



**Department of Human Services Head Start Program**

**Continuation Application**

**Program Year 2022-2023**

**Project Description**

The City of San Antonio, Department of Human Services, Head Start Program (heretofore, DHS Head Start) submits the enclosed amended application for consideration of continued program operations and training and technical assistance funding for the period of February 1, 2022 through January 31, 2023. This application provides information on 2021-2022 Program Year operations and details 2022-2023 planned services and improvements. DHS Head Start will continue program services in two of the 19 school districts located within Bexar County to include San Antonio Independent School District (SAISD) and Edgewood Independent School District (EISD). Both SAISD and EISD are located in the central area of Bexar County and inner-city of San Antonio. Collectively, the districts have the highest demonstrated need for program services and a multitude of risk factors limiting the opportunities for families to achieve successful outcomes for themselves and their children.

DHS Head Start, in collaboration with SAISD and EISD, will operate a Head Start Program that continues to raise the quality of early childhood care and education of low-income children in the proposed service area. DHS Head Start, SAISD, and EISD, along with the other key service providers, San Antonio Metropolitan Health District (Metro Health), and the University of the Incarnate Word, in the areas of health, and dental services, will ensure children enter kindergarten socially, emotionally, cognitively, and physically ready to succeed

in school.

Through this grant application, DHS Head Start is requesting funding in the amount of \$25,617,080.00 (\$25,339,758.00 for program operations and \$277,322.00 for training and technical assistance) to continue its Head Start Program services to 3,020 children (2,243 in the SAISD and 777 children in the EISD service areas).

The DHS Head Start Program is strengthened by the commitment of local leaders to provide the highest quality Head Start services possible, including the City of San Antonio Mayor, City Council, and City Manager. DHS Head Start and its service providers have both the capacity and the commitment to carry out the Program’s mission: *Preparing children and engaging families for school readiness and life-long success*. While services may be adjusted during the 2021-2022 and 2022 – 2023 school year in response to COVID-19, DHS Head Start services are centered on high-quality early childhood education, family engagement, and school readiness initiatives to improve outcomes for children, families and the City of San Antonio’s inner-city community.

### **Program Design and Approach to Service Delivery**

#### **Sub-Section A: Goals**

##### **1. What are your Program Goals, Measurable Objectives, and Expected Outcomes for the project period?**

At the time of this application, minor updates were completed to the goals and the objectives to better reflect the strengths and needs of the program as well as impacts due to the COVID – 19 pandemic. DHS Head Start continues to review data for the 2020-2021 school year. The DHS Head Start Program operates within a set of three carefully crafted program goals that directly address the well-being of Head Start children and their families. Updates to the goals,

objectives, and progress on completion of measures have been included below.

Table 1 below presents the specific outcome measures the DHS Head Start Program plans to accomplish within the project period. The objectives were updated during a strategic planning session in November 2020 that included DHS Head Start Program stakeholders, Head Start site faculty and administrators, Head Start Policy Council members, parents, community leaders, and subject matter experts. Due to school closures related to COVID-19, progress towards achieving our goals was impacted; however, DHS Head Start remains committed to providing quality services and examining the progress of our program towards achieving our goals.

**Table 1: DHS Head Start Program Goals and Objectives**

Program Goals	Measurable Objectives	2020-2021
<p><b>Goal 1</b> Education: Prepare children to succeed in school and life</p>	<p>Decrease the percentage of children enrolled in the Head Start Program with chronic absenteeism by 5% from 24% in 2017-2018 to 19% in 2023-2024.</p> <p>Increase the annual Prekindergarten Classroom Assessment Scoring System (CLASS) scores by .5 points in each domain, from 5.65 in <i>Emotional Support</i>, 5.02 in <i>Classroom Organization</i>, and 2.99 in <i>Instructional Support</i> in 2016-2017 to 6.15 in <i>Emotional Support</i>, 5.52 in <i>Classroom Organization</i>, and 3.49 in <i>Instructional Support</i> by 2023-2024.</p> <p>Increase the percentage of children enrolled in the Head Start Program that show growth from BOY to EOY. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p> <p>Increase the percentage of children enrolled in the Head Start Program who are ON TARGET in Language and</p>	<p>School closures and a shift to remote learning related to the COVID-19 pandemic affected progress towards achieving our goals and objectives.</p> <p>At the end of the program year, over 30% of the children enrolled in the Head Start Program were identified as chronically absent. DHS Head Start continues to assist parents to address the barriers related to attendance and refine procedures related to attendance, to ensure attendance data is reliable.</p> <p>Due to restriction related to COVID-19 DHS Head Start did not conduct CLASS Observations during the scheduled observation window. The program will follow guidance from the local health authority and partner</p>

	<p>Literacy. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p> <p>Increase the percentage of children transitioning to Kindergarten ON TARGET at EOY. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p>	<p>school districts to develop a CLASS Observation Plan for the 2021-2022 school year.</p> <p>During the 2020-2021 school year, the program implement the CIRCLE Progress Monitoring System (CIRCLE). At the End of the Year, 36% of the children assessed scored ON TARGET for Rapid Letter Naming, Rapid Vocabulary, Phonological Awareness, and Math. Teachers encountered obstacles related to assessing students receiving remote learning. The program will continue to provide training and assistance to address language and literacy development and concerns related to fidelity to the assessment.</p>
<p><b>Goal 2</b> Family Support: Promote the well-being of families to enable them to support their children’s learning and development</p>	<p>Increase the percentage of parents/guardians who make progress towards completion of an identified <i>Family Self-Sufficiency</i> goal by the end of the program year by 9% from 71% in 2019-2020 to 80% in 2023-2024.</p> <p>Maintain the percentage of parents/guardians who make progress towards completion of an identified Family Life Practice goal at 90% or higher through the year 2023-2024.</p> <p>Increase the percentage of families who receive at least one program service, such as emergency assistance, parenting education, asset building, or job training and education services, to promote family outcomes. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p>	<p>School closures and a shift to remote learning related to the COVID-19 pandemic affected progress towards achieving our goals and objectives.</p> <p>By the end of the program year, 63% of families who participated in the goal process with the Head Start Program had made progress towards completion of an identified Family Self-Sufficiency goal. Additionally, 95% of the families had made progress towards completion of an identified Family Life-Practice goal.</p> <p>By the end of the program</p>

	<p>Increase the number of participants in the identified tiered parenting program. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p>	<p>year, 67% of families enrolled in the Head Start Program had received at least one support services, such as emergency assistance.</p> <p>The program has engaged in a plan with the local health authority and tiered parenting program partner to train and certify members of the COSA HS staff in the 2021-2022 school year. Staff have completed training for implementation of two tiers of the parenting curriculum and in addition to community partners, will offer sessions to COSA HS parents in the 2021-2022 school year. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.</p>
<p><b>Goal 3</b> Health: Children who are healthy and ready to learn</p>	<p>Increase the percentage of children who are up-to-date on TX EPSDT requirements at the end of the program year. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p> <p>Increase the percentage of children who receive services following a referral for hearing concerns at the end of the program year by 10% from 55% in 2018-2019 to 65% in 2023-2024.</p> <p>Increase the percentage of children who receive services following a referral for vision concerns at the end of the program year by 10% from 70% in 2018-2019 to 80% in 2023-2024.</p>	<p>The health and safety of our children continues to be a focus for our program. Before the first day of school, our Family and Community Support Team works with families to ensure their child is healthy and ready to learn. During the 2020-2021 school year the percentage of children that who are up to date on TX EPSDT requirements at the end of the program year was 73%. We recognize that many health clinics and doctor’s offices were not open during the initial stages of shutdown due to COVID-19, which made it difficult for parents to</p>

	<p>Increase the percentage of children identified as Class 2 that are designated as Treatment Complete by the end of the program year by 13% from 32% in 2016-2017 to 45% in 2023-2024.</p> <p>Increase the number of mental health consultations provided to parents/guardians and staff by the Mental Wellness Team. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p> <p>Increase the number of trainings with a focus on mental wellness provided to parents/guardians and staff by the Head Start Program. The baseline will be established in 2020-2021 with a percentage increase determined in 2021-2022.</p> <p>Increase the average score on the Health Wellness Assessment. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.</p>	<p>schedule well-child appointments for their child. The program offered several opportunities to families to address health services that were not available through a child’s medical home due to COVID-19. During the school year, the program partnered with the local health department and a nursing school to provide seven drive-thru flu vaccination clinics, five lead and hemoglobin screening clinics, and four COVID-19 vaccination clinics. At each clinic, parents were provided health education and resources.</p> <p>Ensuring children receive services following a referral for a hearing or vision screening continues to be a focus of our program. During the 2010-2021 school year, 32% received services following a referral for a hearing concern and 41% received services following a referral for a vision concern. To provide hearing and vision screenings to remote learners, the campus school nurses implement an appointment system for children to receive the screenings on-site.</p> <p>With parental consent, and in partnership with City of San Antonio Metro Health, DHS Head Start provides a dental screening and fluoride varnish to all children enrolled in the program. Due to dental office limitations and campus on-site</p>
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	<p>restrictions, the program provided three drive-thru dental screenings with fluoride varnish. Metro Health provided on-site dental consultations and parent education. The dental case management team continued to follow up with parents/guardians to ensure children visited the dentist, as possible within COVID-19 guidelines. During this school year, 18% of the children identified with a dental concern were designated as treatment complete at the end of the year.</p> <p>Wellness support continues to be an area of focus for our program. During the 2020-2021 school year, 489 mental health consultations were provided to parents/guardians and Head Start staff by the Mental Wellness Team and 5 trainings with a focus on mental wellness were offered to parents/guardians and staff by the Head Start Program.</p> <p>Due to COVID-19 prioritizing the needs of our families, the program postponed the Health Wellness Assessment. However, a plan is in place to begin the Health Wellness Assessment in fall 2022.</p>
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**2. Explain how your program’s School Readiness Goals align with the Head Start Early Learning Outcomes Framework: ages birth to five, state and tribal early learning guidelines, as appropriate, and requirements and expectations of the local schools where children will transition.**

At the time of this application, there have been no additions, deletions, or revisions to the DHS Head Start School Readiness Goals. In June 2016, DHS Head Start held its first annual School Readiness Summit. The focus of the School Readiness Summit was to develop a set of school readiness goals for children from birth to age five. The School Readiness Summit team included DHS Head Start staff, teachers, site administrators, child care staff, community members, and parents/guardians. Learning outcomes aligned to the Head Start Early Learning Outcomes Framework (HSELOF) were prioritized, and the team developed a set of goals. In July 2017, the team revised the school readiness goals for each of the five central Head Start domains and created a single set of School Readiness Goals for all of the children, 0-5 years of age and objectives based on the goals and indicators in the HSELOF. In 2019, the Education Advisory Committee and the Head Start Policy Council voted to continue to use the established School Readiness Goals for the five-year grant period.

Nine School Readiness goals within five central domains resulted from this collaborative and data-driven process. The five domains are: 1) Approaches to Learning; 2) Social and Emotional Development; 3) Language and Literacy; 4) Cognition; and 5) Perceptual, Motor, and Physical Development.

School readiness information is presented at the Head Start Parent Orientation, Governing Body meetings, Policy Council meetings, Parent Connection Committee meetings, conferences, trainings and handouts to ensure all families are informed of the focus on school readiness. DHS

Head Start, SAISD and EISD provide engagement opportunities for parents/guardians to prepare their children for transition to kindergarten ready to learn.

**3. Discuss how your program involved governing body, policy council, and parents in developing the Program Goals.**

DHS Head Start develops its program goals through its Five-Year Strategic Planning processes. This process is purposefully designed as an inclusive method incorporating the feedback and input from diverse perspectives, to include the Head Start Program's Governing Body, The City of San Antonio's City Council's as the Governing Board, Community Action Advisory Board (CAAB) as the Advisory Committee, and Head Start Policy Council (HSPC), in addition to the Governing Boards participation, Head Start parents and other community stakeholders are also included in this process. To ensure a wide range of involvement is achieved, these groups are invited and encouraged to participate in the Head Start Program's Quarterly Self-Assessment Data reviews and Annual Five-Year Strategic Plan events. During these events, the members actively participate by providing recommendations, asking questions in open discussion and provide feedback regarding program data and goals. All participants assist in the development of the short-term and long-term goals during the Five-Year Strategic Plan event; the Governing Board to include the Advisory Committee, and HSPC members review and approve the final Self-Assessment report, School Readiness goals, and Five-Year Strategic Plan. During the 2021-2022 program year, community stakeholders and parents will be invited to participate in strategic planning virtually. To ensure all Head Start Policy Council related duties were met, the DHS Head Start Program provided iPADS and hotspots to Policy Council members to continue their Head Start duties and to be able to successfully move forward with video conference meeting and governance activities.

## **Sub-Section B: Service Delivery**

### **1. Service and Recruitment Area (see 1302.11(a) and 1302.13):**

At the time of this application, there have been no additions, deletions, or revisions to this section. The service area for DHS Head Start is defined by the SAISD and EISD district boundaries located in Bexar County, Texas. Recruitment is constrained within these boundaries and, unless the children are homeless, students must reside or be eligible to attend either district. The central and southern portions of the City of San Antonio have greater concentrations of poverty and age and income-eligible children than other areas of the city. The Community Assessment also indicates that many children in the two school districts are in families with limited resources and with a limited ability to ensure the best for their children's development.

### **2. Needs of Children and Families:**

DHS Head Start actively recruits families most in need of Head Start services. Recruitment efforts begin annually in the late winter or spring and continue throughout the year in the two school districts. The recruitment strategies include a multimedia campaign, participation in community events, billboards, newspaper advertising, social media, and referrals with other agencies. Recruitment plans are developed and approved annually by the Governing Body and HSPC. Our recruitment plan for the 2021-2022 and 2022-2023 school years will incorporate methods to reach families remotely, for example virtual town halls to answer parents' questions, as well as events in which parents may drop off signed paperwork. DHS Head Start utilizes a selection criteria points matrix system which weighs vulnerability factors such as income, homelessness, foster care status, disability status, English proficiency, parental/guardian marital status, parental/guardian employment/training status and child age status. At a minimum, 10% of the program's annual enrollment is comprised of children with disabilities, though the program

frequently exceeds this threshold.

According to the current 2020 Community Assessment, there are an estimated total of 26,965 eligible children under five years of age within the DHS Head Start service area, including 22,873 within SAISD and 4,092 within EISD. The service area also contains a higher concentration of Hispanic residents than most other Bexar County school districts, with SAISD comprised of approximately 79% Hispanic residents, and EISD comprised of approximately 95% Hispanic residents. Both SAISD and EISD have greater proportions of Hispanic residents than does Bexar County (60%) and the state of Texas (39%).

Also, 53% of SAISD residents and 71% of EISD residents speak a language other than English, generally Spanish in EISD (70%) and SAISD (52%). SAISD and EISD are among the Bexar County school districts with the greatest proportion of students participating in bilingual education. San Antonio ISD with 21% and EISD with 21% which are greater percentages of bilingual and ESL students enrolled than in Bexar County (14%).

Additional needs and considerations of DHS Head Start children and families stem from many participants and families being homeless, experiencing foster care, and/or having a disability. The available data showed 366 families served by the DHS Head Start program experienced homelessness in 2019. Overall in 2019, there were an estimated 53 children in the foster care. In 2019 approximately 500 children served by the DHS Head Start Program were determined to have a disability (15% of enrollment). Among these children, speech and language impairments were the most common disabilities (366 children, 11% of total enrollment).

The next most common disabilities among enrolled children were non-categorical developmental delays (92 children, 2.8%) and Autism (44 children, 1.3%). All enrolled children determined to have a primary disability receive special education services through Edgewood ISD

and San Antonio ISD.

The average educational attainment among adult residents of SAISD and EISD is less than that of the city, county, state, and nation. Almost one-third of the population of SAISD residents and nearly half of the population of EISD have not completed a high school diploma. Only 15% of SAISD residents and 5% of EISD residents had earned at least a Bachelor's degree, compared to the city of San Antonio (26%), and Bexar County (28%). Households in SAISD and EISD rely on public assistance. Almost one-third of EISD households and one-quarter of SAISD households use Supplemental Nutrition Assistance Program (SNAP) and 11% of SAISD and 15% of EISD households rely on Supplemental Security Income (SSI). Temporary Assistance for Needy Families (TANF) and Women, Infants and Children (WIC) are other public assistance programs utilized in the Head Start service area. Local government and non-profit organizations provide additional support services to the DHS Head Start families. Metro Health provides Immunizations and Dental Services to the SAISD and EISD service area, and the San Antonio Food Bank provides food and grocery products to children and families in the DHS Head Start Program.

In SAISD and EISD there are 100 facilities that serve children three to four years of age. The childcare capacity of children three to four years of age in SAISD is 7,472 in 86 facilities and the number of children aged three to four years of age is 8,487 with a total of 1,015 children not being served in these facilities. The childcare capacity of children three to four years of age in EISD is 1,046 in 14 facilities and the number of children aged three to four years of age is 1,527 with a total of 481 children not being served in these facilities.

### **3. Proposed Program Option(s) and Funded Enrollment Slots:**

DHS Head Start will continue to utilize a full-day center-based Head Start program option during the 2021 – 2022 school year. Currently the state of Texas is not allowing children PreK-

12 to attend virtual learning environments. DHS Head Start and SAISD and EISD are committed to ensuring a safe learning environment which consists of weekly testing on campus, student and staff quarantines if test positive for CoVID, as well as access to school information systems while the student is at home. . Surveys conducted by DHS Head Start and results from the 2019 Community Assessment reflect parents' need for full-day services. Through the model, Head Start services align with the normal school day, allowing Head Start children and their older siblings to maintain the same schedule to increase convenience for parents.

Aligned with the regular public school day and year, DHS Head Start will operate at least seven hours per day, five days a week, 36 weeks per year, and 1,275 hours per year for a total of 178 days a year. The DHS Head Start and support staff connect families to Child Care Services (CCS) and other resources to ensure extended care and wraparound services are available to accommodate working families. During the 2021 – 2022 school year, the program will utilize ARPA funds to provide extended day services to a subset of children in need of a longer day. These services will be offered to families in which parents work full-time and all services will maintain Head Start compliance. The leveraging of state Pre-K funds and school district facilities allow for full-day, center-based services. SAISD and EISD have the capacity and infrastructure in place to provide a stable, structured center-based program model. SAISD currently serves 2,243 children in 19 campuses. EISD currently serves 777 children in two campuses.

The current program model has an advanced system of program planning that incorporates members of the DHS Head Start and service provider staff, HSPC, Governing Board Advisory Committee members (Community Action Advisory Board), and community stakeholders. These groups engage in the data review process, as well as, focused annual and ongoing program planning to ensure continuous improvement and high-quality services to meet the needs of children

and families served within the community.

#### 4. Centers and Facilities:

There will be a total of 22 center locations for the 2021-2022 school year.

Service Provider	Site	Funded Enrollment	Address
<b>EISD</b>	Cardenas	355	3300 Ruiz Street, 78228
	Loma Park	108	400 Aurora, 78228
	Stafford	314	611 SW 36th Street, 78237
	<b>Total Enrollment</b>	<b>777</b>	
Service Provider	Site	Funded Enrollment	Address
<b>SAISD</b>	Arnold	63	467 Freiling, 78213
	Bowden	54	515 Willow Street, 78202
	Carroll ECE	327	463 Holmgreen, 78220
	Carvajal ECE	155	225 Arizona Street, 78207
	De Zavala	73	2311 San Luis Street, 78207
	Foster	74	6718 Pecan Valley Drive, 78223
	Gonzales	28	518 E. Magnolia Ave 78212
	Graebner	54	530 Hoover Ave., 78225
	Hirsch	71	4826 Sea Breeze Drive, 78220
	Huppertz	51	247 Bangor Street 78228
	J.T. Brackenridge	90	1214 Guadalupe, 78207
	Knox ECE	273	302 Tipton Ave., 78204
	Madison	69	2900 W. Woodlawn Ave., 78228
	Maverick	75	107 Raleigh Street, 78201
	Neal	94	3407 Capitol Ave., 78201
	Nelson	226	1014 Waverly Ave., 78201
	Sarah King	111	1001 Ceralvo Street, 78207
	Schenck	105	101 Kate Schenck Ave., 78223
Tynan ECE	250	925 Gulf Street, 78202	
<b>Total Enrollment</b>	<b>2,243</b>		

#### 5. Eligibility, Recruitment, Selection, Enrollment, and Attendance (see 1302.13, 1302.14, 1302.15, and 1302.16):

At the time of this application, there have been no additions, deletions, or revisions to this section. In order to prioritize the neediest families, the DHS Head Start Program utilizes selection criteria generated from the annual Community Assessment. For the 2021-2022 program year, the

selection criteria point ranking system will incorporate impacts of the CoVID-19 pandemic into the selection process. DHS Head Start utilizes a verification process which prioritizes children based on a selection criteria point ranking system. This process is used for all children including children with disabilities and Spanish language dominant children. The selection committee process ensures enrollment of the highest number of children with disabilities and that all children are placed in a linguistically and developmentally appropriate classroom.

In order to actively locate children with disabilities, children experiencing homelessness, and children in foster care, recruitment materials are developed indicating that all children with one or more of these characteristics are encouraged to apply to the DHS Head Start Program. DHS Head Start collaborates and has ongoing communications with local Early Childhood Intervention agencies, Early Head Start-Child Partnership Care Program, and districts' Special Education Directors and Homeless Liaison staff regarding the status of children's referrals and services.

In order to promote regular attendance, DHS Head Start emphasizes and provides information to parents about the benefits of regular attendance and family support staff engages with families to promote regular attendance and assist families with referrals for services that enhance attendance. Special efforts for chronically absent children and other vulnerable children include a home visit or other direct contact with the family to determine the cause of chronic absenteeism and to assist in removing barriers by providing assistance with referrals and services.

#### **6. Education and Child Development (see 1302 Subpart C):**

At the time of this application, there have been revisions to this section. DHS Head Start, SAISD, and EISD share the same program philosophy and approach to the achievement of school readiness with a clear understanding that, in order for children to be successful, curricula must be aligned with the school districts where children will be transitioning. As a result, curricula

previously adopted by SAISD and EISD, utilizing the Texas Education Association (TEA) approved system, will continue to be used. These curricula have been identified as research-based and developmentally appropriate and are adopted by the State of Texas. All curricula are aligned with the Texas Prekindergarten Guidelines, the HSELOF, and ensure alignment and a continuum of instruction as children enter kindergarten. In addition, parents were and will continue to be, a part of the process for choosing the curricula. Parents in both districts were provided several opportunities through public forums to view the state adopted curriculums, ask questions, discuss, and provide feedback. Edgewood ISD uses Scholastic Big Day Curriculum and San Antonio ISD uses Frog Street. Select campuses in San Antonio ISD use the High Scope Curriculum and Estrellitas.

**7. Health (see 1302 Subpart D):**

At the time of this application, there have been revisions to this section. DHS Head Start services are structured around a health model grounded in parent engagement to ensure the health and well-being of each child and their family. The program's health systems not only meet Head Start Performance Standards but support families in establishing life-long healthy lifestyle habits.

DHS Head Start, SAISD, and EISD have strong policies, procedures, and partnerships in place to ensure that the health, nutrition, and mental health needs of children and families are met. These policies, procedures, and partnerships are supported by effective program systems in the areas of recordkeeping, reporting, communication, monitoring, and planning to ensure service coordination and that the communications with parents and families are structured and timely.

DHS Head Start contracts with the Metro Health Dental Division to provide onsite dental services. With parental consent, children enrolled in the program receive one dental evaluation and two fluoride varnishes during the program year. In addition, Metro Health provides a

toothbrush, toothpaste and timer for all children, referrals for dental care, parent education sessions, information regarding local dental providers, and dental case management for children with identified oral decay. Due to COVID-19 and the risk of exposure, and to ensure the health and safety of children and staff, DHS Head Start may provide some dental services off site. Additionally, children will not participate in tooth-brushing onsite until further guidance is received from the Office of Head Start, the American Dental Association, or the local health authority. Oral health and education will continue to be a priority for our program.

Families living in SAISD and EISD are at high risk for lead exposure. In partnership with the University of the Incarnate Word Miller School of Nursing, DHS Head Start provides on-site lead screenings for children with a missing blood lead screening or a previously elevated blood level result, or for any child that has been identified as high risk. Each child must have a signed parent/guardian consent form before the screening is conducted. Due to COVID-19 and the risk of exposure, and to ensure the health and safety of children and staff, the program will focus on children most at risk for lead exposure. Additionally, lead testing may occur off site.

DHS Head Start partners with the City of San Antonio Green and Health Homes Initiative (SAGHHI), Neighborhood and Housing Department. The SAGHHI is a U.S. Department of Housing and Urban Development (HUD) funded program that addresses health and safety hazards, such as lead-based paint, mold, asthma triggers, and fire hazards. The SAGHHI provides assistance in creating healthy, safe, energy-efficient and sustainable homes for families with homes built prior to 1978 and where children under 6 years of age live and spend more than 6 hours a week. Since the partnership began in 2013, our program has assisted 72 families enrolled in Head Start to address health hazards and create a healthy lead safe environment for their children. As of June

2021, \$1.34 million federal HUD grant dollars have been spent on home rehabilitation services for families enrolled in the DHS Head Start Program.

**8. Family and Community Engagement (see 1302 Subpart E):**

At the time of this application, there have been no revisions to this section. DHS Head Start family support services promote family well-being, strong parent-child relationships and the ongoing learning and development of the children and their families. The program achieves these three outcomes by providing supports and services responsive to families' expressed needs and through collaboration with the parents. Family support services staff utilizes various processes and activities to facilitate achievement of positive family outcomes.

DHS Head Start family support staff continues to build rapport with families by conducting home visits, utilizing the family assessment, the collaborative family goal setting process, and engaging with parents in their preferred language. During the 2021 – 2022 program year, these activities may be conducted virtually either via a phone call or video conference while gauging the families' comfort level to be able to conduct these activities face to face.

The DHS Head Start Program offers parent education aimed at supporting parent-child relationships, child development, family literacy, and language development. Various opportunities are available for parents to participate in the research-based parenting curricula, ReadyRosie, while engaging in our program. Additionally, members of the DHS Head Start Mental Wellness Team and the Family and Community Support team attended training in the Triple P parent education curriculum as a part of a collaboration with the city's health authority and other community agencies in order to bring the multi-tiered parenting curriculum to Head Start families and to make Triple P one of the identified parenting curricula for the city along with Ready Rosie.

**9. Services for Children with Disabilities (1302 Subpart F):**

At the time of this application, there have been no additions, deletions, or revisions to this section. DHS Head Start has procedures in place to prioritize the recruitment of children with disabilities and to identify undiagnosed disabilities after enrollment. The approach to serving children with unique needs is guided by the belief that inclusion is a value rather than a practice.

DHS Head Start, SAISD, and EISD view services to children with disabilities as an area where DHS Head Start partnerships within the public school setting offer a strategic advantage. School district experts in special education for children with unique needs are either on the premises where DHS Head Start children attend school or on a neighboring campus, which makes it easier for DHS Head Start staff, special education personnel, and parents of children with disabilities to build relationships and work as partners on the development, implementation, and revisions of Individual Education Plans (IEPs). Local school districts have early childhood special education classrooms for children with severe disabilities, such as autism and intellectual disability, who could benefit from co-enrollment in DHS Head Start. Together with parents, the Admission, Review, and Dismissal (ARD) Committee makes a determination as to the best placement for each child with a disability and the most appropriate curriculum and assessment for each child. All children with an identified disability are enrolled in an inclusive classroom setting.

Concerted efforts were put in place to support teaching staff through professional development, technical assistance, and one-on-one mentoring to expand their knowledge base and offer strategies for providing meaningful learning opportunities for children with varying abilities. DHS Head Start will continue to offer the highest quality professional development for all DHS Head Start staff as the program serves a higher population of children with varying abilities. The approach to professional development in this area is moving to evidence-based practices with

content focused on specific research-based teaching intervention practices with embedded inclusion strategies.

**10. Transition (see 1302 Subpart G):**

At the time of this application, there have been no additions, deletions, or revisions to this section. Transitions bring change into the lives of children and families. DHS Head Start Program implements strategies and practices to support successful transitions for children and their families. In addition to transitioning children from Early Head Start into Head Start, other Pre-K programs, and children from Head Start into kindergarten or other Early Childhood Development programs, DHS Head Start considers the changes that occur when children enter the program, move from class to class, move from campus to campus, or when children move to any other program as important transitions. Teachers address transitions during the beginning of the year Home Visit, as well at the end of year Parent/Teacher Conference. Teachers incorporate various activities into their lesson plans, such as center activities, read-alouds about changes, and writing activities about new experiences.

**11. Services to Enrolled Pregnant Women (see 1302 Subpart H):**

Not Applicable

**12. Transportation (see 1303 Subpart F):**

At the time of this application, there have been no additions, deletions, or revisions to this section. SAISD and EISD follow their district and state guidelines to determine eligibility for transportation services and analyze the individual family need. Families that are designated homeless and children that have an Individualized Education Plan (IEP) are guaranteed transportation services. SAISD offers transportation to all children commuting from feeder schools

to one of five DHS Head Start centers. Due to COVID-19, transportation services may be limited and proper precautions will be implemented to ensure the health and safety of children. The DHS Head Start program offers bus passes for families who do not have transportation services available through the school districts.

### **Sub-Section C: Governance, Organizational, and Management Structures**

#### **1. Governance (see 45 CFR Part 1301 and Section 642(c)-(d) in the Act):**

##### **Structure**

At the time of this application, there have been no additions, deletions, or revisions to this section. DHS Head Start Program Governing Body members oversee a public entity and are selected to their positions by public election. For this reason, the DHS Head Start Program's Governing Body is exempt from composition requirements as stated in Section 642(c) of the Head Start Act.

DHS Head Start Policy Council (HSPC) is composed of twenty-two members, with DHS Head Start parents of currently enrolled children representing 88% of the Council. SAISD has eight parent representatives (four primary and four alternates), EISD has four parent representatives (two primary and two alternates), the Early Head Start-Child Care Partnership has four parent representatives (two primary and two alternates), and the newly awarded Early Head Start Program will have four parent representatives (two primary and two alternates). The EHS Program representation will ensure there is both center based representation as well as home base representation. Two Community Representatives are elected from the community at large by the HSPC parents to serve on the Council.

##### **Governing Body Processes**

At the time of this application, there have been no additions, deletions, or revisions to this section. The City of San Antonio, City Council as our governing body, has a legal and fiscal responsibility to administer and oversee the DHS Head Start Program. The Governing Body ensures objectivity in monitoring the program's progress in meeting Head Start Performance Standards and internal program mandates as well as ensuring that program goals and objectives tie into a larger community vision for early childhood education services. While the City of San Antonio's City Council must maintain its legal and fiscal responsibilities, it has authorized the Community Action Advisory Board (CAAB) to oversee other key responsibilities and may authorize an advisory committee to oversee these necessary duties. The Governing Body and the HSPC members partner with each other and key management staff to develop, review, and approve DHS Head Start program policies and planning items. The CAAB is charged with oversight of specific DHS Head Start program functions and receives monthly fiscal and program reports which are provided one week prior to the scheduled meeting. DHS, Head Start Administrator and Program Managers present reports to ensure the Governing Body and HSPC carry out their responsibilities as stated in Section 642(c) of the Head Start Act, to include review and approval of annual items. Training opportunities are provided to the Governing Body throughout the year and decision-making items are presented for program development, budget and policy and community advocacy. Governing board meetings have been held virtually since March 2020, and will convert to in-person meetings as of September 2021 in compliance with the Open Meetings Act of Texas protocols to ensure members safety.

The Finance Department, City Attorney's Office, and Department of Human Services provide legal, fiscal, and management expertise. Grant applications amendments, service provider allocations, and all contracts require City Council final approval prior to submission to the U. S.

Department of Health and Human Services (HHS) or execution.

### **Policy Council**

At the time of this application, there have been no additions, deletions, or revisions to this section. The current governance structure allows for parent participation in policy making and other programmatic decisions focused on planning, general procedures, and human resources management. In accordance with Section 642(c) (1) and Section 642(c) (2) of the Head Start Act mandating the HSPC be involved in these three focus areas, items are reviewed and approved at monthly scheduled meetings. The HSPC is responsible for the direction of the DHS Head Start Program. To ensure adequate program governance and informed decision making, the program provides regular ongoing communication to the HSPC. As a part of this system, the program provides monthly reporting that includes information on correspondence (from HHS and other), program operations, and fiscal expenditures. The DHS Head Start Program requires HSPC approval on program planning, policies, and grant applications and provides updates on the program's progress. Policy Council meetings have been held virtually since April 2020 and will continue to do so in a manner that respects Open Meetings Act of Texas protocols while ensuring members safety.

### **Parent Committees**

At the time of this application, there have been no additions, deletions, or revisions to this section. DHS Head Start schedules bi-monthly Parent Connection Committee (PCC) meetings at each site. PCC officer elections will be held in September 2021, to maintain a governing structure that ensures communication between parents and the Policy Council. The PCC meeting agendas have a standing item to obtain parent input on recommendations for the program during each meeting. Family support staff survey parents, usually at the beginning of the school year, to

determine what topics parents are most interested in and then coordinate those presentations. DHS Head Start holds PCC meetings at each campus and center and will ensure that COVID protocols are followed in accordance with the local health department and the CDC. At these meetings, parents discuss concerns, successes, ideas to improve the program and training on topics that are important to them and their families. When relevant input is obtained during PCC meetings, the information is forwarded to the HSPC for their consideration. After the HSPC meets each month, the agendas and minutes of each meeting are posted on Parent Boards at each site. This process promotes two-way communication with parents in the program.

Additionally, parents of enrolled DHS Head Start students are invited to participate in the Self-Assessment reporting and Strategic Planning events where they are encouraged to provide their thoughts on how the program is doing and suggest future goals for the program. Parent input impacts policies, activities, and services. PCC Meetings will be held virtually during the 2021 – 2022 school year as necessary to ensure members safety.

### **Community Partnerships**

At the time of this application, there have been no additions, deletions, or revisions to this section. The Governing Board and the HSPC are provided a thorough DHS Head Start new member orientation and training on their responsibilities as stated in Section 642(c) of the Head Start Act, and the Head Start Program Performance Standards. Ongoing trainings and technical assistance are provided to the Governing Board and the HSPC to ensure that members understand the information presented and discussed and can effectively oversee and participate in the program. Governing Board members receive ongoing monitoring results, data on school readiness goals, and items to determine eligibility under applicable federal regulations and program policies and procedures.

DHS Head Start Program Governing Board members oversee a public entity and are selected to their positions by public election. For this reason, the DHS Head Start Programs Governing Board is exempt from Composition requirements as stated in Section 642(c) of the Head Start Act.

The Governing Board and HSPC are provided the same necessary program items to review and approve on a monthly basis. The Governing Board members are invited to attend the monthly HSPC meetings and the HSPC members are invited to attend monthly Governing Board meetings.

## **2. Human Resources Management (see 1302 Subpart D):**

At the time of this application, there have been no additions, deletions, or revisions to this section. DHS Head Start maintains an organizational chart to display the management and staffing structure including all of DHS Head Start staff, the Department of Human Services Director, and the DHS Fiscal staff. Initially positions were delayed in getting filled due to the pandemic, however at the time of writing this grant application 97% of all DHS Head Start staff positions have been filled.

DHS Head Start collaborates with the City of San Antonio's Human Resources Department to ensure all newly hired DHS Head Start staff complies with and has completed the criminal background checks prior to employment. According to the City of San Antonio's Administrative Directive (AD) 4.55, the City of San Antonio conducts Criminal Background Checks (CBC) as part of the initial employment process, employee placement into safety or security sensitive positions and positions of trust, and engagement of volunteers and interns. For its part, SAISD ensures new employees have criminal history checks conducted at the time of application and all current employees applying for promotions or new positions have additional criminal history checks conducted at that time. EISD ensures all employees and substitutes submit fingerprint

identification information to the Texas Education Agency (TEA) and the Department of Public Safety (DPS) before beginning employment.

All new staff receives DHS Head Start Program orientation, training, and technical assistance to include a review of the Head Start Program Performance Standards, Head Start Act, City of San Antonio Administrative Directives, CORE Values, Head Start Standards of Conduct, and a program overview.

DHS Head Start partners with both SAISD and EISD to provide a comprehensive approach to Professional Development for all DHS Head Start staff and teachers. This includes in-person trainings and webinars to build knowledge based on interest and assignments. In addition to trainings and webinars organized and provided by DHS Head Start and each school district, our approach to Professional Development also includes attendance at conferences and workshops offered at the local, state, and national level. Finally, DHS Head Start, in partnership with SAISD and EISD, provides a coordinated coaching strategy for teachers. Our program utilizes the Practice Based Coaching Model with a focus on supporting individual teacher needs. District level coaching specialists, with a degree in early childhood education and training in adult learning and data analysis, follow a cyclical individualized model which includes observations of the teacher, setting goals and planning, modeling or co-teaching, and reflective conversations that provide specific and effective feedback about goals and implementation. When a need is determined, intensive coaching is provided by frequent and consistent cycles of the coaching model as well as the development of an individualized coaching plan that supports the development of necessary skills for providing quality teaching interactions and promoting positive student outcomes.

### **3. Program Management and Quality Improvement (see 1302 Subpart J):**

At the time of this application, there have been no additions, deletions, or revisions to this section. DHS Head Start uses a two-tiered monitoring system, direct and indirect, to ensure program compliance at all levels. DHS Head Start is responsible for monitoring of the districts (direct monitoring) and reviewing and validating results of the district monitoring activities (indirect monitoring). This monitoring system allows for multiple levels of review and continuous program improvement. The monitoring methods include on-site announced and unannounced visits, coordinator interviews, ChildPlus reports, questionnaires, and surveys. This year's direct monitoring projects conducted on-site emphasized environmental health and safe environments. This monitoring addressed any areas needing improvement including increased safety awareness. Due to COVID-19, monitoring progress was impacted and delayed, however; DHS Head Start remains committed to providing quality services and achieving our monitoring goals.

Communication is central to the quality leadership and management of the grant: weekly, monthly, quarterly and annual meetings are held with all staff, regularly scheduled with individual staff members, small groups, and the full staff. Staff are held accountable for their results and annually evaluated accordingly. Additional merit pay is available for those exceeding expectations. The training and technical assistance components of the grant assure the building of staff capacity and well-being.