

# Maryland Head Start State Collaboration Office Needs Assessment Report and Strategic Plan 2014-2015



## PROJECT LEADERSHIP:

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## **INTRODUCTION**

The Maryland State Department of Education (MSDE) oversees a wide array of programs focused on improving school readiness for all young children in the state. One important component of MSDE's commitment to closing the gap in achievement for young children growing up in poverty is its continued collaboration with and support of the Head Start program. Since July 2003, the state's Head Start Collaboration Office (MDHSSCO) has been housed at MSDE. MSDE has been the administrator of the Head Start collaboration grant and provides technical assistance in aligning Head Start services with those of early learning programs in the public schools.

To meet the requirements of the **Improving Head Start for School Readiness Act of 2007**, MSDE, through the MDHSSCO and the Maryland Head Start Association (MHSA) undertook the joint project of a needs assessment -- initiated for the first time in 2009-- of the Early Head Start and Head Start programs in Maryland. Using the results of the assessment process, the MHSA and the Collaboration Office also worked together to develop an updated strategic plan for 2013-2014.

## **HEAD START STATE COLLABORATION GRANTS**

Since 1990, the Office of Head Start has funded Head Start State Collaboration grants to support the development of multi-agency and public/private partnerships at the state level. States are to use these grant funds to:

- (i) assist Head Start agencies to collaborate with entities involved in State and local planning processes to better meet the needs of low-income children from birth to school entry, and their families;
- (ii) assist Head Start agencies to coordinate activities with the State agency responsible for administering the State program carried out under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858 et seq.) and entities providing resource and referral services in the State, to make full-working-day and full calendar year services available to children;
- (iii) promote alignment of curricula used in Head Start programs and continuity of services with the Head Start Child Outcomes Framework and, as appropriate, State early learning standards;
- (iv) promote better linkages between Head Start agencies and other child and family agencies, including agencies that provide health, mental health, or family services, or other child or family supportive services, such as services provided

under section 619 or part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and

(v) carry out the activities of the State Director of Head Start  
Collaboration authorized in paragraph (4).

*(Sec. 642B. of H.S. Act of 2007)*

## **HEAD START PROGRAMS IN MARYLAND**

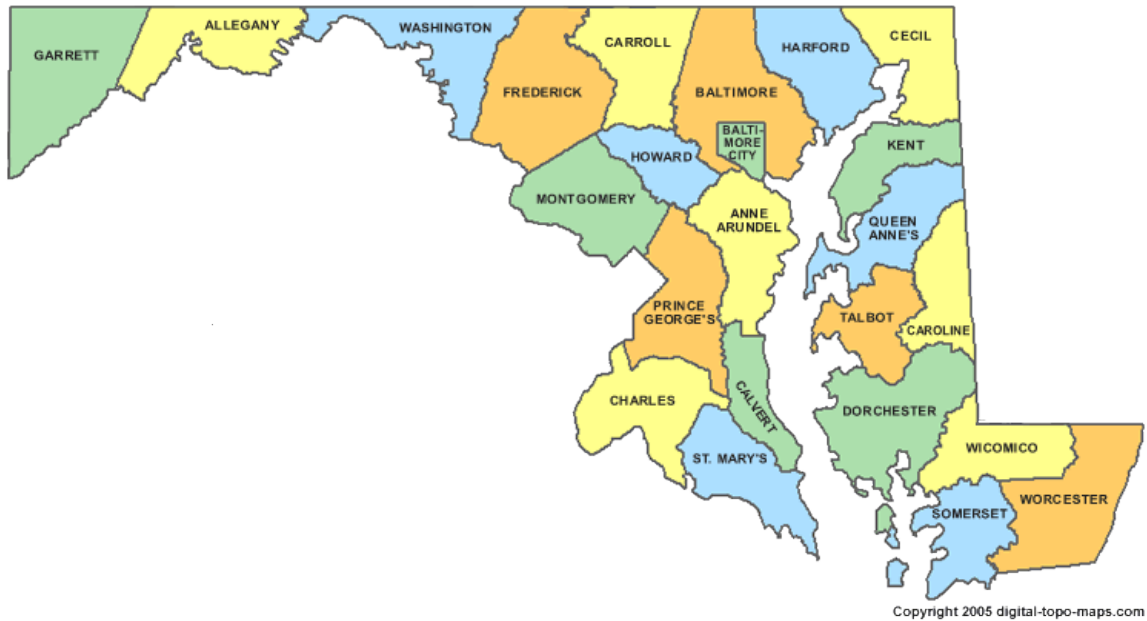
In Maryland, as of September 4, 2013, \$85,084,815 in federal grant funds was dispersed to twenty-two (22) Head Start or Early Head Start grantees. These Maryland grantee and delegate agencies were funded to serve 11,007 children. Seven (7) agencies operate both Head Start and Early Head Start programs. These program numbers are current as of September 4, 2013.

There are forty-four (44) programs that provide services through a diverse group of program designs. Direct services are provided through nineteen (19) Early Head State programs, which serve pregnant women and children under three years old; and twenty-five (25) Head Start programs which serve children aged three (3) to five (5) years old. Seven (7) agencies have both Head Start and Early Head Start programs and four (4) grantees do not provide direct services, but have delegate agencies that provide services. Head Start Programs serve children in all 24 jurisdictions within the state; however, Early Head Start is only found in 13 counties and Baltimore City.

The list of grantee and delegate organizations makes for a diverse set of operating styles, procedures and locally designed strategies to attain various school readiness goals. Yet all follow the national Head Start Performance Standards for providing quality services to children and families. The grantees and delegate agencies include four (4) public school districts, twelve (12) community action agencies, five (5) government agencies (non CAA), fourteen (14) private non-profits, two (2) YMCA programs, and nine (9) programs with faith-based organization affiliations.

Enrollment data from the Program Information Report dated 2012-2013 indicates 12,747 low-income children and 134 pregnant women received services from Head Start and Early Head Start programs in Maryland. Most of the children served were 3 and 4 year olds, and the majority of families were determined to be eligible based upon their income being below 100% of the federal poverty level. Others were deemed eligible based on their membership in categorically eligible groups. Special populations served include:

- 60% African American;
- 11% children with disabilities; and
- 19% English Language Learners



(Source: Annual PIR Reports)

In addition to the based federal grants, Head Start programs are responsible for the attainment of a 25% local contribution or non-federal share, also called in-kind. The collective in-kind goal of Maryland Head Start Programs is over \$20 million.

One of the local contributions to Head Start programs comes from supplemental state funds through the Maryland State Department of Education (MSDE). MSDE supplements federal money received for Head Start to expand the number of high quality, comprehensive programs available to children across the state.

In the past, MSDE's investment of \$3 million in State Head Start and Early Head Start Supplemental Funding for program expansion and quality improvement has resulted in full-day, full-year services in many jurisdictions. However, in 2009, budget cuts made by the Maryland General Assembly reduced this amount by 40% and programs were budgeted to receive \$1.8 million for the 2009-2010 grant cycle. In 2013-2014, the appropriation for the Head Start and Early Head Start Supplemental was again \$1.8 million.

MSDE's Division of Early Childhood Development (DECD) has also helped promote Head Start participation in the Maryland Quality Rating Improvement System known as Maryland EXCELS. Currently 94 sites are participating in EXCELS and others have begun the process. Around the State, the DECD Quality Support Specialists and the Maryland Child Care Resource and Referral Network technical assistance staff have worked with Head Start programs to facilitate their enrollment.

## **NEEDS ASSESSMENT UPDATE PROJECT**

The **Improving Head Start for School Readiness Act of 2007**, requires that each year *“the State Director of Head Start Collaboration shall conduct an assessment that addresses the needs of Head Start agencies in the State with respect to collaboration, coordination and alignment of services, and alignment of curricula and assessments used in Head Start programs with the Head Start Child Outcomes Framework and, as appropriate, State early learning standards.”*

In 2014, the purpose of this Needs Assessment project is to gather information from Head Start and Early Head Start programs to provide a comprehensive review of the collaboration efforts and activities between Head Start and other state entities and revisit the initial assessment conducted in 2009 and updated in subsequent years. This assessment shall also serve as a tool in updating the companion state-wide Strategic Plan that will guide the efforts of the Head Start community and determine priority areas for local collaboration efforts. The results of this assessment will help the Maryland Head Start State Collaboration Office determine how to better assist local Head Start and Early Head Start programs in improving collaboration with local community partners.

### **Methodology**

This update assessment process consisted of four components: (1) a day-long focus group in April attended by Head Start community representatives, (2) a two hour focus group during the MHSA Spring Training Conference in May, (3) an abbreviated version of the Needs Assessment Survey tool administered online to garner qualitative data on collaboration and a (4) final day-long focus group of Head Start community representatives used as a validation focus group of Head Start community representatives to comment on the results of the initial focus groups and the online survey data.

#### ***First Focus Group Methodology***

The Maryland State Collaboration Office worked with the MHSA to facilitate a focus group of Maryland Head Start Program administrators, staff and community partners. On April 11th, ten (10) Head Start and school readiness leaders met at MSDE offices in Ellicott City for a day-long focus group. The focus group consisted of two activities, a SWOT Analysis exercise and a discussion of the changes since the last Needs Assessment.

The Focus Group allowed participants to do a SWOT Analysis (Strengths, Weaknesses, Opportunities, and Threats) of Head Start and Early Childhood Education in the state of Maryland, with an emphasis on collaboration and partnerships, both internal (MSDE, MHSA and the T&TA Network) and external (all local, state and federal entities). There were two opportunities for commentary during this activity: (1) written and (2) verbal.

First attendees were asked to write down their thoughts on each of the four SWOT categories on post-its. Then they were to place them on the wall under that SWOT category. Working in teams of two or three, the participants were then asked to group common observations. These groupings were then discussed as a team and given a subtitle within the SWOT category that would encompass the overall theme of the observations. Lastly, teams were asked to give an overall theme for the entire SWOT category. Each of these tasks was preceded by the rotating of the teams to the next SWOT category; thus each team had input in each of the four SWOT categories.

Then using the 2013 Needs Assessment and the eleven Federal priority areas for the HSSCOs as a guide, the facilitator led the discussion in each area with a question directly related to the previous year's assessment results in an effort to determine levels of improvement. For example, for the Health content area, participants reviewed the Goals and Objectives:

**GOAL:** Improve the availability and access to quality, coordinated health services for Head Start children and families.

**Objective 1:** Improve the access to oral health services for Early Head Start and Head Start children.

**Objective 2:** Improve the access to mental health services for Head Start children

**Objective 3:** Improve parent and staff knowledge on health services

And were then asked the question:

***“In the past year, has your access to oral health services or mental health services improved or been more difficult?”***

Commentary on each of the content areas was divided into four categories. Participants were asked to identify and discuss (1) **challenges** and (2) **resources** that exist within the state, (3) to make general **observations** and (4) to give suggestions of possible **strategies** the MDHSSCO and MHSA might employ to mitigate the challenges they cited.

Through the employment of several additional open ended questions throughout the focus group process, the participants were able to convey qualitative data on current levels of collaboration.

### ***Survey Methodology***

The Maryland State Collaboration Office contracted with the Maryland Head Start Association (MHSA) to administer the Needs Assessment Tool; which was developed by the national consortium of State Collaboration Offices.

The specific focus of the needs assessment tool was determining the levels of cooperation, coordination, and collaboration within eleven key activity/content areas:

1. Health Services;
2. Services for Children Experiencing Homelessness;
3. Welfare//Child Welfare
4. Child Care;
5. Family Literacy;
6. Services for Children with Disabilities;
7. Community Services;
8. Education (School Readiness, Head Start – Pre-K Partnership Development);
9. School Transitions, Alignment with K-12;
10. Professional Development; and
11. Early Childhood Systems Development

While the complete survey includes three parts for each of the content areas indicated above, for this 2014 update process, participants were only asked to complete the Part 3.

Part 3 included two open-ended questions. The first gave agencies an opportunity to document any concerns related to the content area. The second question gave agencies the opportunity to document what is working well in their program, and to indicate if any of these successful strategies/activities may be helpful to other programs.

### ***Second Focus Group***

As a follow-up to the initial focus group and prior to the online survey, there was an abbreviated focus group, on the 6<sup>th</sup> of May, as part of the programming for the 2014 MHSA Spring Training Conference. This was a less formal dinner time discussion, where participants were asked open ended questions about collaboration in Maryland.

### ***Validation Focus Group***

As a follow-up to the initial focus group and survey, the Assessment Team held a final validation focus group. An additional nine (9) participants met after reviewing the initial draft of the needs assessment report and strategic plan.

The focus group and survey results sections of the report were reviewed by content area and participants were asked if they agreed with the results and assessments. They were asked if they knew of any supporting or contradictory information and they were offered an opportunity for additional comments. Likewise, participants were asked to give their further suggestions on possible areas for improvement and strategies for improvement for the strategic plan.

## **RESULTS**

### ***SWOT Analysis Results from First Focus Group***

## **STRENGTHS**

Overall Theme Statement: **We make use of multiple collaborative efforts and opportunities through expanded communication, professional development and community resources**

### **Information Technology**

- Technology Needs Assessment for Program Needs (hardware and training)
- Website

### **Professional Development**

- Promotion of professional development activities – MHSA, MSDE, MAEYC – better collaboration
- Programs that support ongoing professional development
- Partner with Maryland AEYC and local regional affiliates with 800+ members for accreditation, advocacy and professional development.
- There is a state-wide QRIS (MD EXCELS) and Race to the Top funds
- Providing quality training at conferences

### **Partnerships**

- Judy Centers
- Community Hubs
- Breakthrough Centers
- Multiple levels of services for families: Judy Centers, Pre-K
- Rigorous licensing for private providers
- Professional Development: Collaboration with other early childhood programs in the state

### **Government Support**

- Federal Support of ECE
- Support from Governor's Office
- Strong state support, supported advocacy for ECE
- Promote understanding of federal support through our family engagement programs

### **Program Collaboration/Support**

- Collaboration with county agencies
- Diversity
- Relationships
- Program Collaborations
- Train Staff on how to collaborate

### **Additional Notes:**

- Strength in Numbers
- Opportunities for development across areas
- Across the board win-win

## **Weaknesses**

Overall Theme Statement: **Training of Leaders in Administration, Management and Collaboration**

### **Engagement**

- Stronger support [needed] within MHSA membership – How to engage?

### **Access**

- Public exposure
- Support of/to website
- Some people are the [only] ones at the table

### **Education**

- Education
- Access to education for staff and providers
- Collaboration with the community partners, schools and universities

### **Adequate Amount of Services**

- 3 year old programs
- Caseloads

### **Money/Funding**

- Money
- Funding
- Need for workshops on funding

### **Structure**

- Technology
- Lack of coordination across jurisdictions (from one county to another; not consistent across the state)
- Restructuring human resources
- Increase access of technology and user friendliness
- Roles of positions [unclear]
- [Need for] reassignment of roles and position to better match competencies/restructuring of program delivery of services
- Lack of coordination across service providers (EHS->HS; HS->PreK; home ->Judy Center->PreK/K)
- Possible barrier – to collaborate while maintaining fidelity to program and mandates

## **Opportunities**

Overall Theme Statement: **ReVisit ReNew Revise**

**Collaboration**

- Local ECAC – Collaboration among local partners for ECAC
- Linkage to what's happening in Head Start Community
- Linkage to partnership within Community
- To restructure to shore up weaknesses
- Create new and on-going collaboration opportunities
- Reevaluate and renew the current needs with partnerships

**Public Awareness**

- Communication
- Social Media

**Increase School Readiness/Child Development**

- Education
- Common Core
- To become best Head Start state
- Data driven instruction given by staff who are knowledgeable in a loving atmosphere

**Career Development/Advancement**

- Create and sustain a career ladder in ECE with salaries equal to the public school teachers
- Support Head Start staff to reap the benefits of membership in NAEYC/MdAEYC and local regional affiliates
- Advancement

**Stability, Funding, Systems Development**

- Program Expansion legislation
- ECAC
- New Legislation
- Fully funded
- Increased Partnerships
- Fully Funded and Sustainable

**Partnerships**

- Types of services
- Local ECAC – Accountability
- Early Head Start Programs
- Home Visiting
- Local Agencies
- Local School districts
- All Day Pre-K
- Family and Center Childcare

## **Threats**

**Overall Statement: Increased Political Awareness and Support of Early Learning Individually and Societally Equals an Increase in Funding**

### **Grants & Funding**

- Money
- Increase awareness of resources and funding options to reduce redundancy and duplication
- Diversifying funding streams (federal, local, foundation)
- Resources
- Overlapping of services waste of money could be used for other services or programs
- Grants and Funding

### **Re-competition**

- Need for staff development
- Need for greater data collection and analysis at program level
- Need for collaboration with community partners

### **Political Issues**

- Lack of support
- Change in leadership in state, MSDE, federal
- Concerns over too much money being focused on early childhood rather than later years
- Knowledge of legislative agenda too late in the session
- Timely legislative visits (Annapolis, Day on the Hill) on a consistent schedule
- Education of participating staff and parents on the democratic/legislative process

## ***Survey Results***

### **Population**

There were twenty-three (23) participants who entered the online survey tool, however, only fifteen (15) resulted in usable participants. The criterion for elimination for the survey population was based on whether the participant failed to answer at least one of the open ended questions. If a participant answered at least one question, even if they failed to include their name or title, they were included in the analysis.

Of the fifteen (15) participants, twelve (12) different agencies/organizations were represented. Not all participants indicated their organization and title. The number in parenthesis after the entity indicates the number of subjects from that agency when more than one person from that agency participated.

1. Allegany County Human Resources Development Commission, Inc. Head Start

2. Baltimore City Head Start Program
3. Kennedy Krieger Institute Southeast Baltimore Early Head Start
4. Martin Luther King Jr. Early Head Start
5. Prince George's County Public Schools Head Start (2)
6. St. Jerome's Head Start
7. Y of Central Maryland Head Start
8. Other (4)
  - a. MSDE DECD Maryland EXCELS
  - b. Chesapeake College
  - c. DHMH, Office of Oral Health
  - d. A to Z Consulting

There were eleven (11) different titles represented among the survey population. Of these, nine would be considered actual job or leadership titles within Head Start or other organizations. They are listed below.

#### Title Representation:

- |                                 |   |
|---------------------------------|---|
| 1. Executive Director           | 7. HSSCO Evaluator                          |
| 2. Quality Assurance Specialist | 8. Director                                 |
| 3. Teacher                      | 9. Clinical Dental Public Health Specialist |
| 4. Ms.                          | 10. ECE Consultant                          |
| 5. Health Care Tech.            | 11. mcl                                     |
| 6. Assistant Director           |   |

## **Results by Content Area**

The following are the results of the survey and focus groups by the eleven key activity/content areas. The responses to the survey tool are listed first, followed by the results of the various focus groups. The results for the online survey are presented as they were written with no corrections for spelling or grammar.

## **Health Care**

### **Survey Results**

**Please describe any collaboration/outreach issues you may have regarding health care for the children and families in your program.**

- Difficulty obtaining follow up from physicians who only allow parents to pick up documents in areas with limited transportation.

- Collaborating with specialists who need a certain number of children to commit to providing services to our program
- Outreach activities were good but the people working for the agency to do the outreach are seem incapable of good service.
- My child has not been to the dentist yet.
- Dental screenings for our children in all our counties. In Caroline County we have arranged a dentist to come do screenings for our children, however no other counties have been able to make this partnership. In addition to this for children who start late miss out on this opportunity.
- If the physicians would all be on the page when it comes to completing physicals for our Head Start Children. Some doctors do the TB test and others do not. This is an requirement to be medically cleared for enrollment. They should all folow the EPSDT for the state of Maryland
- Our collaboration/outreach issue continues to involve the outlying areas, as services are quite a distance and transportation is not readily available.
- Baltimore City Health Dept. and Family League Baby Basics program. B'More for Babies North and southeast, Highlandtown Health Center
- Our office would like to increase it's reach with programs throughout the state, offering oral health education, oral health resources and assistance with oral health case management.
- Obtaining updated health information from doctors in a good time frame. Making sure that doctors fill all health information that is required.

**What is working well in your efforts to address the health care needs of the children and families in your program?? Which of these efforts do you think may be helpful to other programs?**

- Partnerships with specialists and foster homes - A part time consultant in Dentistry and health service -Collaborating with other health service coordinators with in the area to swap resources or to identify solutions to problems.
- working with the Health Department and local doctors.

- Health care needs are just initial diagnosis/prognosis but no or insincere follow-ups are made about the initial diagnosis/prognosis.
- It helped to have dentists come to her school and give her a check-up. It is also helpful to have small informational sessions to teach parents how to properly care for our children and potential health situations.
- Our family services department create FPA's and list health care needs if applicable on them to help monitor their progress.
- Receiving physicals upon entry really works. We have time to assess the child and to make any emergency arrangements for children with special needs or health issues etc.
- Our collaboration with local dentist's offices has proven effective in meeting the dental needs of our program. Dentists visit the centers and complete dental screenings on all children. We are excited to be participating in the "Mission" this year under the Department of Defense. Residents of Allegany County will be given the opportunity to receive health and wellness exams, as well as veterinary services for animals at no cost. In addition, participants will receive eye exams and receive eye glass prescriptions as needed.
- Baby Basics prenatal education, Mom's clubs for pregnant moms
- I have been asked to attend the Baltimore City Health Advisory Meetings. If other programs/grantees have health advisory committees I would love to attend!
- The health advisory is a great forum to get information to and from our community partners,
- the willingness of collaborative agencies to work with head start staff to provide adequate services to head start families.

## **Health Care – Focus Group Results**

### **Challenges**

- Medical providers hours don't match parent availability
- Parents lack transportation to get to medical providers
- There are limited mental health services while demand is increasing
- Families have difficulty completing forms correctly and completely

- Insurance complications - families let coverage expire; medical providers don't accept the insurance provider selected by the family; insurance only covers limited services, not all that family needs; medical providers using the wrong codes for MCHIP services
- Limited medical providers for adults
- Medical providers offering services for low-income patients have limited hours or locations
- Language barriers for families with limited English proficiency
  - Getting parents to appointments.
  - More information is required for hours and/or transportation
  - Wait list for mental health is Washington city; the demand is much greater than the supply.
  - Filling out documentation correctly for providers.
  - Insurance coverage is dated. There is often a lapse with insurance
  - Coding documentation is inaccurate.
  - Limited providers for adults. Statewide/nationwide
  - Provider services or hour are limited
- Language and translation of forms are challenging

## **Resources**

- University of Maryland: The Dental School now has traveling dentists to Baltimore City
- Implementation of new Health Care Act is helpful
- Community Health Advisory is an resources
- Montgomery County Family Services (the Laurie Center)
- Annual Health Fair and Mobile Dentists with St. Jerome
- In conjunction with the Elementary School
- Calvert Memorial Hospital

## **Observations**

- Improvements in UMD dental school services for low-income patients; mobile services available for those with insurance
- Affordable care Act has increased insurance coverage across the state
- Head Start program at St. Jerome's has active and well-represented Health Services Advisory Committee (HSAC)
- Head Start program at St Jerome's hosts and annual health fair for families with multiple community partners
- EHS programs at Family Services, Inc., and The Lourie Center send representatives to each other's HSACs
- Head Start program at UMOJA hosts annual health fair with partner elementary school
- Calvert County Judy Center holds oral health event in collaboration with Southern Maryland College
- Montgomery county Public Schools (MCPS) has an eligibility specialist with office in the same building as Head start enrollment; HS staff can send families to enroll in medical insurance and other benefits without needing second appointment

## **Services for Children Experiencing Homelessness**

### **Survey Results**

**Please describe any other issues you may have regarding services for children and families in your program experiencing homelessness.**

- Referral to get into the shelter • Attendance issues at Head Start • Hard to contact due to changing phone numbers/addresses • Transitional housing • Very transient • Not knowing they are by definition “homeless” when they first come in.
- I have referred two families this year who had issues with their residence and on to call the family social service worker assigned in our class but so far no one made a concrete help for the families. I found other numbers to call from the school secretary and guidance counselor (the homeless office number). Personnel are not pro-active.
- I know there is a homeless shelter in the school.
- No problems.
- Our issue in this area has to do with the initial identification of families who may be experiencing homelessness. Often families are reluctant to share this information. However, once identified the family is automatically placed into our program and begin receiving necessary services.
- difficult to serve families in shelters, many moms move from one home to another, in and out of our catchment area. Transportation is a barrier to these families.
- the lack of solicited agencies to work with our population

**What is working well in your efforts to address the housing needs of the children and families in your program who are experiencing homelessness? Which of these efforts do you think may be helpful to other programs?**

- Referral to shelters and affordable housing • Job search assistance • Recruitment at shelters for Head Start • Assistance with accessing social services
- I don't know what is going on in the school district but the homeless office seem to be doing what they're supposed to
- It seems to be helpful to have homeless services in the same building.

- Follow school systems procedures
- More outreach and awareness has proven effective, as we have served more families experiencing homelessness than in previous years.
- We try to be as flexible as possible, ensuring that the child's life is disrupted as little as possible.
- We are identifying and linking these families to resources sooner in our program.
- social services networks that assist with housing placements for families who are experiencing homelessness or displacement.

## **Services for Children Experiencing Homelessness – Focus Group Results**

### **Challenges**

- Families working together
- MOU – Having implementing = territorial issues
- When natural Fathers are involved in the process with facilities that creates problems

### **Resources**

- MCPS coordination with Transportation Department; knowledgeable individuals working across services
- Dayspring program transitional home for families
- Various Head Start programs establish contacts in the local Housing Department to facilitate access to services for HS families
- Consistent education about Head Start programs to the facilities
- Judy Centers
- Department of Housing
- MTA
- Day Spring Transitional Home

### **Observations**

- Is there a database for schools and other providers to jointly access family records and improve timeliness and access to services?
- Each School System should have a knowledgeable responsibility for these children and families.

## **Welfare/Child Welfare**

### **Survey Results**

**Please describe any other issues you may have regarding the welfare/child welfare (family/child assistance) needs of the children and families in your program.**

- Doctors do not always complete the necessary information to be in compliance for example, won't include lead results, entire physical, or only immunization records.
  - More Parent education is needed
  - Doctors charging parents to fill out health forms
- Families need counseling services like for a mother experiencing abuse at home or at the edge of divorce or separation.
- The directors and family coordinators are always very helpful.
- None at this time
- Once again, ensuring that families residing in outlying areas receive adequate/timely service.
- Teen parents find it difficult when their relationship with their own parent is strained. Grandparents often will not complete paperwork to help teen mom access needed services. Many new immigrant families are not able to access assistance, when a family is in trouble, it is difficult to find them the assistance they need.
- Helping parents find time sensitive work activity programs that match our program hours.

**What is working well in your efforts to address the welfare/child welfare (family/child assistance) needs of children and families in your program, Which of these efforts do you think may be helpful to other programs?**

- Family Strength and Needs Assessments • Home Visits • FPA Process • Parent Surveys • Building relationships • Intentionally planning based on the need of the community and families. • Presenters coming in to educate parents on different topics
- Family social service worker calls or visit the home
- It works well to have the directors and family counselors readily available to the parents.

- None at this time
- Having a collaborative relationship with other community resources/organizations has been helpful. Families with needs tend to be identified more quickly and duplication of services is often eliminated.
- enlist the help of Family Services if necessary. Family preservation sometimes helps teen moms.
- The promotion of said services by staff and outside agency

## **Welfare/Child Welfare – Focus Group Results**

### **Challenges**

- Many Head Start programs don't operate for a full day and are not convenient for parent work schedules
- Parents do not submit complete or accurate weekly work activities forms to demonstrate eligibility for Child Care Subsidies/TANIF/other benefits
- Confidentiality for families that have services through DSS.
- Hours of operation.
- More flexibility and way around extended day 20-30 hours work.
- Criteria to meet the subsidies.
- Turn in activities hours and documents.
- Documentation process is being more and more difficult to complete for successful outcome.
- Copies of documentations and forms are not readily accessible.
- The focuses are different and vary county to county.
- The processes, steps, and requirements for families are different and vary from county to county.

### **Resources**

- Could scanned copies be collected at Head Start programs, or by other providers who help families to complete forms, to then be sent directly to DSS?
- Head Start programs which educate families on the benefits process and how to advocate for themselves; how to take on responsibilities that staff have handled for them; parent empowerment
- Head start programs could have PDFs of state forms on their program Website for families to access and print as needed/after hours
- Work on building partner relationships
- Head Start needs a stronger presence and seat at the table for discussions and decisions.

- There is in place now a person who sits on both DSS and Head Start Staff in Rockville to support this issue.
- There is training available for this needs assessment once yearly.
- MCAG County has a governing agency = HAS (?)

### **Observations**

- On-going challenge in some jurisdictions for collaboration across service providers (public and private); may be because of confidentiality concerns
- Importance of relationships between staff in different agencies
- Montgomery county community Action agency is housed in the county Dept. of Health and human Services, so staff attend a variety of meetings jointly and have frequent communication
- Baltimore City DSS allows Head Start staff to attend monthly meetings
- Could MHSA advocate for a state mandate of DSS/Head Start collaboration?
- Could the Governor's Office require DSS/Child Welfare partnerships with Head Start programs?
- Improvements are needed to state and local agency Websites to provide resources/information when staff not available to families; improved access to SAIL

## **Child Care**

### **Survey Results**

**Please describe any other issues you may have regarding access to child care services and resources?**

- Affordability • Child Support obligation to get vouchers • Little access to quality child care
- too long to get response
- I have had issues in the past with childcare.
- The waiting list for Child care in the state of Maryland is closed
- Affordable Birth to 3 Child Care is an ongoing need in Allegany County.
- There is very little licensed childcare services in this area of the city that accepts child care vouchers. It is difficult for most parents to get the vouchers. Most children needing childcare use families or friends. Few have quality child care.

- The process and waiting list to get a daycare vouchers is extremely.
- Families being in limbo about what future holds for their children in the upcoming school year

**What is working well in your efforts to address the child care needs of the children and families in your program? Which of these efforts do you think may be helpful to other programs?**

- Offer the 90/45 hr courses • Giving information on licensed providers • Building partnerships with licensed/quality providers as a resource • Transportation to/from child care providers
- homevisit
- Not much was done to assist me with this effort.
- Our Early Head Start Program is full with a substantial waitlist.
- offering parents information on public school enrollment

## **Child Care – Focus Group Results**

### **Challenges**

- Head Start program hours don't match parent work hours, even with wrap-around services
- Child Care Subsidies don't cover full cost when a child has to attend two separate programs
- Conflict with hours of operation
- Child Care subsidies
- Transportation

### **Resources**

- Community child care providers which provide transportation to children from Head Start to their child care program
- Head Start Policy Council with child care providers who serve as community representatives
- Helping child care providers make use of substitutes in order for them to attend professional development sessions
- Judy Centers
- St. Jerome's Head Start Program
- Umoja

- Child Care Providers
- Stakeholders

### **Observations**

- Judy Centers are often well connected to local child care providers because of the resources offered
- Do Head Start/child care providers see each other as competitors in local communities?
- How to send MHSA partner scholarship information directly to child care providers to account for the Head Start programs that do not forward information?
- Child care providers eager to take advantage of free training opportunities
- Scholarships for Conferencing
- Scholarship announcements should be sent directly to Day care centers
- Philosophy of needs cannot remain in a bubble
- Access to Maryland Database

## **Family Literacy Services**

### **Survey Results**

**Please describe any other issues you may have regarding family literacy services and resources?**

- Libraries don't always service undocumented families • GED for Spanish speaking families are hard to find • Many community agencies aren't willing to offer no cost/low cost services such as GED/ABE. • Child care is often not available when parents are able to take the classes.
- none
- materials are not always translated to home language, families doesn't seem to care since attendance for literacy activities are not mandatory
- The program provides different classes like the 90 hour childcare license that helps.
- None
- SEEHS is part of the City Health Departments Literacy project. It has been very successful.
- The Baltimore County libraries are open 7 days a week.

- our literacy coordinator doesn't push literacy on a wide scale, minimal effort is displayed in doing literacy activities etc.

**What is working well in your efforts to address the literacy needs of the families in your program? Which of these efforts do you think may be helpful to other programs?**

- Collaboration with some community partners such as library, Judy center, etc.
- Allegany Co. Early Childhood Advisory Council - Literacy Sub-committee Judy Center Allegany Public library
- Mandatory attendance at least once a month for whatever activities in school
- Training programs are very helpful. They also help parents obtain licenses, training, and certifications.
- None
- Collaboration with our local Library System and Judy Center, has yielded a summer reading program, lending library, literacy night for families, etc...
- SEEHS creates a cozy corner in each home, brings out donated quilts and books to help parents create a child's ready area to enhance the love of books and literacy. Activity kits are used from the City's Health Literacy project. Parents love the activities and having books to keep.
- Rasing a Reader is a great resources and our families are loving the quality time with their children.
- haven't had literacy activities thus far

**Family Literacy Services – Focus Group Results**

**Challenges**

- Head Start programs have cut back on field trips because of budget limitations
- Fresh New trip ideas are not implemented for example, annual trip to zoo or weekly trip to libraries are available.
- Budgets and Funding for activities are very low

**Resources**

- Weekly/monthly trips to local libraries (walking, city bus)
- Have library staff come to Head Start programs

- Head Start programs can host in-house literacy events for families
- Port Discovery -- One county has a trip to Port Discovery
- Kohl's Care for Kids book donations
- Reach Out and read
- Ready At Five Learning Parties (affordable materials; Head Start staff can be trained to facilitate)
- VIOLETS
- First Book grants and discount books
- Judy Center Literacy events
- Raising a Reader program
- Target stores grants for local programs
- Science Center grants
- Maryland Extension Office
- Head Start programs can provide books for "take home libraries" in each classroom
- Read for the Record is available (this is available to promote Family Literacy)
- National Court
- Literacy Workshop
- Reach Out and Read
- Ready at Five
- Nutrition Education Programs
- Oral Health Learning

### **Observations**

- How to thread literacy and language development across learning domains?

## **Services for Children with Disabilities**

### **Survey Results**

**Please describe any other issues you may have regarding services for children with disabilities and their families**

- long wait and process
- I am unsure about this.
- None
- all referrals go to BITP.
- lack of recruitment for families that have children with disabilities.

**What is working well in your efforts to address the needs of children with disabilities in your program? Which of these efforts do you think may be helpful to other programs?**

- Collaborative efforts with Infants and Toddlers program and local Child Find Office. We have streamlined our referral process working cooperatively with both partners to create forms that meet the needs of both programs. This process created a direct line to our Disability Coordinator which has increased our enrollment of children with disabilities.
- immediate response
- None
- Our working relationship with the Board of Education, our LEA.
- our disabilities coordinators willingness to be flexible and work with families/staff and outside agencies to address children's with disabilities needs.

## **Services for Children with Disabilities – Focus Group Results**

### **Challenges**

- Delay in start of services at the local level once the diagnosis is received and a need for services is established
- Everybody has been included
- Delivery of services is questionable

### **Resources**

- Monthly parent support groups for parents of children receiving services
- Facilitating transition meetings for children exiting Head Start and going to elementary school
- Increase professional development opportunities for teachers to learn better IEP goal writing/use skills
- Prince George's County Public Schools has classrooms co-taught with 4 teachers (2 Special Educators) to facilitate inclusion
- Monthly Support Group through Head Start
- Teaching and training has increased

### **Observations**

- Several public schools include Head Start staff to IEP and transition meetings; good partnerships for families
- The extended IFSP program has benefited many families

## **Community Services**

### **Survey Results**

**Please describe any other issues you may have regarding community services for the families in your program?**

- Social services and some other agencies don't respect Head Start. • Lack of services in Baltimore County in comparison to neighboring cities. • Community agencies not willing to work with families on cost for different services such driving schools. • In regards to WIC, some parents do not want to take the classes or can't make it to the classes • A lot of agencies don't offer evening or weekend hours to access the services
- poor information dissemination and not much services located in closer areas to the families home
- Community service is always encouraged.
- None
- Again, reaching outlying areas in an effective manner.
- SEEHS wil be partnerring with a JUDY center this fall. It will greatly help with referrals to community services.
- None

**What is working well in your efforts to address the community services needs of the families in your program? Which of these efforts do you think may be helpful to other programs?**

- Community partnership specialist in place to build strong relationships and MOU's with community partners. • Having a liaison that works with the community partnership specialist in each center to make sure information is given out or resources accessible (The FSA ).
- school based
- It appears that community service is a part of our program. We often utilize local/community resources. It would be more helpful to have more programs where the community is envolved maybe with jobs and training.
- None

- Our collaboration and referral process with community agencies and organizations.
- Our program is very involved with the community.
- partnerships with community agencies, community reps etc

## **Community Services – Focus Group Results**

### **Challenges**

- Loss of partners like the Lions Club and Masons
- Balancing of Duties and responsibilities

### **Resources**

- MCPS holds a community resource forum for public and private providers to learn about each other's services
- Using social media for collaborations/meet-ups/pooling resources
- Inviting volunteer partners to luncheon for them to network THROUGH the Head Start program, not independent of the program
- Accessing young professionals networks
- PNC and other corporations which have volunteer programs
- Electronic advertising/screens at bars/MVA/Walmart which can be used to advertise services and events
- Resource Book
- Boys and Girls Clubs
- Marketing Team Red, White and Blue

### **Observations**

- Teaching Head Start staff about collaboration strategies and methods
- Training in administration and management
- Changing the dialogue/the ask so Head Start requests seem fresh/new
- Making use of existing health/service organizations which can connect to Head Start services
- Male engagement for both volunteer programs and providers
- Newer organizations are better funded and accepted
- Senior organizations are no longer cultivated
- Proactivity is now required
- Suggestion of a volunteer luncheon
- Young Professionals Organization participation is helpful and welcomed

## **Education**

### **Survey Results**

**Please describe any other issues you may have regarding partnership development with Local Educational Agencies in your service areas.**

- none
- Pro-active administration
- It is difficult to to transfer children from early head start to head start and it is also difficult to get siblings into programs. That should not be.
- None
- only BITP – Baltimore Infant and Toddler Program
- none

**What is working well in your efforts to develop partnerships with Local Education Agencies managing pre-k programs in your service areas? Which of these efforts do you think may be helpful to other programs?**

- We currently have a MOU with Baltimore County Public Schools that details tasks and responsibilities for each partner that supports our missions. What works well is open communication regarding changes in both programs.
- Board of Education works well with us in Garrett, Allegany and Washington Co. So does the Judy Centers.
- Pro-active administration
- Please have relationships with other programs so transitions can be smooth.
- None
- We have a wonderful working relationship with our LEA, as defined in our MOU.
- We have developed great partnerships one children are in the LEA.
- partnering with area schools that our children will filter to when their tenure at head start is over.

## **Education – Focus Group Results**

### **Challenges**

- Time constraints
- Limited follow-through
- Transportation from one provider to another for children in ½ day programs

### **Resources**

- Learning Parties
- Colleges which can provide classes/learning experiences for parents
- Transition visits by Head Start classrooms to PreK/K classrooms
- Kindergarten teacher meetings with Head Start teachers/family service workers for K teachers to learn about children entering the classroom
- Head Start programs getting authorization to sign for Student Service Learning hours required by public schools so programs become a choice for student volunteers

### **Observations**

- MANY Volunteers

## **School Transitions and Alignment**

### **Survey Results**

**Please describe any other issues you may have regarding Head Start transition and alignment with K-12 for the children and families in your program?**

- Resources are not aligned and poor information dissemination to families, limited information for those who have limited or no access to computer
- It is bad that the programs are unknown until the 11th hour. We have to coordinate drop-off and pick-up so we need to know what schools our children will attend. Last minute notice is very inconsiderate and unprofessional.
- None
- SEEHS now has SRG in place. presently there is no alignment with the local Head Start to share any information. Advocates help to transition all EHS children into a HS program, but there is not further interaction. with the move to the Early Learning Center, the program hopes to be able to offer more services for families with children ages 0-5, following them through Head Start.

- none

**In your efforts to address the education/Head Start transition to school needs of the children and families in your program, what is working well? Which of these efforts do you think may be helpful to other programs?**

- At the end of each school year children transitioning to Baltimore County Public Schools participate in Kindergarten Round Up activities that include reciprocal classroom visits by teachers; school tours for parents and children individually and some small group tours. Teachers complete a kindergarten transition form for each child entering kindergarten that indicates their skill level.
- having a good transition program in place with Board of Education and within the programs.
- curriculum sharing at least quarterly
- Please have programs in place to assist families. Many families feel like we have been thrust into the world of unknown.
- Our teaching staff participate in Articulation Meetings with Kindergarten teachers to discuss the progress and issues if any for each child transitioning. Also, a Kindergarten Teacher with the BOE provides a Kindergarten Readiness Night for families.
- None
- constant communication with both families and school agencies

## **School Transitions and Alignment – Focus Group Results**

### **Challenges**

- Difficulty scheduling with elementary school principals and teachers
- Identifying a LEA contact person to lock in for support
- Early registration vs. Late registration impacting planning

### **Resources**

- Baltimore City resource fair to get children ready for school by providing medical services, etc., so forms complete for enrollment
- Head start support of transition to Kindergarten by providing parent packets of public school materials and information
- Sibling services for kinder-bound children with younger siblings not enrolled in Head Start

- Judy Centers
- Transition Committees
- Public School Resource Fairs
- Recruitment Period

### **Observations**

- Head Start support in empowering parents with children going to Kindergarten to participate in the Open House/Kindergarten Registration Day/Moving Up visits provided by local schools
- Judy Center facilitation of families accessing spring Kindergarten registration on time, so no delay in classroom assignments in fall
- Kindergarten “round-ups” have to happen in fall because too many parents wait for the start of school to begin registration process

## **Professional Development**

### **Survey Results**

**Please describe any other issues you may have regarding professional development activities and resources?**

- too many information and activities are squeezed in a day, leaving no room to process information and practice what is learned
- More professional development programs would be nice, especially at different times to accommodate working parents that would like to attend.
- None
- lack of funds is hindering professional development.
- I was wondering why the Maryland Head Start Conferences do not include any workshops on a Saturday when more classroom teachers and assistant teachers might be able/encouraged to attend. On-line and in-service are useful, but staff also benefit from face to face training opportunities.
- None
- not enough time/funding for needed professional development opportunities

**What is working well in your efforts to address the professional development needs of your staff? Which of these efforts do you think may be helpful to other programs?**

- Professional development opportunities are offered monthly for all teaching staff. PD may be based on teacher preference and/or classroom performance. We find that continued PD has been key to our success by ensuring that teachers continue to grow and learn as they support positive outcomes for children.
- APPLES for Children provides professional Development. Garrett College is very helpful in these areas by providing a place to hold workshops. The local associations for childcare offers professional development as well as the Judy Center and Head Start.
- small and short /spread out activities and information
- Please have programs at different times. I felt I was penalized for having a job and working because I could not attend many functions.
- Our staff are provided an adequate amount of training annually.
- None
- on-line programs
- Staff are offered various workshop dates and time to get professional development activities scheduled.
- directors willingness to allow staff to attend trainings when coverage is available and when no cost is required from

**Professional Development – Focus Group Results**

**Challenges**

- Staff not keeping up with credentialing renewal; not accountable for their own oversight of credentials - lapses in credentialing

**Resources**

- All Head start programs have designated T/TA funds which should be available to all staff
- Programs schedule adequate number of professional development days to allow for training time
- MSCCA conference

- MSDE approved trainer meetings for MHSA to promote Spring and Fall conferences to qualified trainers to conduct workshops

### **Observations**

- Training opportunities provide staff with opportunities to improve professionalism and energizes employees in the work that they do
- Overall satisfaction with quality and variety of sessions at MHSA conferences
  - Add more child development sessions
  - Add more health and safety sessions: Autism, Selective Mutes, Dual Language
  - What are “inclusive practices; how to read and IFSP/IEP; lesson planning for children with disabilities – rather than sessions on specific disabilities because of time constraints
  - Hot topics – PFCE strategies; data analysis; data-driven decision-making
- Directors coordinating staff registration for targeted workshops when staff attend MHSA conferences
- Good MHSA conference structure to allow for one-day registration option
- Conduct surveys at MHSA conference to ask participants what additional workshops/info sessions were needed

## **Early Childhood Systems Development**

### **Survey Results**

**Please describe any other issues you may have regarding partnerships with early childhood systems efforts in your state?**

- no comment
- Lack of transparency. We, the parents feel we are the last to be informed of anything.
- None
- How do we encourage MDAEYC to partner more with MdHS programs and attaining NAEYC accreditation?
- oftentimes the unwillingness to be straightforward with head start staff about upcoming changes to program

**What is working well in your efforts to partner with early childhood systems initiatives in your state? Which of these efforts do you think may be helpful to other programs?**

- collaborative planning and small district planning
- Participating on the Policy Committee is helpful.
- None

## **Early Childhood Systems Development – Focus Group Results**

### **Challenges**

- Synchronizations – different software/data management systems being used at each public agency and at each Head Start program/family service provider; no way to share access to data and records collected to improve service coordination
- Affordability of the technology
- Limited number of Head Start programs participating in new Maryland ESXCELS (QRIS program); QRIS participation a factor considered by OHS when rating program quality; QRIS participation required by state legislature for Head start programs to access state funds/grants

### **Observations**

- Need for “multiple touches” approach to disseminating information to programs and staff (especially around QRIS requirements for funding) – e-mail, flyers, info sessions, special guest speakers, etc.
- Subsidy if you can get subsidy it is on the back of every invoice

## **AREAS FOR IMPROVEMENT**

*Unless otherwise indicated, references to Head Start are inclusive of Early Head Start*

Based on the results of the survey and the focus groups, the Maryland Head Start State Collaboration Office has identified 21 continued improvement objectives which will be reflected in the resulting Strategic Plan. They are:

### **HEALTH CARE**

1. Improve the access to oral health services for Early Head Start and Head Start children.
2. Improve the access to mental health services for Head Start children
3. Improve parent and staff knowledge on health services

### **SERVICES FOR CHILDREN EXPERIENCING HOMELESSNESS**

4. Promote collaboration and the leveraging of resources between Head Start programs and State and local McKinney-Vento liaisons and identify other possible resources.

### **WELFARE/CHILD WELFARE**

5. Promote collaboration and partnerships between Head Start Programs and local DSS programs, including Foster Care, child welfare, TANF, and child care subsidies.

### **CHILD CARE**

6. Promote increased access to higher education and professional development opportunities for Head Start and early childhood education professionals.
7. Promote improved opportunities for working parents to have access to child care services that meet their needs.
8. Encourage Head Start and child care programs in sharing information regarding roles, resources, and children, including child specific data.

### **FAMILY LITERACY SERVICES**

9. Promote increased access to literacy services for Head Start families, including with libraries, adult literacy programs, museums and other relevant resources.

### **SERVICES FOR CHILDREN WITH DISABILITIES**

10. Promote the level of partnership between Head Start Programs and State and local Infants and Toddlers Programs (Part C) and Preschool Special Education (Part B).
11. Facilitate improved relevant professional development and higher education opportunities for staff working with children with disabilities

### **COMMUNITY SERVICES**

12. Encourage the leveraging and sharing of resources by Head Start Programs and local community partners, including law enforcement agencies.

### **EDUCATION (SCHOOL READINESS, HEAD START – PRE-K PARTNERSHIP DEVELOPMENT)**

13. Facilitate local reviews and renewals of local agreements between Head Start programs and LEAs that are already in place and promote increased collaboration, to include joint staff development, parent involvement, alignment, transitions, and joint planning.
14. Promote opportunities for working parents to have access full-day early care and education services that meet their needs.
15. Promote the use of State preschool standards and accreditation of Head Start Programs

#### SCHOOL TRANSITIONS AND ALIGNMENT WITH K-12

16. Partner with LEAs to facilitate seamless and supportive movement for children from Head Start to public schools, including joint outreach to parents and transportation coordination.

#### PROFESSIONAL DEVELOPMENT

17. Support projects and initiatives that enhance the education and professional development of Head Start staff, including participation in the State Credentialing Program and the Career and Professional Development Fund.
18. Assist in the development and implementation of the state-wide Quality Rating Improvement System (QRIS).
19. Work with 4-year institutions of higher education to develop opportunities to obtain Bachelor's degree, including evening, weekend, and on-line courses and student teaching that are accepted in community settings.
20. Work with 4-year institutions of higher education and MSDE Teacher Certification Office to approve alternative teacher licensing programs.

#### EARLY CHILDHOOD SYSTEMS DEVELOPMENT

21. Support Head Start programs in participating in the state QRIS (Maryland EXCELS) program and partnering in local early childcare systems.

## **APPENDIX A - FOCUS GROUP QUESTIONS**

# **Maryland Head Start State Collaboration Office**

## **2014 Needs Assessment Project**

### **INITIAL FOCUS GROUP QUESTIONS**

#### **HEALTH CARE**

- In the past year, has your access to oral health services or mental health services improved or been more difficult?

#### **SERVICES FOR CHILDREN EXPERIENCING HOMELESSNESS**

- Has a relationship been established with the local McKinney-Vento liaisons in local education agencies?

#### **WELFARE/CHILD WELFARE**

- Have you established an informal or formal agreement with your local department of social services to streamline the subsidy process?

#### **CHILD CARE**

- Have you established any new partnerships with child care providers to meet the needs of working parents?

#### **FAMILY LITERACY SERVICES**

- Do public libraries provide family literacy activities that are accessible to Head Start families?

#### **SERVICES FOR CHILDREN WITH DISABILITIES**

- Has your program been included in transition planning for Head Start children moving from an Individual Family Service Plan to an Individual Education Plan?

#### **COMMUNITY SERVICES**

- Has your program established relationships with community organizations, such as the Rotary Club, the Lion's Club, etc. that provides funding and services to families and children?

#### **EDUCATION (SCHOOL READINESS, HEAD START – PRE-K PARTNERSHIP DEVELOPMENT)**

- Is the current memorandum of understanding with the local education agency working effectively?

#### **SCHOOL TRANSITIONS AND ALIGNMENT WITH K-12**

- Does your Memorandum of Understanding include opportunities for Head Start teachers, children and parents to visit public schools?

**PROFESSIONAL DEVELOPMENT**

- Are your staff now participating in the Child Care Credentialing Program?

**EARLY CHILDHOOD SYSTEMS DEVELOPMENT**

- Is your program participating in the MD EXCELS (QRIS) Program?

## **Appendix B – *Head Start Programs in Maryland by Category***

# Head Start Programs in Maryland by Category

## CAP Agencies – 8 Agencies

1. Allegany County Human Resources Development Commission Head Start & EHS Programs - Grantee
2. Anne Arundel County Economic Opportunity Committee Inc. Head Start - Grantee
3. Community Action Council of Howard County Head Start - Grantee
4. Garrett County Community Action Council Head Start - Grantee
5. Maryland Rural Development Corporation Head Start - Grantee
6. Montgomery County Community Action Council Head Start - Grantee
7. SHORE UP! Head Start - Grantee
8. Southern Maryland Tri-County Community Action Committee, Inc - Grantee

## Catholic Charities – 4 Agencies

1. Associated Catholic Charities – Grantee
2. Associated Catholic Charities Early Head Start of Harford County - Grantee
3. Associated Catholic Charities Head Start of Carroll County - Grantee
4. St. Jerome's Head Start - Delegate

## Public Schools – 5 Agencies

1. Caroline County BOE - Early Head Start – Delegate \*
2. Montgomery County Public Schools Head Start - Delegate
3. Prince George's County Public Schools Head Start - Grantee
4. Calvert County Public School Head Start – Grantee
5. St. Mary's County Public School Head Start – Grantee

## Non-Profit Agencies – 16 Agencies

1. CentroNia Early Head Start - Grantee
2. Dayspring Head Start - Delegate
3. Emily Price Jones - Y of Central Maryland Head Start - Delegate
4. Family Services, Inc. Head Start - Grantee
5. Head Start of Washington County - Grantee
6. Martin Luther King, Jr. / Johns Hopkins Hospital Early Head Start - Delegate
7. Metro Delta Head Start Program - Delegate
8. Morgan State University Head Start - Delegate
9. Reginald S. Lourie Center Early Head Start - Grantee
10. St. Bernardine's Head Start - Delegate
11. St. Veronica's Catholic Church Head Start - Delegate
12. St. Vincent De Paul - Delegate
13. Umoja Head Start Academy – Delegate
14. Union Baptist - Harvey Johnson Head Start - Delegate
15. Y Baltimore County Head Start & EHS Programs - Grantee
16. YMCA of Frederick County Head Start - Grantee

## Maryland Family Network – 6 Agencies (\*plus 1)

1. Maryland Family Network, Inc. – Grantee
2. Anne Arundel County Economic Opportunity Committee Inc. Early Head Start – Delegate
3. Cecil Community College Early Head Start - Delegate
4. Dorchester County Early Head Start – Delegate
5. Kennedy Krieger Institute - Southeast Baltimore Early Head Start Program - Delegate
6. Talbot County Family Support Center Early Head Start - Delegate

## **TOTAL PROGRAMS/AGENCIES -- 39**

\* Caroline Co EHS also under Maryland Family Network

\*\*This represents the list at the beginning of this assessment project process. During the process of this Needs Assessment project, several Head Start Programs closed and are no longer providing services in Maryland

## **Appendix C – Strategic Plan**

## **Maryland Head Start State Collaboration Office Strategic Plan 2014-2015**

The MDHSSCO Strategic Plan was originally developed based on the Needs Assessment survey and focus groups conducted by the MDHSSCO, the Maryland Head Start Association (MHSA) and the Chesapeake College contractor in spring and summer of 2009. This updated Strategic Plan is based on the results of the 2014 Needs Assessment Process which further examined the resources and challenges that exist for the Maryland Head Start community.

The MDHSSCO subcontracts a portion of the federal collaboration grant funding to the MHSA to assist with collaborative activities as indicated. Likewise, the MDHSSCO and MHSA anticipate continuing to work in partnership with the Head Start Training and Technical Assistance Network (T&TA Network) leadership in implementing those strategies that incorporate training.

This Strategic Plan was developed by the MDHSSCO Director, Linda Zang, the MHSA Executive Director, Monica Ortiz, Consultant Nadine Owens Burton and with the contributions of the members of the validation focus group.

## HEALTH CARE

<b>Goal:</b> Improve the availability and access to quality, coordinated health services for Head Start children and families.	
<b>Objectives:</b>  Objective 1: Improve the access to oral health services for Early Head Start and Head Start children.  Objective 2: Improve the access to mental health services for Head Start children  Objective 3: Improve parent and staff knowledge on health services  Objective 4: Improve communication that is culturally sensitive	<b>Strategies:</b>  1. Collaborate with the State Dental Health Director & Dental Hygienist Liaison on activities and initiatives, including: <ul style="list-style-type: none"> <li>• Partnering with the Maryland (MD) Association of Pediatric Dentists and their local members;</li> <li>• Partnering with Dental Hygienists Association;</li> <li>• Interfacing with local health departments;</li> <li>• Partnering with the University of Maryland School of Pediatric Dentistry.</li> </ul> 2. Continue to actively participate on the Maryland Dental Action Coalition. 3. Increase the availability of Social and Emotional Foundations of Early Learning Training 4. Increase awareness of the Early Childhood Mental Health Consultation Project for mental health services 5. Create State-wide Health Advisory Committee
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Maryland Dental Association; Maryland Association of Dental Hygienists; the Oral Health Office in the Department of Health and Mental Hygiene, Early Childhood Mental Health Steering Committee

<b>Goal:</b> Improve the role Head Start Programs play in establishing linkages and coordinating services for homeless children and families.	
<b>Objectives:</b>  <p>Objective 1: Promote collaboration and the leveraging of resources between Head Start programs and State and local McKinney-Vento liaisons and other state and local programs.</p> <p>Objective 2: Increase the knowledge base of Head Start Staff on issues of and resources for children and families experiencing homelessness.</p>	<b>Strategies:</b> <ol style="list-style-type: none"> <li>1. With the State McKinney-Vento Liaison and the Special Education/Early Intervention Division, promote cooperation between local McKinney-Vento liaisons, Title I Directors, public school special education professionals, and the Head Start community and develop strategies for improved access to services</li> <li>2. Raise issues regarding children and families experiencing homelessness at State policy and local community meetings</li> <li>3. Increase information to Head Start staff around the definition of homeless and accessing local resources</li> <li>4. Incorporate more homelessness related topics into MHSA Conferences</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Infants and Toddlers Program, local health departments, local education agencies, State and local Homeless Liaisons

<b>Goal:</b> Improve the access of Head Start children and families to quality and timely social services.	
<b>Objectives:</b>  Promote collaboration and partnerships between Head Start Programs and local DSS programs, including Foster Care, TANF, and child care subsidies.	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. Identify those jurisdictions where improvements in cooperation/collaboration with Department of Social Services (DSS) and Head Start programs are needed</li> <li>2. Improve communication regarding foster children and parents and Head Start.</li> <li>3. Work with local grantees to partner with DSS on streamlining child care subsidy processes and encourage local agreements</li> <li>4. Increase DSS training for Head Start Staff at Spring Conference and through cluster trainings and meetings</li> <li>5. Increase cross training opportunities: (a) Request Head Start Staff attend DSS trainings (b) Invite DSS staff to Head Start trainings</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> DSS, Foster and child welfare programs, Office of Child Support, DLL Office, University of Maryland School of Social Work, Colleges and Universities

<b>Goal:</b> Improve the quality of the early care and education system to meet child and family needs.	
<b>Objectives:</b>  <p>Objective 1: Head Start professionals and child care providers will have increased access to higher education and professional development opportunities.</p> <p>Objective 2: Improve the opportunities for working parents to have access to child care services that meet their needs.</p> <p>Objective 3: Assist Head Start and child care programs in improving the quality of their programs</p> <p>Objective 4: Promote accreditation of Head Start Programs.</p>	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. With the Maryland Head Start Association (MHSA), advocate for more opportunities for staff to obtain Associate and Bachelor degrees in Early Childhood Education</li> <li>2. With the Maryland Head Start Training and Technical Assistance Project, facilitate joint training and networking with local child care providers and other early childhood stakeholders.</li> <li>3. Encourage Head Start and child care partnerships through State committees and councils in order to provide more full-day year-round opportunities</li> <li>4. Increase relationships with child care organizations</li> <li>5. Encourage child care partners to attend MHSA trainings and conferences</li> <li>6. Work with child care providers to adopt State standards for early childhood education that are aligned with Head Start Child Outcomes</li> <li>7. Work with the Office of Child Care developing the MD EXCELS Program (QRIS)</li> <li>8. Assist in the implementation of the QRIS with Head Start Programs</li> <li>9. Support the use of the CLASS instrument for the MD EXCELS</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Montessori, Child Care Resource & Referral Centers, MD Association for the Education of Young Children, Child Care Associations, MSDE licensing, Judy Hoyer Partnerships, RTTT County Local ECA Councils

<b>Goal:</b> Expand family involvement in literacy and education activities.	
<b>Objectives:</b>  Head Start families will have increased access to literacy services	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. With state Judy Centers, seek collaboration opportunities with school libraries</li> <li>2. Promote partnerships with libraries, community programs, and organizations that facilitate literacy activities including those for English Language Learners</li> <li>3. Promote partnerships with Businesses and community organizations regarding book donations</li> <li>4. Promote the Family Literacy component in the PCFE.</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Judy Centers, Local Libraries, PNC Bank, Barnes & Noble, First Book, Maryland Child Care Resource Network, MSDE, Ready At Five, DLL Office,

<b>Goal:</b> Improve the quality of services provided to children with disabilities.	
<b>Objectives:</b>  <p>Objective 1: Improve the level of partnership between Head Start Programs and State and local Infants and Toddlers Programs (Part C) and Preschool Special Education (Part B).</p> <p>Objective 2: Improve professional development opportunities for staff working with children with disabilities.</p>	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. Promote the seamless transition of children with IFSPs and Individual Education Plans (IEP) into public schools</li> <li>2. Facilitate the review and revisions of the current statewide agreement to improve quality and increase collaboration between programs serving children with disabilities and encourage local agreements</li> <li>3. Increase collaboration with other agencies to further diversify the types of disabilities Head Start Programs are able to accommodate</li> <li>4. Support networking of education and disabilities coordinators and other staff.</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> T&TA System, MSDE (Part C, 619, Part B IDEA), local education agencies, MSDE Special Education and Early Intervention Division, Parents Place of MD, Head Start Program FSW's

<b>Goal:</b> Improve community involvement in Head Start’s early childhood education and family support services	
<b>Objectives:</b>  Improve the leveraging and sharing of resources by Head Start Programs and local community partners	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. Promote and share with public school, libraries, health departments, museums, social service agencies and organizations, local law enforcements agencies, local businesses, and community organizations, information about the benefits of Head Start to families and the community</li> <li>2. Work with Head Start programs to increase knowledge of and access to educational services for Head Start children and families</li> <li>3. Encourage programs to seek agreements on sharing data and information on children and families</li> <li>4. MHSA Annual Report to share with community at-large</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Maryland Child Care Resource Network, MD Community Action Partnerships, MSDE, Family Support Centers, child Care Resource Centers, MD Non-Profits Association, local departments of social services (DSS), Judy Centers, Colleges and Universities

## DEVELOPMENT)

<b>Goal:</b> Contribute to the continuation and improvement of coordinated and comprehensive partnerships between Head Start Programs (not including Early Head Start) and Local Education Agencies (LEAs).	
<b>Objectives:</b>  Objective 1: Facilitate the review and renewal of local agreements between Head Start programs and LEAs that are already in place and promote increased collaboration.  Objective 2: Improve the opportunities for working parents to have access to full-day early care and education services that meet their needs.  Objective 3: Promote participation in Maryland EXCELS by Head Start Programs.	<b>Strategies:</b>  1. Encourage basing local agreements on the state agreement between the Maryland Head Start Association and MSDE that addresses joint planning, joint staff development, articulation, parent involvement, and on-going communication. 2. Promote expansion of local partnerships to involve community programs as well as prekindergarten, including Part B, Part C, Title I, school facilities, and school principals 3. Promote coordination between LEAs and Head Start, including Judy Centers when applicable, on joint responsibilities for curriculum alignment and transition 4. Educate Head Start staff and programs on the benefits and processes of national and state accreditation 5. Provide information on incentives to support participation in Maryland EXCELS, accreditation, and the MSDE sponsored Program Administration Scale. 6. Promote the application of the alignment of the prekindergarten-12 state curriculum and the Head Start Developmental Outcomes Framework to classroom instruction
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Local educational agencies, MSDE, Head Start Programs, Judy Hoyer Centers, Infants and Toddlers Programs

<b>Goal:</b> To support family and child transitions from Head Start programs to public schools.	
<b>Objectives:</b>  <p>Objective 1: Continue to facilitate the renewal of local agreements between Head Start programs and LEAs that are already in place and promote increased collaboration.</p> <p>Objective 2: To partner with LEAS to facilitate seamless and supportive movement for children from Head Start to public schools</p>	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. Encourage local agreements that address joint planning, joint staff development, articulation, and parent engagement</li> <li>2. Encourage the inclusion of transition activities in local school readiness agreements, including joint planning, child and family visits to public schools, teacher visits to Head Start programs, and the sharing of child specific information on accepted forms</li> <li>3. Promote coordination between LEAs and Head Start, including Judy Centers when applicable, on joint responsibilities for curriculum alignment and transitions, including for children with disabilities</li> <li>4. Promote the increase of joint activities between LEA's and Head Start Centers prior to the transition time, including joint training</li> <li>5. Promote the increase of training for staff and parents on working with children with many types of disabilities and on transitions for those children</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> Local educational agencies, MSDE, Head Start Programs, Judy Hoyer Centers

## PROFESSIONAL DEVELOPMENT

<b>Goal:</b> Contribute to the coordination of a state-wide professional development system.	
<p><b>Objectives:</b></p> <p>Objective 1: Support projects and initiatives that enhance the education and professional development of Head Start staff.</p> <p>Objective 2: To assist in the development and implementation of the professional development parts of the state-wide quality rating improvement system (Maryland EXCELS).</p>	<p><b>Strategies:</b></p> <ol style="list-style-type: none"> <li>1. Direct the Head Start community to resources that list available professional development opportunities, such as the Statewide Clearinghouse Calendar</li> <li>2. Work with the Maryland Head Start Training and Technical Assistance Project and the Maryland Head Start Association to create training opportunities</li> <li>3. Disseminate information on the Maryland Family Network and Maryland Public Television's development of online course work to meet child care licensing requirements</li> <li>4. Continue to work with the Consortium of Early Childhood Coordinators in Two and Four-Year Colleges to improve degree opportunities for Head Start staff</li> <li>5. Disseminate information on MSDE's Child Care Career and Professional Development Fund and reimbursement for completing Core of Knowledge courses through the credentialing program</li> <li>6. Promote changes in college and MSDE teacher certification programs to allow student teaching in alternative settings</li> <li>7. Identify "Hot Topics" among Head Start Programs to determine high need training subjects</li> <li>8. Educate and facilitate the participation of Early Head Start, Head Start, and child care programs in attaining the MD EXCELS professional development requirements</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> MSDE, Head Start Programs, the Maryland Consortium of Early Childhood Faculty, Maryland Public Television, MD T&TA Center, Judy Centers, Home Visiting Coalition, Head Start National Centers

## EARLY CHILDHOOD SYSTEMS DEVELOPMENT

<b>Goal:</b> Increase the awareness of and participation in the MD EXCELS (state QRIS) Program.	
<b>Objectives:</b>  <p>Objective 1: Support projects and initiatives that educate Head Start and Child Care Community on the MD EXCELS Program.</p> <p>Objective 2: Support the inclusion of processes and procedures that facilitate the inclusion of already established Head Start Performance Standards as aligned and acceptable indicators in MD EXCELS.</p>	<b>Strategies:</b>  <ol style="list-style-type: none"> <li>1. Provide updates on the MD EXCELS Program to Head Start Programs at meetings and conferences.</li> <li>2. Continue to participate in the MD Research Advisory Group.</li> <li>3. Participate in MD EXCELS related workgroups.</li> <li>4. Facilitate meetings to address how Head Start will be included in MD EXCELS</li> </ol>
<b>Accountability:</b> MDHSSCO; MHSA	<b>Other Resources:</b> MSDE, RAG, Head Start Programs, Home Visiting Coalition