

5. Review of 2024-2025 Early Head Start-Child Care Partnership (EHS-CCP) Baseline Grant Application



March 26, 2024

Mr. Alfredo Huerta, Regional Program Specialist  
U.S. Department of Health and Human Services  
Administration for Children and Families  
Office of Head Start  
1301 Young Street  
Dallas, TX 75202

RE: Early Head Start – Child Care Partnership 2024-2025 Baseline Application  
Grant No. 06HP000255

Dear Mr. Huerta,

On Tuesday, March 26, 2024, in accordance with the Head Start requirements the Head Start Policy Council approved the City of San Antonio, Department of Human Services Early Head Start – Child Care Partnership Continuation Application for the program year August 1, 2024 to July 31, 2025.

2024-2025 Early Head Start – Child Care Partnership	
Funding Type	Early Head Start – Child Care Partnership
Program Operations	\$3,298,721.00
Training and Technical Assistance	\$64,800.00
Total Non Federal Match	\$840,881.00
Total Amount	\$4,204,402.00

Should you have questions regarding the Head Start Policy Council approval of this Continuation Application, please feel free to contact Ms. Audrey Jackson, Head Start Administrator at (210) 206-5569.

Sincerely,

Ms. Krizia Franklin  
Chair, Head Start Policy Council

***Review of  
2024-2025 Early Head Start-  
Child Care Partnership (EHS-  
CCP) Baseline Grant  
Application***





## **Department of Human Services Head Start Program**

### **Baseline Application for Year 1**

#### **Early Head Start – Child Care Partnership**

#### **Program Year 2024-2025**

#### **Project Description**

The City of San Antonio, Department of Human Services, operates a Head Start Pre-K Program, an Early Head Start and an Early Head Start-Child Care Partnership Program (heretofore, DHS EHS-CCP or EHS-CCP Program). The Department of Human Services (DHS) submits the enclosed EHS-CCP Program baseline application for the start of the next five-year grant cycle spanning August 1, 2024, through July 31, 2029. This application provides information on the 2023-2024 program year operations and details planned services and improvements for the next five-year grant cycle. The EHS-CCP Program will continue program services in six non-profit agencies offering child care services located within two of the 19 school districts within Bexar County to include Edgewood Independent School District (EISD) and San Antonio Independent School District (SAISD). Both EISD and SAISD are located in the central area of Bexar County and center-city of San Antonio. Collectively, EISD and SAISD have the highest demonstrated need for program services in the county based on the program's community assessment that highlights multitude of risk factors faced by the families like low educational attainment, high levels of poverty, and a high number of children born in single parent households compared to other areas of the community. The EHS-CCP

Program works in collaboration with the six non-profit service providers. Together, an EHS-CCP Program is provided that continues to raise the quality of early childhood care and education for our community's most vulnerable children and families within the proposed service area. The EHS-CCP Program will continue to provide center-based services to 216 infants and toddlers in collaboration with six non-profit agencies offering early childhood programs (Child Care Service Providers). DHS EHS-CCP will provide full-day, full-year, comprehensive services that meet the needs of our children and families, enhance access to high-quality child care, support the healthy development of infants and toddlers through strong relationship-based experiences.

The EHS-CCP Program, along with other key dental and medical providers — San Antonio Metropolitan Health District (Metro Health), and the University of the Incarnate Word (UIW) — will prepare children and families for a successful transition to preschool. The EHS-CCP Program will continue to leverage child care subsidies as investments to improve the quality and availability of infant and toddler care within the center city of San Antonio.

Through this grant application, the DHS EHS-CCP Program is requesting funding in the amount of \$4,204,402.00. The total funding amount includes \$3,298,721.00 for program operations and \$64,800.00 for training and technical assistance to offer EHS-CCP Program services for 216 children and their families. The EHS-CCP Program is strengthened by the commitment of local leaders to provide the highest quality early childhood services possible, including the City of San Antonio Mayor, City Council and City Manager. The DHS Head Start Program and its service providers have the capacity and the commitment to carry out the Program's mission: *Preparing children and engaging families for school readiness and life-long success.*

## 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?

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 October 2022 that included DHS Head Start Program stakeholders, Head Start, Early Head Start, and EHS-CCP site faculty, administrators, and child care service providers, Head Start Policy Council members, parents, community leaders, and subject matter experts. The DHS Head Start Program remains committed to providing high quality services and examining the progress of our program towards achieving our goals.

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

<b>Goal 1: Education</b> <i>Prepare children to succeed in school and life</i>	
<b>Measurable Objectives</b>	<b>Outcomes</b>
Decrease the percentage of children enrolled in the EHS Program with chronic absenteeism to 55% in 2023-2024.	At the end of the 2022-2023 program year, 57% of children enrolled in the EHS Program were identified as chronically absent.
Decrease the percentage of children enrolled in the Head Start Pre-K Program with chronic absenteeism to 30% in 2023-2024.	At the end of the program year, 45% of the children enrolled in the Head Start Pre-K Program were identified as chronically absent.
Increase the annual Infant Classroom Assessment Scoring System (CLASS) score by 0.5 from 4.84	The EHS Program conducted Infant CLASS Observations during the 2022-2023 school year.

in <i>Responsive Caregiving</i> in 2017-2018 to 5.34 2023-2024.	The EHS Program scored a 5.51 for <i>Responsive Caregiving</i> .
Increase the annual Toddler Classroom Assessment Scoring System (CLASS) scores by .5 in each domain, from 5.37 in <i>Emotional and Behavioral Support</i> and 3.33 in 2017-2018 to 5.87 in Emotional and Behavioral Support and 3.83 in Engaged Support for Learning by 2023-2024.	The EHS Program conducted Toddler CLASS Observations during the 2022-2023 school year. The EHS Program scored 5.72 in <i>Emotional and Behavioral Support</i> and 3.68 in <i>Engaged Support for Learning</i> .
Increase the annual Head Start Pre-K 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.	Head Start Pre-K conducted CLASS Observations during the 2022-2023 school year. Head Start Pre-K scored a 5.92 in <i>Emotional Support</i> , 5.39 in <i>Classroom Organization</i> , and 3.09 in <i>Instructional Support</i> .
Increase the percentage of children enrolled in the EHS Program that show six months or more of developmental growth in all six domains on the Early Learning Accomplishments Profile (E-LAP) from BOY to EOY by 5% from 31% in 2017-2018 to 36% in 2023-2024.	For the 2022-2023 school year, 22% of children who were assessed at both beginning and end of year showed six months or more of developmental growth in all 6 domains of the E-LAP assessment.
Increase the percentage of children enrolled in the EHS Program that show six months or more of developmental growth in all seven domains on the Learning Accomplishments Profile-3rd Edition (LAP-3) from BOY to EOY by 5% from 41% in 2017-2018 to 46% in 2023-2024.	For the 2022-2023 school year, 6% of children who were assessed at both beginning and end of year showed six months or more of developmental growth in all 7 domains of the LAP assessment.
Increase the percentage of children enrolled in Head Start Pre-K identified as PROFICIENT at EOY in <i>Rapid Letter Naming</i> , <i>Rapid Vocabulary</i> , <i>Phonological Awareness</i> , <i>Letter/Sound Correspondence</i> , <i>Story Retell &amp; Comprehension</i> ,	For the 2022-2023 school year, 77% of children in the program were identified as PROFICIENT in <i>Rapid Letter Naming</i> , 70% in <i>Rapid Vocabulary</i> , 77% in <i>Phonological Awareness</i> , 87% in <i>Letter/Sound Correspondence</i> , 81% in

and <i>Book &amp; Print Awareness</i> on the CIRCLE Progress Monitoring System to 75% across all areas in 2023-2024.	<i>Story Retell &amp; Comprehension</i> , and 74% in <i>Book &amp; Print Awareness</i>
Increase the percentage of children transitioning to kindergarten enrolled in the Head Start Pre-K Program identified as PROFICIENT at EOY in Rapid Letter Naming, Rapid Vocabulary, Phonological Awareness, and Mathematics on the CIRCLE Progress Monitoring System to 75% across all areas in 2023-2024.	For the 2022-2023 school year, 79% of the children transitioning to kindergarten were identified as PROFICIENT at EOY in <i>Rapid Letter Naming</i> , 77% in <i>Rapid Vocabulary</i> , 77% in <i>Phonological Awareness</i> , and 79% <i>Mathematics</i> .
<b>Goal 2: Family Support</b> <i>Promote the well-being of families to enable them to support their children's learning and development</i>	
Measurable Objectives	Outcomes
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.	By the end of the program year, 66% of families enrolled in the program made progress towards completion of an identified <i>Family Self-Sufficiency</i> goal
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.	By the end of the program year, 92% of families enrolled in the program made progress towards completion of an identified <i>Family Life-Practice</i> goal.
Increase the average number of services received per family (such as emergency assistance, parenting education, asset building, or job training and education services) to promote family outcomes from 2.7 in 2021-2022 to 3.0 in 2023-2024.	Families with children enrolled in the program received an average of 2.3 services during the 2022-2023 program year.
Increase the number of parents/guardians that participate in the Head Start Triple P Parenting Program by 96 from 4 in 2020-2021 to 100 in 2023-2024.	By the end of the program year, 47 parents/guardians participated in the Triple P Parenting Program.



<b>Goal 3: Health</b> <i>Children who are healthy and ready to learn</i>	
<b>Measurable Objectives</b>	<b>Outcomes</b>
Increase the percentage of children who are up-to-date on TX EPSDT requirements at the end of the program year to 78% by 2023-2024.	By the end of the 2022-2023 program year, 70% of the children enrolled in the program were up to date on TX EPSDT requirements.
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.	By the end of the program year, 61% of children enrolled in the program received services following a referral for a hearing concern.
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.	By the end of the program year, 46% of the children enrolled in the program received services following a referral for a vision concern.
Increase the percentage of children identified as <i>Class 2</i> following a dental evaluation that are designated as <i>Treatment Complete</i> by the end of the program year by 4% from 63% in 2021-2022 to 67% in 2023-2024.	During the 2022-2023 school year, 73% of the children identified with a dental concern were designated as <i>Treatment Complete</i> at the end of the year,
Decrease the percentage of parents/guardians that report their child had 2 or more sugary drinks. The baseline will be established in 2022-2023 with a percentage decrease determined in 2023-2024.	The Wellness Assessment was implemented with families at the beginning and end of the year. Based on the previous year's data, the program identified consumption of sugary drinks as an area of focus. The program will continue to identify and develop strategies to encourage families to make healthy choices.
Increase the percentage of parents/guardians that report that mental health/wellness services/supports are available by 24% from 11% in 2021-2022 to 35% in 2023-2024.	During the 2022-2023 program year 49% of parents reported that they were aware of the mental health/wellness services/supports available through the program for them and their families.

The DHS Head Start Program showed improvements across several areas. While chronic

absenteeism continues to be an area of concern, the EHS Program, including the EHS-CCP Program, decreased the number of children identified as chronically absent by more than 10% from the previous year. Infant and Toddler CLASS Scores for the 2022-2023 program year exceeded the previous year's scores, and the Head Start Pre-K Program's internal CLASS scores exceeded the Office of Head Start Competitive Thresholds and increased in Emotional Support and Classroom Organization. The percentage of children identified as PROFICIENT at the end of the year exceed 75% across all assessment focus years. The DHS Head Start Program continues to focus on fidelity to the assessment and has seen an increase to the percentage of families that made progress towards a Family Life-Practice Goal. By the end of the 2022 – 2023 program year, all staff from the Family Wellness team, which is a specialized team of family support workers supporting our most vulnerable families, earned accreditation in the tiered, evidence-based parenting curriculum, Triple P in Level 2 and 3. The DHS Head Start Program saw a significant increase in the number of Triple P participants. The program continues to focus on connecting families to their medical home and ensuring children have health care coverage to increase the percentage of children up to date on EPSDT by the end of the program year.

After additional follow up and training, the program saw a significant increase in the percentage of children that received services following a referral. For those who received referrals, there was a 23% increase in receiving hearing services and a 6% increase for receiving vision services. Oral health continues to be a priority of the program, and the support of Metro Health, there was a 10% increase in the percentage of children who received treatment following the identification of dental concern. Finally, the program continues its focus on health and wellness support for children and families. There was a significant increase in the percentage of families who reported they were aware of the mental health/wellness services and supports available

through the program and in the community.

**3. 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.**

The DHS Head Start Program School Readiness team includes DHS Head Start Program staff, SAISD and EISD teachers, site administrators, EHS, including the EHS-CCP Program, childcare staff, community members, and parents/guardians. In establishing the DHS Head Start Program School Readiness Plan, learning outcomes aligned to the Head Start Early Learning Outcomes Framework (HSELOF) were prioritized, and the team developed a set of goals. The DHS Head Start Program School Readiness team developed school readiness goals for each of the five central Head Start domains and created a single set of School Readiness Goals for all 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. As we move into our first year of our next five-year grant cycle, the DHS Head Start Program will work with parents, staff, and stakeholders to develop a new set of school readiness goals for the next five-year grant period.

The DHS Head Start Program's definition of School Readiness has three facets: 1) children are ready for kindergarten; 2) families are ready to support their children's learning; and 3) schools are ready to receive the children. This three-part approach to school readiness integrates all aspects of a child and family's well-being, including their educational, social, and emotional strengths and needs. Recognizing the importance of all Head Start service areas in promoting school readiness, DHS emphasizes parent engagement, education opportunities, ongoing training and technical

assistance, community collaboration, and high-quality early childhood education as central to its school readiness approach.

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.

The DHS Head Start Program utilizes the annual Head Start Self-Assessment and Community Assessment reports, Five-Year Strategic Plan goals, CLASS data, Head Start Early Learning Outcomes Framework, the Parent, Family, Community Engagement Framework, program surveys, family needs assessments, Ages and Stages Questionnaires (e.g., ASQ-3; ASQ:SE-2), home visit notes, parent conference notes, day-to-day interactions with parents, ongoing quality assurance monitoring reports, and child assessment outcome data to develop and assess the school readiness goals. The school readiness stakeholders evaluate the program's needs, review documented activities, and support improved learning outcomes for the children attending the program and their families.

School readiness information is presented to parents at the beginning of the year family meetings when they review the Parent Handbook, Head Start Parent Orientations, Governing Body meetings, Policy Council meetings, Parent Connection Committee meetings, parent conferences, trainings and handouts to ensure all families are informed of the focus on school readiness.

The educational program's capacity to build school readiness in all children will define the success of the DHS Head Start Program. Child assessment and related data is gathered, analyzed and reported every quarter by DHS education staff to quantify progress towards goal achievement.

This will include a thorough review of beginning, middle and end of year outcomes as well as evaluations of teacher-child interaction using Infant Toddler and Pre-K Classroom Assessment Scoring System (CLASS), an observational tool designed to improve teaching and learning.

The CLASS results will guide the DHS Head Start Program's continuous improvement initiatives, which may include enhancement or re-sequencing of curriculum, instruction, professional development, program design and programmatic decision-making. Reports are provided to the Head Start Policy Council and governing body advisory committee on program performance and quarterly reviews of objective achievement, per the Strategic Plan.

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

The DHS Head Start Program 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 DHS Head Start Program's governing body, the City of San Antonio's City Council, and the Bexar County Community Action Advisory Board (CAAB), which acts as the DHS Head Start advisory committee to the City Council, as well as the City of San Antonio Head Start Policy Council (HSPC). In addition to our governing body participation, DHS Head Start Program parents and other community stakeholders are 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 Strategic Planning events. During these events, the members actively participate by providing recommendations, asking questions in open discussion, and providing feedback regarding program data and goals. All participants assist in the development of the program's short-term and long-term goals during the Strategic Planning event. The DHS Head

Start Program's governing body, including the advisory committee to the governing body, and HSPC members, review and approve the final Self-Assessment report, School Readiness goals, and Five-Year Strategic Plan.

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

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

The EHS-CCP Program has a defined service area for families living or working within the EISD and SAISD district boundaries located in Bexar County, Texas. Recruitment is focused within these boundaries. The central and southern portions of the City of San Antonio have greater concentrations of poverty and income-eligible children than other areas of the city. Our 2022 Community Assessment documents the composition of the families that reside within this area and provides strong evidence for the need for high quality infant and toddler early childhood programs such as the EHS-CCP Program.

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

According to our current 2022 Community Assessment Update, there is an estimated total of 26,962 eligible children under five years of age within the DHS Head Start Program service area, including 22,321 within SAISD and 4,641 within EISD. The service area 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 (61%) and the state of Texas (39%).

Census data shows there are 2,446 children under the age of three in EISD's two zip codes and 999 (41%) live in poverty and are eligible for EHS. Though the poverty percentage is relatively static, resident density varies. More than half (68%) of all families in these zip codes have a female

head of household.

Fifty-one percent of SAISD residents and 69% of EISD residents speak a language other than English, generally Spanish in EISD (68%) and SAISD (49%). SAISD and EISD are among the Bexar County school districts with the greatest proportion of students participating in bilingual education, 22% and 15%, respectively. These are greater percentages of bilingual and ESL students enrolled than in Bexar County (14%). Additional needs and considerations of DHS Head Start Program children and families stem from many participants and families experiencing homelessness, placed in foster care, and/or having a disability. The available data showed that the DHS Head Start Program served 405 families experiencing homelessness and 45 children in foster care during the 2022-2023 program year. In 2022-2023, approximately 548 children served by the DHS Head Start Program were determined to have a disability (i.e., 17% of enrollment). Among these children, speech and language impairments were the most common disabilities (i.e., 256 children, 8% of total enrollment).

The average educational attainment among adult residents of SAISD and EISD is less than that of the city, county, state, and nation. Nearly one-third of the population of SAISD residents and over one-third of the population of EISD do not have a high school credential; fifteen percent of SAISD residents and 5% of EISD residents earned at least a Bachelor's degree, compared to the City of San Antonio (26%), and Bexar County (29%). Many households in SAISD and EISD rely on public assistance. Over one-third of EISD households and nearly one-quarter of SAISD households use Supplemental Nutrition Assistance Program (SNAP) and 10% of SAISD and 12% 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 and the University of the Incarnate Word provide immunizations, flu and COVID vaccine clinics and dental services across the Head Start Pre-K, Early Head Start and EHS-CCP Program, and the San Antonio Food Bank provides food and grocery products to children and families.

According to the DHS Community Assessment 2022 Update, there is a need for additional infant toddler slots in the area (3,656 children in need of services) compared to preschool aged children (2,129 children in need of services without including increase in charter school capacity). Fewer entities serve children aged 0-2 years when compared to children 3-4 years and older. Many families may not be able to afford the cost of local childcare. With about 3,656 age and income eligible children not being served, it is important that our program expand to address the existing need for children aged 0-2 years living in the service area.

Projections produced by the Texas Demographic Center indicate that the need for Early Head Start and Head Start services in Bexar County will continue to grow through 2031. The need for Early Head Start services will be especially important to meet going forward, based on the number of age- and income-eligible children residing in Bexar County by 2031.

There is an unmet need for child care within both EISD and SAISD service area based on the 2022 Community Assessment Update with 90 facilities that serve children 0-2 years of age and 117 facilities that serve children 3-4 years of age. However, there is a stark difference between capacity to serve students and the demand for services, especially for infants (aged 0-17 months) and toddlers (18 months to 2 years) in the targeted service area.

To better explain the deficit, there are 15 facilities in EISD service area that serve children 0-2 years of age with a capacity of 1,528 children but an estimated 2,743 children within the same age range resulting in a 1,215 deficit. In the SAISD service area, there are 75 facilities with a 6,010



capacity and an estimate of 13, 655 children 0-2 years of age resulting in a 7,645 deficit. The lack of basic infant/toddler care is profound. Families may not be able to afford the cost of local childcare much less higher quality infant toddler care.

A state think-tank called Children at Risk has published a childcare desert interactive map, which indicates only 5-15 child-care seats per 100 children of working families in the 78208-zip code (SAISD proposed EHS site) are available. More importantly, the interactive map indicates only four child-care seats per 100 children of working families in centers with a Texas Rising Star (TRS) rating, Texas' official Quality Rating and Improvement System are available. <https://childrenatrisk.org/childcaredesertmap/>

Having access to quality early learning centers as an option is clearly a barrier for families living within the DHS Head Start service area. The Community Assessment details quite starkly the need for increased infant and toddler center-based childcare in our service area.

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

The EHS-CCP Program will offer, year round, full-day center-based services during the 2024 - 2025 program year and beyond. The DHS and the six Child Care Service Providers are committed to ensuring a safe learning environment.

The EHS-CCP Program will continue to utilize a 10-hour day, center-based option during the 2024-2025 program year and beyond. Operating hours are aligned with the needs of parents. As families enroll, program staff seek additional resources to support the families that are most in need of EHS –CCP services.

Child Care Service Providers operate at a minimum of 48 weeks, five days per week with the average EHS-CCP time being 7:30am – 5:30pm (times may vary by site).

The current program model has an advanced system of program planning that incorporates

members of the Head Start Pre-K Program, EHS Program 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.

## **8. Centers and Facilities:**

The EHS-CCP Program will operate a total of six center locations for the **2024-2025** program year.

**Table 2. Slot and Contract Allocations per Child Care Service Providers**

<b>Child Care Service Providers</b>	<b>2024-2025 Allocations</b>	<b>2024-2025 Contracts Allocation</b>
Blessed Sacrament Academy	40	\$359,082.00
Ella Austin	48	\$430,898.00
Healy Murphy	64	\$574,531.00
Inman Christian	28	\$251,358.00
Seton Home	16	\$143,633.00
YWCA –Olga Madrid	20	\$179,541.00
<b>Total</b>	<b>216</b>	<b>\$1,939,043.00</b>

## **Needs of Children and Families**

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

In order to prioritize families with the most need for program services, the EHS-CCP Program utilizes selection criteria generated from the annual Community Assessment. The EHS-CCP Program actively recruits families most in need of services. Recruitment efforts are conducted throughout the year in collaboration with our Head Start team, Child Care Service Providers, as well as other community partners. Recruitment efforts increase annually in the late winter and

early spring and continue throughout the year. Our recruitment strategies include a multimedia campaign, participation in community events, canvassing neighborhoods, street banners, newspaper advertising, social media, meeting with community organizations to educate about the service options and referrals with other agencies. Recruitment plans are developed and approved annually by the Governing Body and HSPC.

The DHS Head Start Program utilizes a selection process that prioritizes children based on a point system which weighs vulnerability factors: income, homelessness, foster care status, public assistance, and disability status. This process is used for all children, including children with disabilities and Spanish language dominant children. At a minimum, 10% of the program's annual enrollment is comprised of children with disabilities, though the program frequently exceeds this threshold. In addition, all children are placed in a linguistically and developmentally appropriate classroom.

On March 21, 2022, OHS revised the categorical eligibility for families eligible for the Supplemental Nutrition Assistance (SNAP) Program to be included as part of Public Assistance definition. As directed, this update was to take effect immediately once program procedures were updated. This revision changed eligibility for families identified and waitlisted as over income who received SNAP benefits to become eligible for our program. This update also impacted the program selection criteria and eligible families were awarded points to reflect this revision.

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 EHS-CCP Program. DHS collaborates and has ongoing communication with local Early Childhood Intervention agencies and districts' special education directors and homeless liaison staff regarding the status of

children's referrals and services. In addition, the family support staff continually connects and networks with others in the community to promote the program.

In order to promote regular attendance, the EHS-CCP Program 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.

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

The EHS-CCP Program provides early education and child development services according to the following philosophy: 1) high-quality early education programs include curriculum that is thoughtfully planned to focus children's attention on important concepts, skills and behaviors in critical areas of development and learning; 2) developmentally appropriate, challenging, engaging and culturally and linguistically responsive curriculum promotes positive outcomes for all; 3) unless teachers or home visitors know where each child is with respect to learning outcomes, they cannot be intentional about helping them progress; and 4) teachers instructional practices can be improved, opportunities to individualize instruction can be increased and standards can be met when curriculum and assessment are linked. All training, technical assistance and teacher observation activities relate to one or more of these core concepts.

Individualization of instruction and support is central to the EHS-CCP Program philosophy. Individualization in instruction and support means child-based activities are developed based on each child's strengths, needs, and interests. Children's parents/guardians are kept up to date on their child's progress through formal and informal assessment data.

The EHS-CCP Program collects, aggregates, and analyzes formal child assessment data three times per year: beginning of the year (BOY), middle of the year (MOY), and end of the year (EOY). Analysis of change is conducted at the child, classroom, center and program levels and trends are used to adjust instruction and design professional development opportunities. Parents are informed of assessment results and their children's progress. Beginning of the year assessment data provides the baseline of each child's strengths and needs and signals education and home visiting staff of areas requiring additional support. Middle of the year data is compared with BOY data to determine gains and identify areas for continued support. End of the year data is used to identify student growth and the need for program improvements. At the end of the program year, an analysis and comparison of BOY, MOY, and EOY will help underscore program achievement, the impact of service delivery, and school readiness goals for the upcoming program year.

### **DHS Early Head Start Education and Child Development**

The EHS Program uses the Creative Curriculum for Infants, Toddlers and Twos, designed to advance school success in vulnerable children. Creative Curriculum is used for the center-based option and supplements the home base curriculum. Using Creative Curriculum, staff recognize that the curriculum provides the guidance, support, and practical ideas for working with families to build trusting and respectful partnerships with its core "Partnering with Families" component central to the overall curriculum.

Creative Curriculum, which is based in child development and early education research and theory, was chosen for its capacity to quickly achieve a consistent level of quality, regardless of the developmental stage a child is at when they enter the program. The curriculum helps teachers understand developmentally appropriate practices, the importance of creating daily routines and meaningful experiences that respond to children's strengths, interests and needs. It is widely used

across the United States and is aligned with the Head Start Early Learning Outcomes Framework. Curriculum materials provide simple, easily adopted, and detailed instructions for: a) creating learning environments; b) individualizing for diverse learners and children with disabilities; c) teaching content areas; and d) integrating in-depth investigations of topics of interest to children. Embedded within the curriculum are assessment links, providing opportunities for daily, guided observation of progress. The Curriculum contains 38 research-based objectives for development and learning, enabling teachers to focus on what matters most for very young children, and is aligned to kindergarten readiness, which is of great importance locally.

The EHS-CCP Program utilizes the Early Learning Accomplishments Profile (E-LAP) for children birth – 36 months old and the Learning Accomplishments Profile – 3rd Edition (LAP-3) for children who turn three during the program year as the assessment is designed for children 36 – 72 months of age. The E-LAP and LAP-3 are criterion-referenced assessments and provide a systematic method for observing the skill development of children.

The E-LAP and LAP-3 provides a systematic method for observing the skill development of children at all stages. The LAP system assesses each child's strengths and needs in six domains - gross motor, fine motor, cognition, language, self-help and social emotional - which align with the Head Start Early Learning Outcomes Framework. The availability of LAP data will assist teachers in tailoring individualized instruction, support and activities to each child's level.

An important note to make, the LAP assessments also provide a comparison between a child's chronological age and their developmental age. Children are described as scoring ON TARGET in each developmental domain when the developmental age is +/- six months of a child's chronological age. The EHS-CCP Program summarize and share assessment information with parents at the beginning, middle and end of each year. Parent input regarding assessment results is

used by staff to establish individual school readiness goals for each child. Early Head Start Program staff also use center-level and program-level assessment data to monitor program-wide progress and plan training and technical assistance activities.

The DHS staff work closely with the Child Care Service Providers to build a program of responsive, respectful infant/toddler care while recognizing the value of the families and emphasizing relationship-based care. The EHS-CCP Program provides families with monthly School Readiness Home Learning Activity sheet to strengthen the home classroom connection. The School Readiness Home Learning Activity sheet include activities that will promote strong parent-child connections. The EHS Program continues to focus on promoting the Program for Infant / Toddler Care (PITC) philosophy, increasing quality teacher / child interactions using the Infant and Toddler Classroom Assessment Scoring System (CLASS), strengthening curriculum implementation, coaching and supporting families in understanding their role in their child's development. Families as partners-in-care are central to our program and to increasing the quality of the early childcare services in our community.

Top priorities for the 2024-2025 program year include the continuation of the Pyramid Model to support social and emotional development and strengthening the knowledge of Trauma Informed Care (TIC) with the program staff. The EHS-CCP Program will continue to focus on TIC and increase professional development opportunities in 2024-2025 for the direct purpose of building and strengthening a tiered wellness response system to meet the increase needs of children, families, and staff into the 2024-2025 program year and beyond.

#### **11. Health (see 1302 Subpart D):**

The DHS Head Start Program 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.

The EHS-CCP Program has 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 communication with parents and families are structured and timely.

The EHS-CCP Program follows guidance from the Office of Head Start, the American Dental Association, and the local health authority regarding oral health services. Oral health and education are a priority for our program. The EHS-CCP Program contracts with the Metro Health Dental Division to provide onsite dental services. With parental consent, children enrolled in the EHS-CCP Program receive two dental evaluations and two fluoride varnishes during the program year. Children participate in tooth-brushing and oral health education daily.

Families living in SAISD and EISD are at high risk for lead exposure due to the age of the housing inventory available in the area. In partnership with the University of the Incarnate Word Miller School of Nursing (UIW), the EHS-CCP Program provides on-site lead screenings for children with a missing blood lead screening, 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. Children with reported high lead levels are provided one on one case management by UIW Faculty. Families are also provided with a referral to the City of San Antonio Green and Healthy Homes Initiative program for possible home rehabilitation and lead abatement services.



The EHS-CCP Program partners with the City of San Antonio Green and Healthy 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, the program has assisted 82 families enrolled in Head Start to address health hazards and create a healthy lead safe environment for their children. As of June 2021, \$1.443 million federal HUD grant dollars have been spent on home rehabilitation services for families enrolled in the DHS Head Start Program.

DHS EHS-CCP Program staff continue to work with families to ensure they are aware of the importance of staying up to date on well child exams, immunizations, and any other healthcare needs. Families are encouraged to advocate for their child's health needs and ensure developmental milestones are reached as appropriate.

**Wellness Services for Children and Families (see 1302 Subpart D):**

The EHS-CCP Program prioritizes the health and well-being of all staff, children, and families by implementing a comprehensive ongoing trauma-informed approach. The program staffs specialized teams that collaborate with other content areas and partners that consists of both licensed and trained mental health professionals to address individualized family needs utilizing various modalities such as family needs assessments and wellness assessments while implementing person-centered, strengths-based and trauma-informed care approaches. The program provides professional development opportunities to all staff to continue building a trauma informed approach and increase capacity on the impact trauma has on staff, children, and families.

Additional training and professional development are planned for all staff on strategies that can be implemented to support families through a trauma-informed care approach.

### **DHS Early Head Start-Child Care Partnership Program Wellness Services**

The EHS-CCP Program entered into a multi-year contract with First Three Years to provide a series of professional development that focuses on trauma informed care concepts, strategies to scaffold the learning opportunities to classroom teachers, home visitors and family support staff. The EHS-CCP Program continues to work towards utilizing the Pyramid Model, which provides the Program with a framework of evidence-based practice to promote children's social and emotional development. The EHS-CCP Program continues the pursuit of knowledge and understanding to build out an implementation plan. The DHS EHS Early Education Services team, 10 of the Child Care Service Providers' Peer Coach/Instructional Coach completed successfully, class and testing, to obtain reliability in the Teaching Pyramid Infant Toddler Observation Scales (TPITOS) during January 2024. The next steps are to design a realistic implementation plan on the use of TPITOS in addition to the many other Pyramid Model resources and tools.

Wellness services are an integral part of a trauma informed approach. The EHS-CCP Program continues to strengthen a three-tiered approach to provide wellness services for the program: Tier 1 Promotion – Nurturing and Responsive Relationships and High-Quality Supportive, Tier 2 Prevention – Target Social- Emotional Supports, and Tier 3 Individualized Intervention. As the EHS-CCP Program continues to work to strengthen the supports around wellness, it became apparent to rename Tier 3 from intensive to individualize to accurately reflect the actual work at this level. Wellness strategies that support Tier 1 & Tier 2 Promotion and Prevention are provided throughout each program year to include training and professional development on the importance of self-care and strategies that support self-care, setting up

classroom environments to include learning centers that provide opportunities for the teacher to support a child's emotional self-regulation, parenting education that promote the use of positive parenting practices, and opportunities for parents to network and connect with other parents in the program.

The EHS-CCP Program contracts with a community-based agency, Family Service Association, to provide Tier 3: Individualized Intervention services by a licensed mental health professional to staff, children, and families in need of support. In program year 2021-2022 all DHS Head Start Program staff went through Mental Health First Aid training by Amerigroup to prepare for responding to families and staff in crisis. Implementing strategies to support wellness will be reinforced and additional training provided moving into the 2024-2025 program year. In addition, in the later part of program year 2022-2023, DHS Head Start Program staff participated in a foundational training on the benefits of the Infant Mental Health model of Reflective Supervision Consultation (RCS).

Over the summer months of 2022, DHS Head Start Program supervisors participated in a series of professional development and RCS sessions to learn and practice the RSC model. The focus around this work is an effort that front line staff will benefit of the practices and therefore better serve the families and incorporate the strategies in their work with the families. Work will continue through the 2023-2024 and 2024-2025 program years.

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

DHS EHS-CCP Program Family Support Services promote family well-being, strong parent-child relationships, and the ongoing learning and development of the children and their families. The EHS-CCP Program achieves these three outcomes by providing supports and services responsive to families' expressed needs and through collaboration with the parents.

Family support staff utilize various processes and activities to facilitate achievement of positive family outcomes that align with the Parent Family Community Engagement (PFCE) Framework.

DHS EHS-CCP Program Family Support Team continues to build rapport with families by conducting home visits, utilizing the family assessment, the collaborative family goal setting process, offering resources and referrals, providing parent engagement opportunities, and communicating with parents in their preferred language.

The DHS EHS-CCP 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, Ready Rosie, while engaging in our program. DHS EHS Wellness staff 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 EHS-CCP families and to make Triple P one of the identified parenting curricula for the city along with Ready Rosie. During the 2023-2024 program year, four discussion groups were held in the fall of 2023 and four are planned for the spring 2024 at two EHS-CCP child care centers.

Discussion groups provide parents with an overview of positive parenting principles related to four topics: Dealing with Disobedience, Managing Fighting and Aggression, Developing Good Bedtime Routines and Hassle-free Shopping with Children. In addition to each discussion group, parents will be provided an opportunity to receive additional individualized support if requested.

A key strength of the DHS Head Start Program is its collaborations with community partners that are deeply rooted and committed to San Antonio's center city. They are known and trusted allies for EHS-CCP Program families and have additional resources and expertise to offer meaningful support in the face of life's biggest challenges. Referrals may be for mental wellness

services, parent education and learning opportunities which are provided through community offerings such as workshops, meetings and events. In addition, parents/guardians are surveyed at the beginning of the program year to determine topics of interest in addition to the best days and times to host events.

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

The EHS-CCP Program has procedures in place to prioritize the recruitment of children with disabilities and to ensure identification of undiagnosed disabilities after enrollment. The approach to serving children with unique needs is guided by the belief that inclusion is a value and enhances the program for all children.

The EHS-CCP Program will continue relationships within the community to recruit children with disabilities. The primary methods used are: a) developing and distributing materials that implicitly state that all children with disabilities, including those with severe disabilities are welcome to apply; b) working with the Early Childhood Intervention Program (ECI), Part C to inform parents of the availability of EHS; and c) engaging EISD's and SAID's Special Education and Child Find staff in publicizing EHS availability. The EHS-CCP Program maintains cooperative agreements with the three Bexar County ECI providers (Easter Seals, Brighton Center, and the Center for Health Care Services) to streamline referrals and follow up. EHS-CCP Program staff continue to work with parents to discuss the benefits of early intervention services and provide resources and referrals for alternative options for intervention services.

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. The EHS-CCP Program will continue to offer the highest quality professional development for all

EHS-CCP Program staff as the program serves a higher population of children with varying abilities. The approach to professional development in this area includes evidence-based practices with content focused on specific research-based teaching intervention practices with embedded inclusion strategies.

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

Transitions bring change into the lives of children and families. The EHS-CCP Program staff implement strategies and practices to support successful transitions for children and their families. In addition to transitioning children from EHS into Head Start, other Pre-K programs, and children from Head Start into kindergarten or other Early Childhood Development programs, the EHS-CCP Program considers the changes that occur when children enter the program, move from classroom to classroom, or when children move to any other program as important transitions. Transition planning begins six months before the child turns three within the EHS-CCP Program. Parents receive a transition letter informing them of their child's upcoming transition at the end of the program year from EHS-CCP into Head Start or other PreK programs. Parents of transitioning children are invited to attend a meeting where they are provided with information regarding Head Start. Head Start district staff are in attendance to answer questions regarding children with disabilities, school locations and opportunities to tour the school. In addition, family support staff work with families to ensure that Head Start applications are completed and any additional resources or referrals are provided.

In both the Head Start Pre-K and EHS programs, teachers address transitions during the beginning of the year Home Visit, as well at the end of year Parent/Teacher Conference.

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

Not Applicable.

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

Family Support staff continues to work with families to identify any transportation needs.

Assistance is offered through community resources and the provision of bus passes for those families needing them.

Child Care Service Providers promote age-appropriate pedestrian and school bus safety for children and their families and document annual activities in their classroom lesson plans. “I’m SAFE” Car Safety Banners will continue to be used for displaying as parents/guardians drop off and pick up children to increase awareness of “Never Leave a Child Alone” in vehicles to prevent vehicular fatalities.

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

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

**Structure**

The City of San Antonio Mayor and City Council, DHS Head Start Program Governing Body, oversees a public entity and are selected to their positions by public election. DHS Head Start Pre-K, EHS and EHS-CCP Programs share the same Governance structure. 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.

The DHS Head Start Program Policy Council (HSPC) is composed of twenty-four members, with DHS Head Start Program parents of currently enrolled children representing 83% of the Council. San Antonio ISD Head Start Pre-K has eight parent representatives (four primary and four alternates), EISD Head Start Pre-K has four parent representatives (two primary and two alternates), and EISD EHS has four parent representatives (two primary and two alternates) which include center based and home based representation, EHS-Child Care Partnership has four parent

representatives (two primary and two alternates). Four Community Representatives (two primary and two alternates) are elected from the community at large by the HSPC parents to serve on the Council.

### **Governing Body Processes**

The City of San Antonio City Council as our governing body, has the 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, per Head Start standards, it has authorized the Bexar County Community Action Advisory Board (CAAB) to oversee other key programmatic responsibilities. The Governing Body, the Governing Body Advisory Committee (CAAB), 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 Head Start Policy Council and CAAB are charged with oversight of specific DHS Head Start Program functions and receive monthly fiscal and program reports which are provided one week prior to the scheduled meeting. DHS Head Start Program 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, the Governing Body Advisory Committee (CAAB), and Policy Council throughout the year and decision-making items are presented for program development, budget and policy, and community advocacy.



The Finance Department, City Attorney's Office, and Department of Human Services provide legal, fiscal, and management expertise. Grant applications, service provider allocations, and all contracts over \$50,000.00 require City Council final approval prior to submission to the U.S. Department of Health and Human Services (HHS) or execution.

### **Policy Council**

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 are held in-person and safety protocols are followed to ensure the safety of the members.

### **Parent Committees**

The DHS Head Start Program schedules regular Parent Connection Committee (PCC) meetings at each site. PCC meetings begin in September each Fall and continue with each program year, to maintain a governing structure that ensures two-way communication between parents and the Policy Council. Parents have the opportunity to become Parent Leaders. The Parent Leader option is to assist with building leadership skills, provide free workshops, trainings, and

community events opportunities to families in the program. 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. The EHS CCP Program holds PCC meetings at each center. 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 EHS-CCP Program children 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.

### **Relationships**

The Governing Body 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 Body and the HSPC to ensure that members understand the information presented and discussed and can effectively oversee and participate in the program. Governing Body members receive ongoing monitoring results, data on school readiness goals, and items to determine eligibility under applicable federal regulations and program policies and procedures.

The DHS Head Start Program details the need to avoid conflict of interest in the DHS Head Start Policy Council bylaws. Parent/legal guardians of currently enrolled children, as well as community members seeking a position on the HSPC, must not have financial conflicts of interest: be personally employed or have an immediate family member employed with the program nor receive compensation for providing services to the program.

The 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 Programs Governing Body is exempt from Composition requirements as stated in Section 642(c) of the Head Start Act.

The Governing Body and HSPC are provided program items to review and approve monthly. The Governing Body advisory committee members are invited to attend the monthly HSPC meetings and the HSPC members are invited to attend monthly Governing Body advisory committee meetings. The DHS Head Start Program has implemented a well thought out impasse procedures that have been approved by the City of San Antonio City Council, the governing body advisory committee (CAAB) and the HSPC. The impasse procedure provides steps to be taken in the event that there is a disagreement on how to proceed with a decision that governs the program. The procedure details meaningful collaboration efforts towards coming to a joint decision.

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

The DHS Head Start Program maintains an organizational chart to display the management and staffing structure including all of DHS Head Start Program staff, the DHS Director, and the DHS Fiscal staff.

The DHS Head Start Program collaborates with the City of San Antonio's Human Resources Department to ensure all newly hired DHS Head Start Program 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. In addition, Child Care Service Provider staff ensures new employees meet Child Care Regulations Minimum Standards upon hire and ongoing to stay in compliance with both Minimum Standards and HSPPS.

All new staff receive 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, Head Start Program Governance, and a program overview.

The EHS-CCP Program collaborates with all Child Care Service Providers to provide a comprehensive approach to professional development for all DHS Head Start Program 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 the DHS Head Start Program and each Child Care Service Provider agency, our approach to Professional Development also includes attendance at conferences and workshops offered at the local, state, and national level.

In partnership with the Child Care Service Providers, EHS-CCP provides a coordinated coaching strategy for teachers. DHS Early Head Start Program staff implement the Together Learning and Collaborating (TLC), a group format practice-based coaching model promoted by The National Center on Quality Teaching and Learning (NCQTL), to support teachers for intensive coaching. Participants meet for twenty sessions and each session focuses on teaching practices using video

recording, reflection, group and individual feedback.

Teaching Strategies Fidelity tools are completed to assess every EHS-CCP Program teacher and their level of curriculum understanding and implementation. Based on the results, identified peer coaches utilize the Coaching to Fidelity Guide to individualize coaching strategies and support teachers in using curriculum. Training and technical assistance is offered by Early Education Services Mentors to support Peer Coaches and teachers in using Creative Curriculum with fidelity and Coaching to Fidelity. Support is provided to peer coaches to strengthen coaching strategies to support curriculum implementation.

In addition, DHS EHS Program has established a Peer Coach support system at each of the EHS-CCP locations. Each Child Care Service Provider identifies a Peer Coach that is responsible for working with each of the EHS-CCP classroom staff to support implementation of curriculum, child development assessments, home visit and parent/teacher conference support and individualization. Monthly Peer Coach networking sessions are held and facilitated by the DHS EHS Early Education Services team to bring the Peer Coaches together to discuss successes and challenges they may see. Updated information is shared, and ongoing planning is incorporated into the monthly sessions. Peer Coaches have expressed the value and benefits of attending the monthly sessions in their own work with their center classroom staff.

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

The EHS-CCP Program is responsible for the monitoring of the six Child Care Service Providers (direct monitoring) and reviewing and validating results of the monitoring activities (indirect monitoring). In addition, the EHS-CCP Program uses a three-level monitoring system to ensure program compliance at all levels: 1) Texas Child Care Regulation inspections completed for Child Care Service Providers, (2) DHS Early Head Start staff conducts monitoring and (3)

Texas Rising Star conducts ongoing reviews to ensure compliance with the center's awarded stars through the TRS system. At this point in time, all six EHS-CCP Child Care Service Providers are 4 Stars; the highest of all stars.

The EHS-CCP Program's quality assurance system allows for multiple levels of review and continuous program improvement. Monitoring methods include on-site announced and unannounced visits, coordinator interviews, ChildPlus reports, questionnaires, and surveys. DHS EHS Program staff collect and use data from the Self-Assessment and ongoing monitoring tools to make any recommended policy and procedures changes and informs the Policy Council and Governing Body. 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. The DHS EHS-CCP Program remains committed to providing quality services and achieving our monitoring goals. Ongoing monitoring provides data needed to evaluate compliance with the HSPPS and make recommendations to improve the level of program service

Communication is central to quality leadership and management of the DHS EHS-CCP Program. 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. The training and technical assistance components of the grant assures the building of staff capacity and well-being.



**City of San Antonio  
Department of Human Services  
Early Head Start Program – Child Care Partnership  
Continuation Application  
Program Year 2024-2025**

**Budget Narrative**

**1. Summary**

The City of San Antonio Department of Human Services Early Head Start-Child Care Partnership (DHS EHS-CCP) Program submits the enclosed budget for the 2024-2025 refunding application for the period of August 1, 2024, through July 31, 2025 in the total amount of \$4,204,402.00. The total amount consists of \$3,298,721.00 in program operations and \$64,800.00 for training and technical assistance. DHS EHS-CCP's contribution of non-federal resources is \$840,881.00, which is (20%) of the grant.

DHS provides general program oversight, governance, program design, policies, and technical assistance to contracted service providers that carry out direct program services in the areas of Early Childhood Education, Health, Nutrition, Disabilities, and Safe Environments. Additionally, DHS EHS-CCP provides direct services in the areas of Family and Community Support, Health and Training and Technical Assistance. DHS's goals are to ensure program integrity and sound management principles as well as fiscal responsibility. All procurement follows City's processes.

The City defines and outlines policies with respect to the financial management of grants administered within the City. Grants management policies and procedures have been adopted for uniform application in all departments. DHS has policies and procedures that describe the process for initiation of master financial data, cash management, in-kind support, monitoring, and month and year end procedures in relation to grants. It is the policy of the City and DHS that grants are managed in accordance with federal, state, and local guidelines. DHS promotes effective controls to ensure the protection of City assets, accurate financial reporting, and efficient use of City resources regardless of funding. Please visit the following link to access financial policies, administrative directives, ethics code and financial reports. <https://www.sanantonio.gov/finance>

**2. Early Head Start – Child Care Partnership Budget Justification – Federal Share**

**PERSONNEL**

**\$878,813.00**

Grant No: 06HP000255

The proposed staffing model represents the number of positions required to administer and monitor the program effectively and efficiently. Funding amounts represent costs reflected on the operations and training and technical assistance budgets.

<b>Category Description Job Title</b>	<b># FTEs</b>	<b>Total Annual Salary</b>	<b>Program Ops Federal Amount</b>
Head Start Program Administrator	.06	\$162,984	\$9,779
Senior Special Projects Manager	.45	\$116,801	\$52,560
Senior Management Coordinator	.06	\$82,821	\$4,969
Special Projects Manager	1.16	\$258,309	\$103,477
Senior Management Analyst	.67	\$223,714	\$54,198
Management Analyst	4.39	\$824,328	\$241,646
Family Support Supervisor	.55	\$53,309	\$29,320
Family Support Worker	6.55	\$334,137	\$334,137
Fiscal Manager	.10	\$89,736	\$8,974
Fiscal Analyst	.50	\$35,947	\$35,947
Senior Accountant	.05	\$55,090	\$2,755
Accountant	.05	\$47,590	\$2,380
Administrative Associate	.06	\$39,629	\$2,378
Administrative Assistant I	.12	\$93,818	\$5,629
Administrative Assistant II	.06	\$51,530	\$3,092
IT On Site Support Specialist	.06	\$56,532	\$3,392
Turnover			(15,820.00)
<b>TOTAL</b>			<b>\$878,813</b>

## **FRINGE BENEFITS**

**\$352,419.00**

Social Security (FICA)

\$68,637

Health/Dental/Life Insurance

\$140,574

Health insurance is paid for full time employees working at least 40 hours per week. Employees may elect to pay for dental insurance, supplemental life insurance, and other additional insurance coverage.

Retirement

\$124,803

Employees participate in a retirement program after meeting employment criteria. The City will match 13.91% of the employee's salary.

Other Fringe Benefits

\$18,405

The City provides employees incentives for language skills and unused personal leave.

## **SUPPLIES**

**\$34,007.00**



Grant No: 06HP000255

Description	Amount
General Office Supplies <i>Copier paper, pens, pencils, file folders, and other consumable office supplies</i>	\$8,000
Supplies for staff, books, manuals, and/or other resources	\$4,342
Other Commodities	\$10,000
Cap <5000 – Computer Equipment	\$9,665
Cap <5000 – Furniture & Fix	\$2,000
<b>TOTAL</b>	<b>\$34,007</b>

**CONTRACTUAL**

**\$1,991,693.00**

#### **Fees to Professional Contractors**

Service	Amount
Wellness Services	\$40,000
ESD and Associates  <i>Head Start Program guidelines require grantees to develop and implement a recruitment process that informs Head Start eligible families of available services and to encourage families to apply for admission. To do this, the Head Start Program utilizes its website which provides, in both English and Spanish, the community with critical program information such as eligibility information, how to apply, resources, and locations of Head Start Program centers. Additionally, ESD provides website hosting, maintenance, and content management support.</i> <a href="http://www.saheadstart.org">www.saheadstart.org</a>	\$1,050
Translation Services	\$1,000
<b>TOTAL</b>	<b>\$42,050</b>

#### **Contractual Services**

Contractors/Services	Amount
Community Assessment	\$1,600
Nutrition Therapy Associates	\$3,000
UIW Health Services	\$6,000

<b>TOTAL</b>	<b>\$10,600</b>
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**Contractual Services – Child Care Centers**

The EHS-CCP's budget for contractual costs includes funding allocations for the following services: education, disabilities, health, dental and wellness services for 216 children enrolled in the EHS-CCP Program. Service providers are contractually obligated to provide non-federal share in proportion to their allocations. The City will disburse allocations to the service providers accordingly.

<b>Service Providers</b>	<b>Number of Children</b>	<b>Amount</b>
Blessed Sacrament Academy CDC	40	\$359,082
Ella Austin Community Center	48	\$430,898
Healy Murphy Center, Inc.	64	\$574,531
Inman Christian Center	28	\$251,358
Seton Home	16	\$143,633
YWCA – Olga Madrid CDC	20	\$179,541
<b>TOTAL</b>		<b>\$1,939,043</b>

**OTHER****\$41,789.00**

<b>Program Operations</b>	<b>Amount</b>
Binding & Printing	\$4,559
Subscription to Computer Services – Ready Rosie, ChildPlus	\$2,590
Transportation Fees	\$2,000
Maintenance-Buildings	\$500
Cleaning Services	\$17,107
Rental of Office Equipment	\$1,586
Alarm and Security Services	\$72
Food for PC, Training Events and Parent Meetings	\$3,000
Cellular Phone Service	\$2,530
Wireless Data Communications	\$1,500
Software Licenses	\$4,260
DW Other-Childcare/PC Reimbursements/Bus Passes	\$2,085
<b>TOTAL</b>	<b>\$41,789</b>

**TOTAL COST FOR FEDERAL SHARE****\$3,298,721.00**

**3. Training and Technical Assistance****PERSONNEL****\$17,452.00**

<b>Category Description Job Title</b>	<b># FTEs</b>	<b>Total Annual Salary</b>	<b>T&amp;TA</b>
Management Analyst	.61	\$106,215	\$17,452

**FRINGE BENEFITS****\$4,434.00**

Social Security (FICA)

\$1,340

Health/Dental/Life Insurance

\$592

Health insurance is paid for full time employees working at least 40 hours per week.

Employees may elect to pay for dental insurance, supplemental life insurance, and other additional insurance coverage.

Retirement

\$2,437

Employees participate in a retirement program after meeting employment criteria. The City will match 13.91% of the employee's salary.

Other Fringe Benefits

\$65

The City provides employees incentives for language skills and unused personal leave.

**TRAVEL****\$7,401.00**

<b>Conference</b>	<b>Location</b>	<b>Dates</b>	<b>Lodging</b>	<b>Airfare</b>	<b>Per Diem</b>	<b>Taxi/Uber Mileage</b>	<b># of Staff</b>	<b>Amount</b>
NHSA Parent Conference	San Diego, CA	Dec- 24	\$1,746	\$246	\$296	\$30	1	\$2,318
National Training Institute on Effective Practices (Pyramid Model)	TBD	April 25	\$2,200	\$492	\$590	\$40	2	\$3,322
Region VI Meeting	TBD	TBD	\$928	\$388	\$414	\$31	2	\$1,761

Grant No: 06HP000255

**SUPPLIES**

**\$4,848.00**

Office Supplies - General

\$2,500

Other Commodities

\$2,348

**CONTRACTUAL**

**\$23,085.00**

**Fees to Professional Contractors**

<b>Consultant/Service</b>	<b>Amount</b>
Kaplan – E-Lap, web access and archive <i>Child assessment data system – ongoing support and archive of program data</i>	\$4,910
Teaching Strategies – Curriculum, Coaching to Fidelity <i>Training and technical assistance for ongoing curriculum and Coaching to Fidelity training and support.</i>	\$2,684
Teachstone – CLASS Support <i>To ensure Early Head Start has qualified CLASS observers and trainers DHS contracts with Teachstone. Includes observer training, recertification, professional development for certified observers, supplies and materials.</i>	\$3,000
Social/Emotional Support – Trauma-Informed Program Support <i>Training, coaching and consultation services To ensure EHS staff are trained to understand the impacts of trauma on children’s behavior, strengthen the establish foundation of the current tiered intervention system, provide staff with needed strategies when working with children and families experiencing trauma, and assist in building staff capacity. Include training for Peer Coaches, teachers, home visitors, City of San Antonio staff and training materials.</i>	\$9,000
Child Plus Training <i>Ongoing training, support and access to the Child Plus data system used for most program services.</i>	\$850
Other support services as identified by EHS-CCP staff <i>To ensure access to high quality training and support as identified through ongoing monitoring and/or other opportunities that are offered through the Office of Head Start and/or Region VI.</i>	\$2,641

Grant No: 06HP000255

<b>TOTAL</b>	<b>\$23,085</b>
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**OTHER** **\$7,580.00**

Education Classes: High quality training is necessary for the professional development of staff. DHS is committed to increasing the level of expertise for all staff to better serve the children and families in the program. The budget presents estimated costs based on historical cost.

<b>Conferences</b>	<b>Amount</b>
National Conferences	\$4,500
Local Conference fees for registration, webinars, trainers, etc.	\$1,080
<b>TOTAL</b>	<b>\$5,580</b>

**Binding & Printing** **\$2,000**

**TOTAL COST FOR T&TA** **\$64,800.00**

**4. Early Head Start - Child Care Partnership Budget Justification –Non-Federal Share**

**PERSONNEL** **\$64,413.00**

<b>Category Description Job Title</b>	<b># FTEs</b>	<b>Total Annual Salary</b>	<b>Non-Federal Share</b>
Human Services Director	.05	\$219,874	\$10,994
Education Program Director	.05	\$171,273	\$8,564
Time and Attendance Specialist	.05	\$43,952	\$2,198
Senior Management Analyst	.05	\$63,006	\$3,153
Special Projects Manager (Facilities)	.05	\$115,924	\$5,796
Department Fiscal Administrator	.05	\$109,355	\$5,468
Assistant to the Director	.05	\$150,194	\$7,510
Executive Secretary	.05	\$50,639	\$2,532
Public Relations Manager	.05	\$104,428	\$5,221
Contract Administrator	.05	\$114,530	\$5,727
Department Accounting Supervisor	.05	\$96,646	\$4,832
Management Analyst	.05	\$48,353	\$2,418
<b>TOTAL</b>			<b>\$64,413</b>

**FRINGE BENEFITS** **\$19,669.00**

Social Security (FICA) \$4,928

Grant No: 06HP000255

Health/Dental/Life Insurance \$5,781  
Health insurance is paid for full time employees working at least 40 hours per week. Employees may elect to pay for dental insurance, supplemental life insurance, and other additional insurance coverage.

Retirement \$8,960  
Employees participate in a retirement program after meeting employment criteria. The City will match 13.91% of the employee's salary.

Other Fringe Benefits \$0  
The City provides employees incentives for language skills and unused personal leave.

**CONTRACTUAL \$14,000.00**

Service	Amount
UIW Health Services	\$2,000
San Antonio Metro Health	\$12,000

**OTHER \$742,799.00**

Fair Market Value of Square Footage Utilized \$674,612

- *CBRE Office Space MarketView will be used to determine the FMV for the area the CCP is located. CBRE is a real estate and investment firm that does market research all over the world. They generate a report for the San Antonio Area quarterly, so the data used up to date.*
- *Bexar County Appraisal District review is to ensure that the FMV being assessed for use of the program does not exceed the appraised value. Since this is done by Bexar County.*

Service Providers	Fair Market of Sq Ft Utilized	Amount
Blessed Sacrament Academy CDC	13087 - \$18.96	\$248,130
Healy Murphy Center, Inc.	5,827 - \$22.01	\$128,252
Inman Christian Center	8,352 - \$26.02	\$217,319
Seton Home	4,103 - \$19.72	\$80,911

Brady Facility (Gas, Electricity, Water and Sewer) \$5,369

Family and Community In-Kind \$8,818

Grant No: 06HP000255

School Readiness Home Learning Activities In-Kind

\$54,000

**TOTAL COST FOR NON-FEDERAL SHARE**

**\$840,881.00**

*Note: Minor discrepancies due to rounding*

**Department of Human Services  
Early Head Start - Child Care Partnership Program  
Training and Technical Assistance Plan 2024-2025**

The City of San Antonio, Department of Human Services, Early Head Start-Child Care Partnership Program (heretofore, DHS EHS-CCP or EHS-CCP Program) contracts with nine direct service providers—six non-profit early education service providers, two health service providers and one mental wellness service provider—and collectively employs over 100 professionals (including floaters, part-time and substitutes) to provide high-quality infant and toddler program services to 216 children and families.

DHS EHS-CCP Program retains primary responsibility for providing ongoing training and technical assistance. Staff collaborates with each education service provider in the development of annual training plans to ensure needed trainings support the direct service staff in the delivery of high-quality services. This system ensures staff and families have access to ongoing training opportunities.

The 2024-2025 Training and Technical Assistance Plan (T&TA) reflects activities provided during the 2023-2024 program period for the EHS-CCP Program and planned training and development for the 2024-2025 program year. Through this application, DHS EHS-CCP Program is applying for \$64,800.00 training and technical assistance funds, for the awarded project period from August 1, 2024 – July 31, 2025.

**Section 1: Planning for Training**

On an annual basis, DHS EHS-CCP and each child-care service provider identify, prioritize, and develop a plan for training based on the needs of staff, parents, and children. The Early Head Start Program approaches ongoing professional development across the program as a



joint venture working closely with the child-care service provider.

Training plans that are developed annually meet or exceed the requirements of the Head Start Program Performance Standards (HSPPS), Head Start Act, Texas Child Care Regulations, and other regulations. Furthermore, CLASS data, child outcome data, family assessment information, Quality Assurance data, self-assessment data, Five-Year Strategic Planning goals, staff and parent surveys, training evaluation forms and Child Care Regulation compliance history are utilized to identify program-wide training needs.

## **Section 2: Professional Development & Training**

DHS EHS-CCP Program implements a comprehensive professional development plan that includes national and local conferences and workshops, orientation training, pre-service training, onsite training during the program year, and online trainings and webinars. Professional development opportunities will be presented in person and virtual, as needed, in the 2024-2025 program year. The professional development plan centers on the following five areas of focus and presented in detail in the tables below: Quality Teaching and Learning, Family & Community Engagement, Health & Safety, Program Leadership, and Wellness Support.

DHS EHS-CCP Program and each child-care service provider ensures that at the beginning of employment all new program staff receives orientation. Each agency currently provides an orientation to all new staff, which meets their organizational expectations and Child Care Regulation Standards. DHS EHS-CCP Early Education Service Mentors continue to improve sessions to be used at the child-care service providers' onboarding of new Early Head Start staff. Sessions focus on the goals and philosophy of Head Start, the mission and vision of the Early Head Start Program, Standards of Conduct, Disabilities and Wellness Services, Approach to School Readiness, the School Readiness Plan of Action, Head Start Early Learning Outcomes Framework,

and Parent Family and Community Engagement Framework.

In addition to the new staff orientation, the EHS-CCP Program, in collaboration with the child-care service providers, hold an annual pre-service event prior to the new program year beginning. To kick off the 2023-2024 program year, DHS EHS-CCP Program staff hosted a three-day pre-service event with over 100 child-care service provider staff attending. Topics included new program year expectations, Infant/Toddler CLASS data review, Active Supervision, wellness and self-care strategies and activities. In addition, a special session was presented in collaboration with the DHS EHS-CCP Quality Assurance and Early Education Services team to take the teachers through a data walk of education monitoring from the 2022-2023 program year. The presentation included monitoring data, pictures and discussion on areas needed for improvement and areas to celebrate. Rounding out the event, the Pyramid Model Consortium provided an overview and introduction to Trauma Informed Care as seen through the lens of the Teaching Pyramid. This was well received, and DHS EHS-CCP Program has a contractual agreement to continue the collaboration of infant/toddler training, as well as a robust training and technical assistance plan on the Pyramid Model practices.

DHS EHS-CCP Program staff and parents have opportunities throughout the program year to attend training events and conferences, including local, regional, and national conferences and workshops. The opportunity to attend additional conferences, workshops, and trainings arises throughout the program year based on identified program and/or individual needs.

DHS EHS-CCP Program and the child-care service providers offer various training opportunities throughout the program year using a variety of training methods and consultants, including online modules, webinars, scheduled trainings, on-site meetings, conferences, and events. Training delivery methods are designed to be flexible, and topics vary in order to meet

requirements and program-wide training needs. Topics and number of participants may vary based on identified program and/or individual needs and all topics fall within the five areas of focus.

The program has professional networks and services to assist staff in continuing their education goals including completion of additional coursework, obtaining a degree, or becoming credentialed. These professional educational opportunities are designed to build staff capacity and to meet the requirements of the Head Start Act, HSPPS, DHS EHS-CCP Program policies/procedures and furthering staff's education.

The program builds capacity within both the DHS EHS-CCP Program staff and child-care service providers. The program values staff pursuits of various training certifications to grow trainers and leaders within specific service areas. DHS EHS-CCP Program management staff currently holds certifications and trainer status in the following:

- Playground Safety
- Car Seat Proxy Technician and Technicians
- Infant CLASS-Reliability and Trainer status
- Toddler CLASS-Reliability and Trainer status
- Pre-K CLASS Reliability and Trainer status
- Family Service Credential and Trainer status
- NAEYC – Developmentally Appropriate Practices
- Program for Infant/Toddler – (PITC)
- Period of PURPLE Crying
- Child Care Health Consultant
- Mental Health First Aid
- Triple P Parenting Program
- Early Childhood Outdoor Learning Environments
- ASQ and ASQ-S/E Trainer status
- Infant Mental Health Endorsement Category II
- CPR/First Aid Trainer status
- Pyramid Model Trainer status
- Safety Compliance Awareness Trainer (S-CAT)
- Teaching Pyramid Infant-Toddler Observation Scale (TPITOS)

DHS EHS-CCP Program staff uses their knowledge, skills, and abilities to provide quality trainings and technical assistance to the child-care service providers and families to ensure the program builds knowledge and best practices.

DHS EHS-CCP Program plans to continue the use of the Infant and Toddler CLASS tools to measure teacher/child interaction to collect data and utilize as one data point in driving decisions for ongoing professional development. In-person CLASS observations were conducted in 55% of the classrooms during the fall of 2023. Moving into the 2024-2025 program year, DHS EHS-CCP Program plans to continue conducting classroom observations. DHS EHS-CCP Program CLASS Reliable staff continually test throughout the program year to maintain their reliability as applicable to their certification. Domain scores in both Infant and Toddler have increased over the last three program years. Increases in scores could be contributed to various factors such as the intentional work focused on trauma informed approach and practices, wellness/self-care promotion, Teaching Pyramid and the work supported through the DHS EHS-CCP Early Education Services (EES) Mentors direct work with the childcare service providers' Peer Coaches and their direct work with the teachers.

**Table 1. Infant CLASS Comparisons for the last three years**

Dimensions					Domain
Program Year	Relational Climate	Teacher Sensitivity	Facilitated Exploration	Early Language Support	Responsive Caregiving
2021-2022	5.19	5.19	5	5.19	5.14
2022-2023	5.79	5.88	5.25	5.13	5.51
2023-2024	5.93	5.86	5.21	5.79	5.7

**Table 2. Toddler CLASS Comparisons for the last three years**

Dimensions						Domain	Dimension			Domain
Program Year	Positive Climate	Negative Climate	Teacher Sensitivity	Regard for Child Perspective	Behavior Guidance	Emotional and Behavioral Support	Facilitation of Learning and Development	Quality of Feedback	Language Modeling	Engaged Support for Learning
2021-2022	5.73	1.27	5.34	4.82	5	5.52	3.93	3.11	3.75	3.6
2022-2023	5.88	1.08	5.55	5.13	5.12	5.72	3.97	3.28	3.78	3.68
2023-2024	6.03	1.06	5.59	5.29	5.12	5.79	4.15	3.32	4.03	3.83

The program continues the approach of six designated half-day professional development days held over the course of the program year to deliver high quality professional development. The education service providers close the centers at noon for all staff to attend specified four-hour trainings. Parents have been strongly supportive of the idea and plans are to continue the approach in the 2024-2025 program year. Table 3 indicates the six half-day professional development days and topics presented during the 2023-2024 DHS EHS-CCP Program year.

**Table 3. 2023-2024 Half-Day Professional Development Days**

Date	Topics
September 22, 2023	<ul style="list-style-type: none"> <li>CLASS Program Data</li> <li>Having Difficult Conversations with Parents</li> <li>Family Style Meals</li> <li>Toothbrushing</li> </ul>
October 20, 2023	<ul style="list-style-type: none"> <li>Development &amp; Inclusion in Infant and Toddler Classrooms – First 3 Years</li> <li>School Readiness</li> </ul>
November 10, 2023	<ul style="list-style-type: none"> <li>Linking Early Literacy and Social Emotional - Teaching Consortium</li> <li>Supporting Children and Families with Disabilities to Thrive – First 3 Years</li> </ul>
January 26, 2024	<ul style="list-style-type: none"> <li>Adult Wellness for Staff who Support Children - Teaching Consortium</li> </ul>

March 22, 2024	▪ Family Engagement and the Home-School Connection for Teachers - Teaching Consortium
May 17, 2024	▪ Co-Regulation – First 3 Years

DHS EHS-CCP Program prioritizes the health and well-being of all staff, children, and families by implementing a comprehensive ongoing trauma informed approach. The Program has provided professional development opportunities to all Early Head Start staff to introduce the trauma informed approach and build a foundation of knowledge on the impact trauma has on staff, children, and families.

An ongoing priority of the DHS EHS-CCP Program is the continued work focused on the implementation of The Pyramid Model, which is a positive behavioral intervention and support framework that uses system-thinking and implementation science to promote evidence-based practices. The Pyramid Model works to support social and emotional development in early childhood classrooms. The Pyramid Model Framework will provide the DHS EHS-CCP Program needed tools, strategies and supports to ensure the workforce is able to adopt and sustain evidence based practices and learn various strategies to reframe those behaviors that challenge us and see them as a means of communication. Working through a multi-year contract with the Teaching Consortium will provide the needed foundation, planning and implementation for the EHS-CCP Program. Trainings, consultations and train the trainer models are included in the very intentional plan. All the EHS-CCP Program staff and education service providers will have opportunities to engage at various levels of training.

DHS EHS-CCP Program EES team will provide support to Peer Coaches and education service provider staff to ensure strategies and practices that support each tier of the Pyramid Model

are being implemented. Family Support Workers and the Home Visitor will work to share recommended strategies to families as needed in a preventive approach and/or as a response to request. Each position with the DHS EHS-CCP Program will have the needed tools and resources available to share with families.

DHS EHS-CCP Program provides Family Service Credential (FCS) training for all family support service staff within eighteen months of hire. The Family Service Credential is a comprehensive, competency and credit-based training designed to support direct service family support staff in their work with children and families.

Additionally, Child Care Service Providers have had or currently have staff working on either their child development associate (CDA) or Associate's degrees through the T.E.A.C.H. program offered through the Texas Association for the Education of Young Children. T.E.A.C.H. is an evidence-based strategy that provides scholarships to assist with course tuition, books, CDA assessment fee, completion bonus and commitment from sponsoring licensed child-care centers to increase compensation for completion.

### **Section 3: Parent Leadership Programs and Training**

DHS EHS-CCP Program implements several parent programs and initiatives available throughout the program year to support parents and empower them to serve as not only leaders in their families but also in the community.

The EHS-CCP Program utilizes Ready Rosie as its research-based parenting curriculum. Ready Rosie builds on parents' knowledge and provides tools that are focused on equipping and engaging families and caregivers of children 0-6 years old. The curriculum includes a one-year subscription for the digital tool provided to all the EHS-CCP Program parents and staff through text, email, or smart phone app. Subscribers receive "Modeled Moments" of real families,

rather than actors, engaging in learning activities within the context of their own homes, grocery stores, restaurants, and cars. In addition to the digital tool, DHS EHS-CCP Program implements the Ready Rosie Family Workshops presented both in English and Spanish, which is dual collaboration between the EHS-CCP Program EES Mentors and the Family Support staff. This collaboration provided parents with the opportunity to discuss their child's development and identify strategies that can be implemented in the home environment to support parent-child interactions. Workshops are based on various topics aligned to the Parent, Family and Community Engagement Framework such as All About Me – supporting positive parent-child relationships, Keeping it Healthy and Family Literacy workshops support family well-being as other well as other topics. The six session workshop series for parents and caregivers addresses positive discipline strategies, healthy routines, language development, developmental milestones, fostering play and social emotional development. Three additional sessions were introduced in 2021-2022 program year bringing the total number of workshops from seven to ten. These additional sessions are focused on social emotional support and included: Fostering Listening Skills, Resiliency Raising Strong Children and Nurturing Resilient Children with Positive Expectations and Healthy Family Norms.

To prevent and reduce child abuse and neglect, DHS EHS-CCP Program collaborates with the City of San Antonio Metro Health Department on the implementation of Triple P, a parent training curriculum. Triple P is an evidence-based parenting curriculum that has been shown to reduce child maltreatment among families with a history of maltreatment or with risk factors for maltreatment. During the 2023-2024 program year, four discussion groups were held in the fall of 2023 and spring 2024 at two Early Head Start-Child Care Partnership child-care centers. Parents from across the DHS EHS-CCP Program were invited to participate. Discussion groups provided



parents with an overview of positive parenting principles related to four topics: Dealing with Disobedience, Managing Fighting and Aggression, Developing Good Bedtime Routines and Hassle-free Shopping with Children. In addition to each discussion group, parents were provided an opportunity to receive additional individualized support if requested.

#### **Section 4: Policy Council and Governing Body Training**

In accordance with Head Start Performance Standards and the Head Start Act, all Policy Council and Governing Body members receive Head Start orientation and ongoing training throughout the program year. Training topics include Effective Meetings, Council & Committee Structure, Parliamentary Procedures, Roles & Responsibilities, Refunding Application, Community Assessment, Strategic Planning, Self-Assessment, Governance Requirements, Budget Planning & Development, and Content Area Training. Additional training may be provided based on an identified need.

#### **Section 5: Effectiveness of Training and Technical Assistance**

Throughout the course of the program year, staff regularly evaluates the effectiveness of training and technical assistance provided and determines if additional follow-up or re-training is needed. Various evaluation tools, such as surveys, training evaluation forms and focus groups, review of the professional development plans, annual performance reviews, and results of ongoing monitoring are used to determine effectiveness of training and technical assistance. At the time of this application, DHS EHS-CCP Program staff are working to have deeper discussions on evaluation methods to determine the effectiveness of the delivered trainings and professional development. The program also uses the DHS EHS-CCP Program Five-Year Strategic Plan outcomes and the quarterly data reviews to inform the effectiveness of program-wide training and technical assistance.

DHS EHS-CCP Program is seeking a total of \$64,800.00 T&TA budget for the continuation of services from August 1, 2024 – July 31, 2025.

### **National/State Conferences & Workshop Opportunities**

#### **Quality Teaching and Learning**

<b>Date</b>	<b>Location</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
Various Dates	Dallas, TX	Region VI Meeting	Program Staff (2)
April 2025	TBD	National Training Institute (NTI) on Effective Practices (Pyramid Model)	Program Staff (2)
July 2025	TBD	Zero to Three Annual Conference	Program Staff (1)

#### **Family & Community Engagement**

<b>Date</b>	<b>Location</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
December 2024	San Diego, CA	NHSA Parent Conference and Family Engagement Institute	Program Staff and Policy Council Members (2)

#### **Health & Safety**

<b>Date</b>	<b>Location</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
Various Dates	Dallas, TX	Region VI Meeting	Program Staff (1)

#### **Program Leadership**

<b>Date</b>	<b>Location</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
Various Dates	Dallas, TX	Region VI Meeting	Program Staff (1)
September 2024	Washington, DC	NHSA Fall Leadership Institute	Program Staff (1)
June 2025	LA, CA	UCLA Head Start Management Fellows	Program Staff (1)

**Local Conferences & Workshop Opportunities****Quality Teaching and Learning**

<b>Date</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
October 2024	Texas AEYC State Conference	Program Staff (2)

**Family & Community Engagement**

<b>Date</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
April 2025	IDRA La Semana del Nino Parent Institute	Program Staff, Policy Council Members, and Parents (6)
May 2025	Women's Empowerment Conference	Program Staff, Policy Council Members, and Parents (8)
May 2025	Men's Empowerment Conference	Program Staff, Policy Council Members, and Parents (8)
November 2025	Family Engagement Symposium	Program Staff, Policy Council Members, and Parents (8)

**Health & Safety**

<b>Date</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
October 2024	Texas Health Literacy Conference	Program Staff (2)
October 2024	Healthier Texas Summit	Program Staff (1)
March 2025	Nutrition Summit	Program Staff, Policy Council Members, and Parents (10)

**Program Leadership**

<b>Date</b>	<b>Conference/Meeting</b>	<b>Attendees</b>
September 2024	Congress on Children	Program Staff and Policy Council Members, and Parents (2)
November 2024	Texans Care for Children Policy Conference	Program Staff (2)
March 2025	Diversity Conference	Program Staff and Policy Council Members (2)
April 2025	San Antonio Report Education Forum	Program Staff and Policy Council Members, and Parents (2)

May 2025	South Texas Trauma Informed Care Conference	Program Staff (2)
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**Wellness Support**

Date	Conference/Meeting	Attendees
August 2024	Pathways to Hope	Program Staff and Policy Council Members, and Parents (6)
October 2024	Ecumenical Center Mental Health Conference	Program Staff (2)
May 2025	South Texas Trauma Informed Care Conference	Program Staff (4)
July 2025	CLARITYCON	Family & Community Support Staff and Mental Health Staff (2)

**Onsite Trainings & Conference Opportunities****Quality Teaching and Learning**

Titles	
<ul style="list-style-type: none"> <li>• Safe Sleep Practices for Infants</li> <li>• E-LAP and Lap-3</li> <li>• Infant / Toddler CLASS</li> <li>• Teaching Pyramid Model</li> <li>• Disabilities/ECI – 101</li> <li>• School Readiness/HSELOF</li> <li>• PITC</li> </ul>	<ul style="list-style-type: none"> <li>• Individualization</li> <li>• Language &amp; Literacy</li> <li>• Practice Base Coaching &amp; Coaching Support</li> <li>• First Three Years</li> <li>• Trauma Informed Care</li> <li>• Reflective Supervision</li> <li>• Triple P Parenting</li> <li>• Pyramid Model</li> </ul>

**Family & Community Engagement**

Titles	
<ul style="list-style-type: none"> <li>• Triple P</li> <li>• Case Management Training</li> <li>• Community Resources</li> <li>• Effectively Using Family Outcome Data</li> <li>• Disability Resources &amp; Services</li> <li>• Ready Rosie and Parent Engagement</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• McKinney-Vento Training</li> <li>• Parent, Family, and Community Engagement</li> <li>• Poverty Training</li> <li>• Period of Purple Crying</li> <li>• Reflective Supervision</li> </ul>

**Health & Safety**

Titles	
<ul style="list-style-type: none"> <li>• Active Supervision for Infants and Toddlers</li> <li>• Car Seat Safety</li> <li>• CPR/First Aid</li> <li>• Child Abuse: Neglect &amp; Prevention</li> <li>• Active Supervision and Playground Safety</li> <li>• Triple P</li> <li>• </li> </ul>	<ul style="list-style-type: none"> <li>• Effectively Using Health Outcome Data</li> <li>• Health Services in the Early Head Start Program</li> <li>• Nutrition &amp; Early Childhood Education</li> <li>• Creating Safe Environments</li> <li>• Emergency Preparedness</li> </ul>

**Program Leadership**

Titles	
<ul style="list-style-type: none"> <li>• Child Plus &amp; Data Entry</li> <li>• Effectively Using Child &amp; Family Outcome Data</li> <li>• Reflective Supervision</li> </ul>	<ul style="list-style-type: none"> <li>• Governance in Head Start</li> <li>• Person First Leadership</li> <li>• Equity in Early Childhood Education</li> </ul>

**Wellness Support**

Titles	
<ul style="list-style-type: none"> <li>• Compassion Fatigue</li> <li>• Period of Purple Crying</li> <li>• Parenting Strategies that Work</li> <li>• Triple P</li> <li>• </li> </ul>	<ul style="list-style-type: none"> <li>• Stories that Haunt Us</li> <li>• Trauma Informed Care</li> <li>• Wellness Support for Staff</li> <li>• Reflective Supervision</li> </ul>

**Online Trainings &  
Webinars****Quality Teaching and Learning**

Providers	
<ul style="list-style-type: none"> <li>• Early Childhood Investigation</li> <li>• ELCKC</li> <li>• Office of Head Start</li> <li>• T&amp;TA Specialist</li> </ul>	<ul style="list-style-type: none"> <li>• Texas A&amp;M Agri-Life Extension</li> <li>• Texas Rising Star</li> <li>• First Three Years</li> <li>• Teaching Pyramid</li> </ul>

**Family & Community Engagement**

Providers	
<ul style="list-style-type: none"> <li>• Early Childhood Investigation</li> <li>• ECLKC</li> <li>• ESC Region XX</li> <li>• T&amp;TA Specialist</li> </ul>	<ul style="list-style-type: none"> <li>• Office of Head Start</li> <li>• First Three Years</li> <li>• Teaching Pyramid</li> </ul>

**Health & Safety**

Providers	
<ul style="list-style-type: none"> <li>• Child Safe</li> <li>• ECLKC</li> <li>• Safe Schools</li> <li>• Office of Head Start</li> </ul>	<ul style="list-style-type: none"> <li>• T&amp;TA Specialists</li> <li>• Texas A&amp;M Agri Life Extension</li> <li>• EMR Safety &amp; Health</li> </ul>

**Program Leadership**

Providers	
<ul style="list-style-type: none"> <li>• Early Childhood Investigation</li> <li>• ECLKC</li> <li>• Trauma Informed Care</li> </ul>	<ul style="list-style-type: none"> <li>• Office of Head Start</li> <li>• First Three Years</li> <li>• Teaching Pyramid</li> </ul>

**Wellness Support**

Providers	
<ul style="list-style-type: none"> <li>• Child Safe</li> <li>• ECLKC</li> <li>• First Three Years</li> </ul>	<ul style="list-style-type: none"> <li>• ESC Region XX</li> <li>• Office of Head Start</li> <li>• Teaching Pyramid</li> </ul>