head Start Early Learning Outcomes Framework (HSELOF) and ensured a smooth transition for children entering kindergarten. Both school districts held orientation sessions, provided strategies, and provided information to families on how to make the transition easier for children. Head Start Family Service Workers invited principals to the orientation sessions and the centers during the Head Start Awareness Month. Principals offered information on special education, reviewed the evaluation process, the Individual Disability Education Act (IDEA), and parental rights.

The program reinforced the parent's role as their child's first teacher. They shared Information with parents during home visits and parent/teacher conferences to keep families informed of activities to use based on data to help parents prepare their child to enter kindergarten. In addition, teachers shared information with parents regarding the curriculum, children's individual progress, and ways to improve skills in the home. Parents were invited to volunteer to participate in the classroom and encouraged to be a part of the Education Advisory Committee and Health Service Advisory Committee (HSAC).

At the end of each school year, the program used data to improve education services by making decisions about professional development and goals for the upcoming year. Professional development opportunities allowed teachers to see the connection with the Classroom Assessment Scoring System (CLASS), the Parent, Family, and Community Engagement (PFCE) Framework, Texans Big Teachers, Child Assessment, and school readiness goals. Ongoing training helped teachers understand how to support children in each learning domain. Districts had an integrated approach to school readiness for both Head Start and Early Head Start. Training also included the vertical alignment to the Kindergarten Texas Essential Knowledge and Skills (TEKS), so they knew what the expectations were for kindergarten and beyond.



Designing Quality Health Program Services

Child Health Status and Care

The grantee has an approach for ensuring the delivery of high-quality health services.

Safety Practices

The grantee implements a process for monitoring and maintaining healthy and safe environments and ensuring all staff have complete background checks.

Designing Quality Health Program Services Highlight

The grantee provided monitoring multiple times a year and worked with each health provider and family to ensure special diets were accommodated, and children's health data was up to date. They held regular review meetings with teachers and families to go over important health information. The health team met monthly with Health Coordinators, District Health teams, and used the ChildPlus report to support the coordinator meetings, data meetings, and multidisciplinary meetings. The team ran weekly and monthly reports on children's health requirements, missing health events, expired, or health concerns or any past due health events. Reports were shared with Family Service Workers (FSWs) to follow up with families. Health Coordinators were responsible for running reports and worked with Family Support Supervisors in discussing reports. Once the data was analyzed, within 45 days, all screening vision, hearing, blood pressure, growth assessment, Ages and Stages Questionnaire (ASQ) were conducted. If there were any concerns, immediate follow up was undertaken by the FSW, who worked in partnership with the nurse. The parent received all the results, and an action plan was created based on what the need was. For example, if a child had a vision screening and failed, and the family did not have insurance, the program reached out to Lion's Club or other resources to secure services and supports. Families received a vision voucher with First Sight if the child needed glasses and was temporarily uninsured.

The program used the expertise of the members of the Health Service Advisory Committee (HSAC) to support each child's health and mental health needs. They recently held a series on childhood obesity. The dentist spoke how to improve oral health to childhood obesity, nurses spoke on prevention efforts, and they provided recommendations on program policy related to staff health requirements as it relates to staff physical exams and TB skin test. The HSAC helped create a Wellness Assessment Survey for families to complete. The survey asked about their habits at home, such as eating or drinking sugary drinks or starches. The pediatric dietician on staff provided one on one nutrition education, food demos, training at parent meetings.

The grantee's full-time licensed counselor supported the children's Mental Health Consultation Model. They consulted and advised on program policy, curriculum environment, impacting mental wellness, and approaching things from a trauma-informed lens. The training was available to staff and parents on information such as social and emotional development, mental health, and parenting skills for prevention and intervention. Support was provided to parents through the Individual Education Program (IEP) process, individual consultations with staff and parents regarding social-emotional development, functioning, and overall mental wellness issues. were targeted. There were five staff that work under the Mental Health Consultant.

The program monitored safety by conducting site visits. All centers were required to have a maintenance log. The program created a Health and Safety Resource Booklet on procedures for evacuations, lockdown, drop cover a hold, universal infections, handwashing, and diaper changing, and shelter and place emergencies. The booklet was accessible to all staff. All centers were required to adhere to childcare licensure minimum standards as well as Federal regulations. If there were ever lockdown drills, the center must alert childcare licensure within 24 hours. Both used Caring for Children, Critical Incident Report (CIR) if an incident occurred on-site, centers were required to complete that report.



Designing Quality Family and Community Engagement Services

Family Well-being

The grantee has an approach for collaborating with families to support family well-being.

Strengthening Parenting and Parent-Child Supports

The grantee has an approach for providing services that strengthen parenting skills.

Designing Quality Family and Community Engagement Services Highlight

The grantee's approach to supporting family well-being and strengthening parenting skills began as families were completing applications. The process included introducing and completing the Family Assessment Tool. This document allowed the Family Support Worker (FSW) to establish goals and provide resources to families in need. Resources included safety, health, economic stability, job training, housing programs, veteran affairs, family assistance, financial accounting, child care services, mental health services, and food assistance programs. The grantee provided Resource Fairs and a community resource binder, located at every center and was updated annually and categorized by goals.

The FSWs participated in training on how to build relationships with families. ChildPlus data entry system was used to enter family goals. A drop-down box allowed them to choose one of the seven Parent, Family, and Community Engagement (PFCE) Framework outcomes. This helped to know where the families were and where they needed to concentrate their efforts. FSW reviewed goals with families monthly to see if adjustments needed to be made to the goal. They updated the goals annually. If they met a goal, they discussed setting another goal.

The grantee worked on parenting skills with a parenting curriculum used by all programs. Ready Rosie was selected as their program's research-based curriculum. The FSWs provided 6 workshops focused on foundational parenting strategies, challenging behaviors, the importance of being a child's first teacher, and research that supports a literacy-rich environment, how to become leaders in the home, community, and school. Another curriculum offered to parents was SafeCare used in the home to focus on parent-child interaction, safety, and health.



Developing Effective Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Strategies and Fiscal Infrastructure

Eligibility, Recruitment, Selection, Enrollment, and Attendance

At least 10% of the grantee's total funded enrollment is filled by children eligible for services under IDEA or the grantee has received a waiver.

The grantee enrolls children or pregnant women who are categorically eligible or who meet defined income-eligibility requirements.

Enrollment Verification

The grantee maintains and tracks full enrollment.

Fiscal Infrastructure, Capacity, and Responsiveness

The grantee's fiscal staff have the qualifications needed to provide oversight of the grant.

The grantee has a budget development and revision process that includes stakeholders and appropriate approvals, and ensures continuous alignment with program design, goals, and objectives.

Developing Effective Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Strategies and Fiscal Infrastructure Highlight

The grantee had an approach to determine the accuracy of eligibility for each enrolled child. All staff received Eligibility Recruitment, Selection, Enrollment, and Attendance (ERSEA) training annually. Staff conducted face-to-face interviews with all families. During that time, they collected proof of income and proof of age. All documents were scanned and entered into ChildPlus to create an eligibility determination record. Parents signed an undocumented declaration income or a declaration of no income. All documentation was kept and stored electronically. If a family was homeless, the program completed a student residency questionnaire to determine if they could be considered for the McKinney Vento Act.

At the time of the review, 12.8 percent of enrolled children in Head Start received services under the Individuals with Disabilities Education Act (IDEA), and 11 percent of Early Head Start children were receiving services. The program made referrals that have not been determined eligibility yet for IDEA services. The EHS-CCP staff received training on how to identify children that need to be referred for an Individual Education Program (IEP). Historically the program met the 10 percent requirement. The grantee had a process for filling slots that have been vacant for 30 days and kept a waiting list of over 300 children in the EHS CCP and 119 in the Head Start program.

The San Antonio City Council's Community Health and Equity Committee served as the City of San Antonio, Department of Human Services (DHS) Head Start's governing body (GB). The GB and the DHS Head Start program partnered with each other and key management staff to develop, review, and approve program policies and planning items. The GB provided oversight of specific DHS Head Start program functions and received monthly fiscal and program reports, which were provided one week before each scheduled meeting. Training opportunities were presented to the governing body and the policy council.

The program used the Municipality of Department of Systems Application and Products and Data Processing (SAP). The use of SAP, along with internal controls of state, ensured the program met state and federal regulations. Multiple funding streams, state local and federal. Before the start of the grant year, the city created a grant fund that was unique grant number and fund number then broken out into internal order programmatic cost and administrative cost and individual orders for childcare providers.

----- End of Report -----