

Approval of 2021-2022 Head Start Program Self-Assessment Report



City of San Antonio
Department of Human Services
Head Start Program

2021 - 2022
Self-Assessment Report



Executive Summary

In accordance with 1302.102(b)(2)(i) of the Head Start Program Performance Standards, the City of San Antonio, Department of Human Services (DHS), Head Start Division annually engages in a self-assessment process. This process ensures timely evaluation of program services and delivery systems for the purpose of implementing improvements and compliance with Head Start requirements.

During the self-assessment process, staff reviewed services provided to a funded enrollment of 3,364 children and their families in 21 Head Start, six Early Head Start-Child Care Partnership (EHS-CCP), and an Early Head Start (EHS) home based/ center based (here after, DHS Head Start) sites located in San Antonio Independent School District (SAISD) and Edgewood Independent School District (EISD). Self-assessment results, in conjunction with the Community Assessment Report and ongoing monitoring results, support quality program improvements for children and their families enrolled in the DHS Head Start programs as related directly to the Five-Year Strategic Plan, grantee policies, procedures, and management systems for the upcoming program year. During the 2021-2022 school year, the COVID pandemic continued to impact schools and child-care providers with a reduction in enrollment and participation in their services. Many program services and activities continued to be cancelled, postponed, suspended, or modified for the ongoing duration. These are discussed in the body of the report.

Process

For the 2021-2022 school year, DHS Head Start conducted a data-driven self-assessment process that included Quarterly Data Review Meetings and the continued implementation of the Self-Assessment System for Continuous Improvement and Evaluation (SASCIE) Rubric.

The Quarterly Data Review Meetings allowed DHS Head Start to use data from Head Start service areas, including, monitoring, program benchmarks, Program Information Reports (PIR), Five-Year Strategic Plan, monthly reports, and education assessments. Prior to each meeting, data was collected and analyzed. Next the data was presented at the 2021-2022 Quarterly Data Review Meetings in February, April, and October. Throughout the self-assessment process, participants included a diverse representation of parents, community members, and staff from organizations that either partner with DHS Head Start and/or work with similar populations. Program staff, community stakeholders, and members of the Head Start Policy Council participated in the meetings. At each Quarterly Data Review Meeting, data and objectives were presented and discussed with attendees. Staff reported program progress, concerns, and areas of success, program risks, as well as actions taken to ensure Head Start compliance and status of program goals, objectives, and benchmarks.

The Self-Assessment System for Continuous Improvement and Evaluation (SASCIE) tool provides a self-assessment of the program's compliance with Head Start regulations and progress in meeting program goals and objectives. The SASCIE rubric is an instrument designed to function as a roadmap for the continuous improvement of program services. Integrated teams used the SASCIE tool to review the quality of program services and identify areas of non-compliance, strengths, and areas of focus.

This report includes results for the following Head Start and EHS service areas: Program Design and Management (PDM), Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA), Education and Disabilities, Family Community Support and Mental Wellness, and Health, Nutrition, Transportation, and Safe Environments.

Results

The ensuing pages provide a description and a summary of the progress made towards the DHS Head Start Five Year Plan and strengths and areas of improvement identified during the self-assessment process.

Goal 1: Education

Prepare children for school and life

DHS Head Start has continued its focus on school readiness and the important role that parents and families play in ensuring children are ready for school. The overall approach to school readiness and early childhood services system values the integration of physical, cognitive, social, and emotional development as central to a child's ability to learn. DHS Head Start also works closely with our Education Service Providers, including six child care centers and two school districts, to ensure the Head Start Program Performance Standards are met and the program meets the disability enrollment requirement.

For the 2021-2022 program year, DHS Head Start met the 10% Disability Enrollment in November.

Based on the Five-Year Plan, ten objectives were measured and reviewed for DHS Head Start in this service area. Below are the results of the objectives related to Education at the end of the program year.

Objective 1: IN PROGRESS

Decrease the percentage of children enrolled in the EHS-CCP Program with chronic absenteeism by 18% from 46% in 2017-2018 to 28% in 2023-2024.

Chronic absenteeism is defined as a child missing 10% or more of days enrolled in the program. The program works to address the needs of children with chronic absenteeism and help remove barriers to attendance. During the 2021-2022 school year, 67% of the children enrolled in the EHS-CCP program were identified with chronic absenteeism. Quarantine and illness exclusion policies continue to affect the percentage of children with chronic absenteeism. Staff will continue to work with families to emphasize the importance of attendance, provide information on illness prevention and mitigation, and assist in eliminating barriers and when needed work with the parent to establish an attendance improvement plan. With these continued efforts, it is anticipated attendance will continue to strengthen.

Objective 2: IN PROGRESS

Decrease the percentage of children enrolled in the Head Start Program with chronic absenteeism by 5% from 24% in 2017-2018 to 19% in 2023-2024.

The Head Start Prekindergarten Program continues to make progress towards achieving the objective. During the 2021-2022 school year, 45% of Head Start children experienced chronic absenteeism. The on-going effect of CoVID restrictions and concerns continued to impact attendance.

Objective 3: IN PROGRESS

Increase the annual Infant Classroom Assessment Scoring System (CLASS) score by .5 from 4.84 in Responsive Caregiving in 2017-2018 to 5.34 2023-2024.

CLASS is a standardized, research-based tool that assesses the quality of teacher-child interactions in center-based classrooms that support children's learning and development. Each domain is scored on a scale of 1 to 7.

The Infant CLASS measure includes one domain: *Responsive Caregiving*. This domain captures the key interactions between caregivers and infants. The program continues to make progress towards achieving the objective. While CLASS observations were not conducted during the 2020-2021 program year due to the COVID-19 pandemic, observation resumed in 2021-2022 with 100% of the infant classrooms observed. The table below provides the Infant CLASS scores for the 2017-2018 through 2021-2022 program years. The score for *Responsive Caregiving* increased from the 2019-2020 program year. Staff continue to work with teachers to improve the quality of interactions in the classroom and increase scores.

City of San Antonio EHS Program CLASS Scores

Program Year	Responsive Caregiving Score
2017-2018	4.84
2018-2019	5
2019-2020	4.41
2020-2021	-
2021-2022	5.14

Objective 4: IN PROGRESS

Increase the annual Toddler Classroom Assessment Scoring System (CLASS) scores by .5 in each domain, from 5.37 in Emotional and Behavioral Support and 3.33 in Engaged Support for Learning in 2017-2018 to 5.87 in Emotional and Behavioral Support and 3.83 in Engaged Support for Learning by 2023-2024.

The Toddler CLASS measure includes two domains: *Emotional and Behavioral Support* and *Engaged Support for Learning*. The program continues to make progress towards achieving the objective. While CLASS Observations were not conducted during the 2019-2020 school year due to the COVID-19 pandemic, observations resumed in 2021-2022 with 100% of the toddler classrooms observed. The table below provides the Toddler CLASS scores for 2017-2018 through

the 2021-2022 school year. During the 2021-2022 program year, the score for *Emotional and Behavioral Support* and *Engaged Support for Learning* increased. Staff continue to work with teachers to improve the quality of interactions in the classroom and increase scores

City of San Antonio EHS Program CLASS Scores

Program Year	Emotional & Behavioral Support	Engaged Support for Learning
2017-2018	5.37	3.33
2018-2019	5.32	3.5
2019-2020	5.38	2.82
2020-2021	-	-
2021-2022	5.52	3.6

Objective 5: IN PROGRESS

Increase the annual Prekindergarten Classroom Assessment Scoring System (CLASS) scores by .5 points in each domain, from 5.65 in Emotional Support, 5.02 in Classroom Organization, and 2.99 in Instructional Support in 2016-2017 to 6.15 in Emotional Support, 5.52 in Classroom Organization, and 3.49 in Instructional Support by 2023-2024.

The Pre-K CLASS measure includes three domains: *Emotional Support*; *Classroom Organization*; and *Instructional Support*. The program continues to make progress towards achieving the objective. The table below provides the Pre-K CLASS scores for the past six school years. While CLASS Observations were not conducted during the 2019-2020 and 2020-2021 school year, the program conducted CLASS observations in 100% of the Head Start classrooms during the 2021-2022 school year. Staff continue to work with teachers to improve the quality of interactions in the classroom and increase scores through professional development, including intensive coaching.

City of San Antonio Head Start Prekindergarten Program CLASS Scores

Program Year	Emotional Support	Classroom Organization	Instructional Support
2016-2017	5.65	5.02	2.99
2017-2018	5.78	5.16	2.98
2018-2019	5.75	5.19	3.12
2019-2020	-	-	-
2020-2021	-	-	-
2021-2022	5.88	5.32	3.25

Objective 6: IN PROGRESS

Increase the percentage of children enrolled in the EHS-CCP 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.

The DHS Early Head Start Program utilizes the Early Learning Accomplishments Profile (E-LAP) for children birth – 35 months old. The E-LAP is a criterion referenced assessment and provides a systematic method for observing the skill development of children. The results of the E-LAP is used to generate a detailed picture of a child's developmental progress across various domains so that individualized, developmentally appropriate activities can be planned and implemented. Students are assessed three times a year, Beginning of the Year (BOY), Middle of the Year (MOY), and End of the Year (EOY).

The E- LAP contains a hierarchy of 414 developmental skills arranged in chronological order within six domains of development: Gross Motor, Fine Motor, Cognition, Language, Self-help, and Social-emotional. The program continues to make progress towards achieving the objective. The table below shows the children enrolled in the EHS-CCP that showed six months or more of developmental growth across all six domains on the E-LAP. The data set includes children that received a minimum of 180 calendar days of instruction between the BOY and EOY assessments. During the 2019-2020 school year, the EOY E-LAP assessment was not completed due to school closures related to COVID-19. During the 2021-2022 school 36% of the children enrolled in EHS-CCP show six months or more of developmental growth on the E-LAP. This marks a decrease from 2020-2021. However, the number of children who met the inclusion criteria was considerably lower during 2020-2021 and may be an outlier. Fidelity to the assessment continues to be an area of the focus for our EHS-CCP program.

Children enrolled in EHS-CCP with 6+months of developmental growth on the E-LAP

Program Year	Participants	E-LAP-3 Domains						% of Children with 6+ months of developmental growth in all six E-LAP Domains
		Gross Motor	Fine Motor	Cognitive	Language	Self-help	Social- emotional	
2017-2018	93	73%	67%	72%	80%	72%	67%	31%
2018-2019	98	72%	73%	69%	62%	64%	63%	17%
2019-2020	NA	NA	NA	NA	NA	NA	NA	NA
2020-2021	58	95%	92%	88%	82%	93%	100%	75%
2021-2022	113	74%	75%	76%	73%	65%	59%	36%

Objective 7: IN PROGRESS

Increase the percentage of children enrolled in the EHS-CCP 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.

The DHS Early Head Start Program utilizes the Learning Accomplishments Profile – 3rd Edition (LAP-3) for children 36 – 72 months old. The LAP-3 is a criterion-referenced assessment and provides a systematic method for observing the skill development of children. The results of the LAP-3 are used to generate a detailed picture of a child's developmental progress across various domains so that individualized, developmentally appropriate activities can be planned and implemented. Students are assessed three times a year: Beginning of the Year (BOY), Middle of the Year (MOY), and End of the Year (EOY).

The LAP-3 contains a hierarchy of 383 developmental skills arranged in chronological sequence in seven domains of development including Gross Motor, Fine Motor, Pre-Writing, Cognitive, Language, Self-Help, and Personal/Social.

The program continues to make progress towards achieving the objective. The table below shows the children enrolled in the EHS-CCP that showed six months or more of developmental growth across all seven domains on the LAP-3. The data set includes children that received a minimum of 180 calendar days of instruction between the BOY and EOY assessments. During the 2019-2020 school year, the EOY LAP-3 assessment was not completed due to school closures related to COVID-19. During the 2021-2022 program year, 64% of the children enrolled in EHS-CCP showed six months or more of developmental growth across all seven domains on the LAP-3.

Children enrolled in EHS-CCP with 6+months of developmental growth on the LAP-3

Program Year	Participants	LAP-3 Domains							% of Children with 6+ months of developmental growth in all seven LAP-3 Domains
		Gross Motor	Fine Motor	Pre-Writing	Cognitive	Language	Self-Help	Personal/ Social	
2017-2018	63	84%	100%	86%	83%	83%	78%	81%	41%
2018-2019	80	81%	84%	89%	93%	80%	86%	86%	49%
2019-2020	NA	NA	NA	NA	NA	NA	NA	NA	NA
2020-2021	54	96%	87%	85%	94%	87%	95%	96%	76%
2021-2022	96	91%	88%	91%	96%	89%	94%	100%	64%

Objective 8: BASELINE ESTABLISHED

Increase the percentage of children enrolled in the Head Start Program identified as PROFICIENT at EOY in Rapid Letter Naming, Rapid Vocabulary, Phonological Awareness, Letter/Sound Correspondence, Story Retell & Comprehension, and Book & Print Awareness on the CIRCLE Progress Monitoring System. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.

During the 2020-2021 school year, the Head Start Program began using the CIRCLE Progress Monitoring System Pre-K (CIRCLE), a standardized, criterion-referenced measure that relates well to established standardized tests and is sensitive to growth in a child's skills over time for children ages 3-5 years old. The results of CIRCLE are used to generate a detailed picture of each child's growth and development across 15 areas so that individualized, developmentally appropriate activities can be planned and implemented. The CIRCLE Progress Monitoring System provides a score for each area assessed. Children are described as PROFICIENT if they score at or above the cut point, or threshold, listed in accordance with their age, and indicates if

the child is on track and has a developed understanding of the measure. Children are described as NOT PROFICIENT if they score below the cut point, or threshold, listed in accordance with their age and indicates an underdeveloped understanding of the measure and a need for more skill development or intensive intervention. The table below provides percentage of children identified as PROFICIENT for assessment areas related to language and literacy development. Staff will continue to work with teachers on implementation of CIRCLE and using assessment results to plan individualized instruction to increase student outcomes.

Program Year	Participants	Rapid Letter Naming	Rapid Vocabulary	Phonological Awareness	Letter Sound Correspondence	Story Retell & Comprehension	Book & Print Awareness
2020-2021	1577	48%	66%	63%	48%	83%	68%
2021-2022	1975	68%	69%	70%	82%	83%	71%

Objective 9: IN PROGRESS

Increase the percentage of children transitioning to kindergarten enrolled in the Head Start Program identified as PROFICIENT at EOY in Rapid Letter Naming, Rapid Vocabulary, Phonological Awareness, and Mathematics on the CIRCLE Progress Monitoring System to 73% in 2023-2024.

The program continues to make progress towards achieving this objective. The table below shows the percentage of children transitioning to kindergarten identified as PROFICIENT in *Letter Naming, Rapid Vocabulary, Phonological Awareness, and Mathematics* on the CIRCLE Progress Monitoring System. There was an increase from the 2020-2021 to the 2021-2022 program year across all areas. Additionally, fidelity to the assessment and assessment protocols to ensure all children receive an assessment continue to be areas of focus for the program.

Program Year	Participants	Rapid Letter Naming	Rapid Vocabulary	Phonological Awareness	Math
2020-2021	1577	53%	59%	63%	74%
2021-2022	1975	66%	61%	72%	76%

Goal 2: Family Support

Promote the well-being of families to enable them to support their children's learning and development

Family and Community Support and Mental Health & Wellness services focus on promoting family well-being, building strong collaborations with parents and families, and creating community partnerships to maximize resources available to all DHS Head Start children and families.

Based on the Five-Year Plan, four objectives for DHS Head Start in this service area are measured and reviewed. Below are the results of each Family and Community Support objective at the end of the program year.

Objective 1: IN PROGRESS

Increase the percentage of parents/guardians who make progress towards completion of an identified Family Self-Sufficiency goal by the end of the program year by 9% from 71% in 2019-2020 to 80% in 2023-2024.

Family Self-Sufficiency (FSS) goals are those that help families make progress towards economic security. Some examples of FSS goals include, but are not limited to, Advanced Education, Full Time/Part Time Employment, Home Ownership, Money Management, Public Housing, and Immigration. The program continues to make progress towards achieving the objective. During the 2021-2022 program year, 71% of families who set FSS goals made progress towards achieving their goal.

Objective 2: IN PROGRESS

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.

Family Life Practice (FLP) goals encourage quality parent/child interactions that support school readiness. Examples of FLP goals include, but are not limited to, Family Routines, Attendance, Parent Child Activities, Parent Involvement, Reading at Home, and Volunteering. The program continues to meet this objective. During the 2021-2022 program year, 93% of families who set FLP goals in made progress towards achieving their goal.

Objective 3: BASELINE ESTABLISHED

Increase the percentage of program services received (such as emergency assistance, parenting education, asset building, or job training and education services) to promote family outcomes. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.

DHS Head Start continues to make progress towards meeting this objective. At the end of the program year, 97% of the families in the program received at least one support service. The average number of services received per family was 2.7. The program continues to network with other agencies within the community to provide resources and referrals to Head Start families.

Objective 4: IN PROGRESS

Increase the number of parents/guardians that participate in the Head Start Triple P Parenting Program by 66 from 4 in 2020-2021 to 70 in 2023-2024.

DHS Head Start continues to make progress towards meeting this objective. During the 2021-2022 program year, 39 parents/guardians participated in Triple P (Positive Parenting Program). Family Wellness Specialists expanded their expertise by completing training and accreditation in Triple P Level 2 Seminars, which offers the ability to facilitate the parenting curriculum in a group setting. This level targets a light touch of the program with three separate seminars offering key components of the curriculum. Parents/Guardians are offered higher level of interventions for isolated concerns that target a customizable parenting strategy to address them. The program continues to improve documentation and data entry to ensure that information related to goals set by families is accurate

Goal 3: Health

Children are healthy and ready to learn

Head Start Program services in the areas of health and nutrition are structured to ensure children are physically and mentally healthy in order to learn, are safe while in care, and that children and families receive educational supports to create life-long healthy habits. Head Start staff and service providers implemented targeted activities to help parents establish and model healthy lifestyle habits for their children and families.

Based on the Five Year Plan, five objectives were measured and reviewed for DHS Head Start in this service area. Below are the results of the objectives related to Health at the end of the program year.

Objective 1: BASELINE ESTABLISHED

Increase the percentage of children who are up-to-date on TX EPSDT requirements at the end of the program year. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.

At the end of the 2021-2022 school year, 76% of the children enrolled in the program were *up-to-date on the Texas Early and Periodic Screening, Diagnostic and Treatment (EPSDT) requirements*. The method the program uses for calculating the EPSDT requirements was revised and required a revision to this objective. Due to the COVID -19 pandemic, families continued to encounter barriers to making appointments for well child visits. The program continued to educate families on the importance of well child visits and childhood immunizations. The program offered 4 Head Start Round Up well child exam clinics and 5 COVID and influenza immunization clinics along with health resources and health insurance assistance. A noted highlight, EPSDT up-to-date status increased by 10% from previous school year. The program continues to examine the barriers for parents/guardians to obtain an up-to-date well child/physical exam.

Objective 2: IN PROGRESS

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.

DHS Head Start continues to make progress towards meeting this objective. DHS Head Start obtains or performs a hearing screening for each child enrolled in the program within 45 calendar days of entry. If a concern is noted, the child is either rescreened or referred to their medical home for further evaluation, testing, and/or treatment. Staff continue to follow up with parents/guardians each month, as appropriate, until a child receives evaluation, testing, or treatment. During the 2021-2022 school year, 38% of children identified with a hearing concern received services following a referral. The program continues to examine barriers to receiving services and research strategies to help address these barriers.

Objective 3: IN PROGRESS

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.

DHS Head Start continues to make progress towards meeting this objective. DHS Head Start obtains or performs a vision screening for each child enrolled in the program within 45 calendar days of entry. If a concern is noted, the child is either rescreened or referred to their medical home for further evaluation, testing, and/or treatment. Staff continue to follow up with parents/guardians each month, as appropriate, until a child receives evaluation, testing, or treatment. During the 2021-2022 school year, 39% of children identified with a vision concern received services following a referral. The program continues to examine barriers to receiving services and research strategies to help address these barriers.

Objective 4: EXCEEDED

Increase the percentage of children identified as Class 2 that are designated as Treatment Complete by the end of the program year by 13% from 32% in 2016-2017 to 45% in 2023-2024.

Tooth decay is the single most common chronic disease among children in the United States, and to ensure children are up to date on EPSDT requirements, the City of San Antonio Department of Human Services partners with the City of San Antonio Metropolitan Health District (Metro Health) Dental Division to provide onsite dental services. With parental consent, children enrolled in the program receive one dental evaluation and two fluoride varnishes during the program year. In addition, Metro Health provides a toothbrush, toothpaste and timer for all children, referrals for dental care, parent education sessions, information regarding local dental providers, and dental case management for children with identified oral decay. When a child is evaluated by Metro Health, they are assigned a dental classification. This classification determines the type of follow-up that is required. Any child identified as CLASS 2 requires follow up and treatment from their dental home. DHS Head Start exceeded this objective. At the end of the 2021-2022 school year, 63% of children identified as CLASS 2 were designated as *Treatment Complete* and received the appropriate follow-up and dental treatment. A noted highlighted, dental treatment complete status was up by 18% of the established benchmark. The program continues to examine barriers to receiving services and research strategies to help address these barriers.

Objective 5: BASELINE PENDING

Increase the average score on the Health Wellness Assessment. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.

The program collaborated with the University of the Incarnate Word School of Osteopathic Medicine and the Head Start Health Services Advisory Committee to develop a Wellness Assessment to identify behaviors of Head Start children related to obesity, nutrition, and physical activity. While the assessment was put on hold during the 2019-2020 and 2020-2021 program years, the tool was reintroduced during the 2021-2022 program year. At the end of the program year 66% of the parents/guardians that responded to the survey indicated that their child drank at least one sugary drink per day. Eighty-six percent reported that their child's teeth were in good or excellent condition, while 96% reported that they were not concerned about their child's weight. Sixty-eight percent reported that their child received a flu shot. The program continues to examine the data, implementation of the tool, and activities related to health and wellness.

Objective 6: BASELINE PENDING

Increase parent/guardian knowledge and understanding of wellness resources available to Early Head Start and Head Start families. The baseline will be established in 2021-2022 with a percentage increase determined in 2022-2023.

The Wellness Support Team provides support to children and families through a mental health consultation model. This consultation model ensures parents and staff receive education, intervention strategies and support in response to child and/or family wellness needs. To address individual needs of children, the Wellness Support Team may, in addition, provide a referral to a community agency when appropriate for direct mental health services.

During the 2021-2022 program year, staff consulted with the Health Services Advisory Committee and the Education Services Advisory Committee to develop survey questions for parents/children related to health and wellness. The results from the survey indicated that 11% of responding families reported that they were aware of Mental Health/Family Wellness services. The program will develop a plan to increase parent/guardian knowledge and understanding of wellness resources available to them.

Goal 4: Environmental Health and Safety

Support the care of children by creating safe environments

Head Start Program Services related to environmental health and safety are structured to ensure children are safe while in care. DHS Head Start staff and Education Service Providers implemented an array of targeted activities to ensure the health and safety of all children enrolled in the program.

Based on the Five-Year Plan, five objectives were measured and reviewed for DHS Head Start in this service area. Below are the results of the objectives related to Environmental Health and Safety.

Objective 1: EXCEEDED

Decrease the percentage of findings in the Head Start Prekindergarten Environmental Health and Safety Monitoring Reviews by 2% from 5.8 % in 2016-2017 to 3.8% in 2023-2024.

The DHS Head Start Program has a layered monitoring system. Program staff conducts three formal monitoring reviews of health and safety indicators across campuses. The Head Start Prekindergarten Program continues to exceed this objective. During the 2021-2022 school year the percentage of findings for the Environmental Health and Safety Monitoring Reviews was 1.35%.

Objective 2: IN PROGRESS

Decrease the percentage of findings in the EHS-CCP Environmental Health and Safety Monitoring Reviews by .5% from 3.1 % in 2017-2018 to 2.6% in 2023-2024.

The EHS-CCP Program also conducts formal monitoring reviews of health and safety indicators across all childcare centers. The EHS-CCP program continues to make progress towards this objective. During the 2021-2022 program year, the percentage of findings for the EHS-CCP Environmental Health and Safety Monitoring Reviews was 3.14%. During the next program year, the program will examine the percentage of findings for EHS-CCP Program and the Early Head Start Program. This data includes the EHS and EHS-CCP programs.

Objective 3: EXCEEDED

Decrease the number of findings in the Health and Human Services Commission Childcare Center Inspections by 50% from 38 in 2016-2017 to 19 in 2023-2024.

All EHS-CCP sites must report licensing concerns to the State of Texas Health and Human Services Commission Childcare Center Inspections who will determine if a finding is warranted. EHS-CCP continues to make progress towards meeting this objective. During the 2021-2022 program year, there were a total of 13 findings From Health and Human Services Commission Childcare Center inspections. for the EHS-CCP and EHS Program, exceeding the objective.

Objective 4: IN PROGRESS

All six EHS-CCP Education Service Providers will maintain a two-star rating or above from the Texas Rising Star System (State of Texas QRIS) as a measure of quality by 2023-2024.

Texas Rising Star (TRS) is the State of Texas Quality Rating Improvement System. Licensed childcare centers participating in the TRS program receive a Two-Star, Three-Star, or Four-Star rating based on certification criteria. TRS is a voluntary, quality-based childcare rating system for childcare providers participating in the Texas Workforce Commission's subsidized childcare program. At the end of the 2021-2022 program year, all six (6) EHS-CCP providers had a Four-Star rating. EHS-CCP staff continues to support centers as they work to maintain this objective.

Objective 5: IN PROGRESS

Increase the average score on the Early Childhood Environment Rating Scale (ECERS) for the Head Start Prekindergarten Program. The baseline will be established in 2022-2023 with a percentage increase determined in 2023-2024.

The Early Childhood Environment Rating Scale (ECERS) is a comprehensive assessment tool that measures environmental factors as well as teacher-child interactions that affect the broad developmental needs of young children. It also emphasizes the role of the teacher in creating an environment conducive to developmental gains. DHS Head Start continues to make progress towards achieving this objective. Due to priorities related to COVID-19, including classroom organization, availability of materials in the classroom, and social distancing recommendations, the program will suspend the planned use of the ECERS tool. Program staff have developed a proposal to implement ECERS in Spring 2023.

Goal 5: Highly Qualified Staff **Recruit and retain highly qualified staff**

The Program Design and Management (PDM) Team directly oversees systems and infrastructure which support the provision of direct program services through implementation of a strong shared governance system, effective management systems, and ongoing programmatic oversight. The PDM, Content/T&TA, and Monitoring teams provide direction, guidance, training and technical assistance to service providers to ensure staff at all levels of the organization have the resources, knowledge, and support needed to deliver high quality program services.

Based on the Five-Year Strategic Plan, five objectives were measured and reviewed for DHS Head Start in this service area. Below are the results of the objectives related to Highly Qualified Staff at the end of the program year.

Objective 1: IN PROGRESS

Reduce the average number of days to fill a vacancy with the City of San Antonio Head Start Program by 16 days from 62 days in 2016-2017 to 46 days in 2023-2024.

DHS Head Start continues to make progress towards achieving this objective. During the 2021-2021 program year, the average number of days to fill a vacancy was 56.5 days. DHS Head Start will continue to train staff on the hiring process and hiring database.

Objective 2: IN PROGRESS

Maintain an annual retention rate for Family Support Workers at 90% or higher through the year 2023-2024.

The program did not meet this objective for the 2021-2022 program year. The retention rate for Family Support Workers was 81.36%. The program continues to focus on retention, onboarding, and staff wellness.

Objective 3: IN PROGRESS

Increase the number of teaching staff that complete the Head Start Summer Institute from 23 participants in 2017-2018 to 48 participants by 2023-2024.

The Summer Institute is partnership with Texas A&M San Antonio. DHS Head Start provides teaching staff the opportunity to earn up to 18 hours of master level education over two summers. There have been a total of 45 participants in the program, and a total of 38 teaching staff have completed the summer institute. Our 22-23 Summer Institute Program began in Summer 2022, and 7 participants enrolled in the program. Six have continued with the program after the first Summer Session.

DHS Head Start continues to make progress towards achieving this objective. Teacher burnout and staff turnover are an area of focus for DHS Head Start and directly impacts the number of participants in the Head Start Summer Institute Program. To support retention of program participants, the program has been adjusted. While participants will take 18 hours of master level education, this will occur over four semesters. We are excited to have these participants.

Objective 4: IN PROGRESS

Increase the number of TEACH participants that earn a certificate or degree to 12 by 2024.

The TEACH scholarship program provides assistance for instructional assistants/paraprofessionals to earn a early childhood certificate, associate's degree or bachelor's degree. The program began in Fall 2019. As of the 2021-2022 school year a total of seven degrees have been awarded to participants, including four early childhood technical certificates, two associate's degrees and one bachelor's degree. DHS Head Start continues to examine the best way to promote the TEACH Scholarship Program and factors affecting retention.

Objective 5 BASELINE ESTABLISHED

Develop and implement a wellness plan to increase morale, engagement, and health and well-being for DHS Head Start staff by July 31, 2022.

The DHS Head Start Wellness Committee established a plan to increase *morale, engagement, and health and well-being* Based on the Staff Survey, 71% of staff reported that they Agree or Strongly Agree that their levels of stress are manageable and 47% of staff reported as true or mostly true that they felt their work life balance was good. The Wellness Committee will continue to explore ways to help increase morale, engagement, and health and well-being.

Areas of Improvement & Strengths

In addition, through the self-assessment process, the DHS Head Start Program identified strengths and areas of focus across both the Head Start and EHS-CCP programs in a number of key areas.

Areas for Improvement

- **Monitoring, Systems & Analysis**
 - **Goals & Areas of Concerns** – During the 2021-2022 program year, DHS Head Start did not regularly meet to review goals for program improvement. A schedule has been set for the 2022-2023 program year, and staff will share goals at the Education Advisory Committee and Health Services Advisory Committee.
 - **Quarterly Data Review** – DHS Head Start has an established system to share program data with parents and community members. Conflicting priorities, vacancies and turnover led to a delay in reporting results.
 - **Monitoring** – The Head Start Program will focus on ensuring that program data is reviewed and shared with staff and community partners on a regular schedule.
 - **Critical Incident Reporting** – The Head Start Education Service Providers did not submit Critical Incident Reports within 24 hours of occurrence as required by DHS Head Start Policy. The program will provide training to Education Service Provider staff.
- **Early Learning**
 - **Student Assessment** - The EOY results indicated relatively stable results in the percentage of children who were proficient in selected domains when compared to the previous year. The program will continue to focus on a system to ensure teachers are using assessments and screening information to plan individualized curriculum. Additionally, the EHS Program will continue to focus on a reliability plan and train EHS staff on running assessment reports.
 - **CLASS** – Although the Infant and Toddler CLASS scores did improve slightly in some domains and stayed the same in others, program staff continue to examine the coaching system and provide additional professional development opportunities for staff. The EHS Program will focus on ensuring peer coaches receive CLASS Training and begin to research an evidence-based observation tool for the home-based program
 - **CLASS** – The Head Start program continues to make progress towards increasing the quality of interactions in the classrooms, the internal CLASS Scores did not meet the most recent OHS CLASS Scores in Emotional Support or Classroom Organization.
 - **Support for Curriculum** – While the EHS Program has an established system for monitoring curriculum fidelity, the program is still working to develop an implementation plan for the home-based program. Additionally, while the Head Start Pre-K program have established tools for monitoring curriculum fidelity, the program is unable to provide evidence that all teachers receive training on curriculum fidelity.
 - **Screenings & Assessment** – DHS Head Start will continue to examine the process to ensure that screenings and assessments are conducted in the child's home language by a qualified staff person or in conjunction with an interpreter. In addition, will develop a system to identify teachers qualified to conduct an assessment in Spanish. Both the EHS and Head Start Pre-K program continue to work towards a system to establish teachers' assessment reliability and ensuring all eligible children receive an assessment.

- Support for Meeting All Children’s Needs – While the EHS Program has identified an approach to social/emotional learning and development, the program continues to work towards the development of a contract to ensure all staff receive training. In addition, while both programs have an established system to identify teachers and students that may be in need of wellness support services, due to staff turnover, the Head Start Program did not have a qualified staff member able to provide mental health consultations. Data entry related to behavior support services continues to be an area of focus for the Head Start Pre-K program.
 - Orientation – While the EHS Program provided orientation for new EHS staff, the program will continue to work towards the development of an orientation system for teachers that start during the program year.
 - Coaching – While both Education Service Providers have a research based coaching program, due to barriers related to COVID-19, the Head Start Program did not implement intensive coaching during the first semester. Additionally, the program will examine the best way to utilize the CLASS tool to inform the coaching.
- ERSEA
- Attendance - Due to the ongoing impact of COVID-19, attendance continues to be an area of concern. Head Start & EHS continue to promote the benefits of regular attendance to all enroll families. Staff will continue to follow up with families on attendance and addressing the needs and barriers to children not attending by providing resources to families. Attention is being given to how to best consider extended absences when quarantines are necessitated. The program will continue to how best to work with extended absences that are caused by the child needing to quarantine.
- Family and Community Engagement
- Family Partnership Processes – Head Start Assessments were not completed according to the benchmark due date.
 - Qualitative File Review – Head Start has not implemented a Qualitative File Review tool.
 - Monitoring - EHS hit 20% of findings indicating goals set did not receive consistent follow-up according to monitoring reviews.
 - Services - Unable to track if family received emergency services within 48 hours. Child Plus, the current data entry system, does not track the amount of time in which a service was received. Program staff continues to explore options.
 - Parent Interest Survey -EHS conducts a parent interest survey at the start of the program year, Head Start is investigating implementation of an interest survey.
- Child Health and Safety
- EPSDT – During the 2021-2022 Program year, more than 20% of the children in the EHS Program had a status of *No Dental Treatment Received* following a dental evaluation. While this may be related children that are unable to receive treatment due to an underlying health condition or low weight, the program continues to focus on assisting families to address oral health concerns. In addition, both the EHS and Head Start Pre-K program are working towards a system to ensure the percentage of children that are up-to-date on EPSDT requirements continues to increase from the start of the program year.
 - Special Diets & Critical Health Concerns –The DHS Head Start Program staff did not consistently conduct follow up with families with concerns related to unconfirmed special diets and critical health concerns according to policies and procedures. The

program will provide additional training and guidance related to data entry and program requirements.

- **Program Governance, Communication & Human Resources Internal Communication - COSA Staff**
 - **Structure and Composition** – During the 2021-2022, Community Representatives did not attend 50% or more of the Policy Council meetings. The DHS Head Start Program will examine policies related to composition of the Policy Council to ensure greater engagement by community members.
 - **Engagement** – Due to a lack of quorum, the Community Action Agency Board meetings had to be rescheduled on multiple occasions. The program will meet with the Department of Human Services to develop strategies to increase attendance.
 - **Communication** – Due to staff turnover, monthly coordinator meetings were not scheduled and team liaisons did not attend meetings. Additionally, due to conflicting priorities and barriers related to COVID-19, the program was unable to provide annual principal training. The DHS Head Start Program was unable to share the Annual Report with stakeholders due to staff turnover, delay in translation, and conflicting priorities for the graphic design team.
 - **Human Resources** – The DHS Head Start Program was unable to access turnover and retention data from Human Resources. This resulted in a delay in reporting to community stakeholders and staff.
 - **Professional Development** – The DHS Head Start Program continues to develop a system to community the availability of ongoing training available to COSA Staff and ensure that staff complete required trainings within the established deadlines.
 - **Performance Management** - Disciplinary actions and investigations were not documented according to the City of San Antonio Human Resources Policies and Procedures. DHS Head Start will provide training to supervisors to ensure staff understand the system of communication and documentation.

Strengths

- **Monitoring, Systems & Analysis**
 - **Data Review and Program Goals** – The program has a system to identify goals for the program. The DHS Head Start Program is data informed and has an ongoing system to review data at the classroom, campus, district, and program level across all content areas.
 - **Self-Assessment** – Although delays related to staffing and COVID-19, the program successfully implements a self-assessment system to identify areas of focus and strengths for the programs.
 - **Student Outcome Data** – DHS Head Start has a system to collect and aggregate Child Outcome Data three times a year. The data is reported at the classroom, campus, district, and program level.
 - **Monthly Data Review** – DHS Head Start compiles and distributes monthly program data reports. Despite hardships related to COVID-19, the program continued to provide the monthly data reports with a focus on family and student outcome.
 - **Critical Incident Reporting** – DHS Head Start has a system of reporting and follow up for Critical Incidents. Staff continue to monitor trends and ensure incidents are reported in a timely manner. Staff meeting at minimum, six times a year to review incident reports.
 - **Monitoring Findings** – The EHS Program has a system to ensure all non-compliances are abated/corrected by the due date.

- Child Care Licensing – EHS Education Service Providers have a tracking system in place to ensure all CCR renewals are completed on time. The EHS Program did not have any licensing violations/non-compliances that impacted the continued daily operation of the center
- Early Learning
 - School Readiness Goals – The School Readiness Goals are reviewed annually by the Policy Council and Governing Body and shared with families in Head Start Parent Handbook. Over 50% of all children in Head Start Pre-K Program are ON TARGET in Rapid Letter Naming, Rapid Vocabulary, Phonological Awareness Composite, and Math Composite on the CIRCLE assessment at EOY. In addition, over 60% of the children in EHS show at least 6 months of growth from BOY to EOY on the LAP-3 assessment.
 - CLASS – During the 2021-2022 program year, all EHS and Head Start Pre-K classrooms were observed using the CLASS Tool. The EHS Program provided introductory CLASS training to all staff and peer coaches. In addition, the DHS Head Start Program has two certified CLASS Trainers for Infant, Toddler, and Prek CLASS Tool.
 - Support for Curriculum Fidelity - The EHS Program continues to implement a system for monitoring the completion of the Teaching Strategies Fidelity Tool twice a year. The EHS Program continues to provide ongoing training and coaching for Center Peer Coaches and/or designee. DHS Head Start Program has a system to monitor individualized learning plans for students. The Head Start Pre-K program was 100% compliant on all monitoring reports related to individualized learning plans.
 - Support for Meeting all Children's Needs– DHS Head Start Program teachers continue to work to meet the needs of children in the classroom. The Program has a system to ensure that staff regularly use screening results, along with other appropriate information to determine a child's strengths and needs and inform their teaching practices for individualized learning. The program found less than 10% of findings related to disability services
 - Wellness Support Services – The EHS Program Identified the Pyramid Model for social emotional learning development and expanded wellness support team for EHS based on needs of the program. The Education Service Providers have a system to ensure that behavior expectations are written and discussed positively as evident in center postings, classroom rules and communications. While documentation continues to be an area of focus, the Head Start Pre-K Program has a system to document consultations conducted by Behavior Specialist
 - Professional Development and Coaching – The DHS Head Start Program continues to provide high quality professional development opportunities for teachers and staff. The EHS Program provides the Together, Learning and Collaborating (TLC) coaching program and the Head Start Pre-K Program provides a practice-based coaching system.
- ERSEA –

- Enrollment, Eligibility and Selection – The Head Start Program was able to attain 10% enrollment of children with a disability. Also, applications continued to be processed within 60 days. Head Start Supervisors and ISD ERSEA Team complete 2nd verification. Waitlist were at a minimum of 5%.
- Recruitment - Recruitment was conducted by a marketing firm increasing our website and social media participation significantly; A team of four ARPA recruiters conducted community outreach and attended various community events which significantly increased referrals and applications.
- Family and Community Engagement
 - Newly hired Family Support Workers receive their Family Service Credential certification within 18 months of hire.
 - Changes made to the ChildPlus data entry systems allowed for tracking of existing family goals made through other agencies to avoid duplication of services.
 - Head Start and EHS FSWs are trained annually. Training may include ERSEA refresher, updates to F&C Support Services including assessments and goal setting and Program Governance
 - 97% of families enrolled in the Head Start and EHS programs received at least one or more services
 - All FSWs are trained in mental health first aid upon hiring
- Child Health and Safety
 - EPSDT - DHS Head Start requires that all children have a copy of their most physical exam/well child exam within 90 days of entry into the program. During the 2021-2022 program year, more than 95% of children had a physical exam/well child exam within 90 days of date of entry. At the end of the program year, 76% of the children enrolled in the program were up-to-date on EPSDT.
 - Medical and Dental Home – While the program continues to provide support to children and families without coverage, over 95% of the children in the program had an established medical and dental home.
- Health & Wellness – The DHS Head Start Program continues to focus on follow up, both EHS and the Head Start Pre-K Programs have a system to ensure that all children receive a nutrition assessment and child health history during the enrollment process. The Monitoring team identified less than 10% findings related to special diets in the Early Head Start Program and zero findings in the Head Start Pre-K Program. Program Governance, Communication & Human Resources
 - Program Governance – Despite barriers related to COVID-19, the Governing Board and Policy Council received an annual orientation that includes review of members' roles and responsibilities as governing members. Additionally, the Policy Council met quorum each month. Additionally, Policy Council members were invited to participate in community events and interviews.
 - Communication - The DHS Head Start Program continued to implement a calendar for bi-monthly staff meetings. In addition, the Leadership Team met regularly for planning and discussion of events and activities. The program distributed a survey to all COSA staff and found 70% of staff reported that they felt valued at work and 78% stated that they felt supported at work.

- Human Resources – The DHS Head Start made improvements to the New Employee Orientation Onboarding Program and received an over 90% favorable rating on the New Employee Onboarding Survey.
- Professional Development - All required annual trainings are completed with less than 20% of staff missing the established deadlines.

Summary of Report

Overall, DHS Head Start continues to utilize program data to guide and inform the decision-making process. The program is compliant with the Head Start Program Performance Standards and continues to strive towards high quality through continuous improvement. While the program endeavors to meet or exceed the Five-Year Strategic Plan objectives, there is still room for improvement. The identified strengths and areas of improvement will assist the program in reevaluating goals and measures for the next Five-Year Strategic Plan. The Self-Assessment process will continue to be used for ongoing assessment of all program services to promote compliance with Head Start Program Performance Standards and to ensure the needs of DHS Head Start children and families are met.