

ChildCareGroup Early Head Start and Head Start Annual Report

2018-19

Early Head Start Dallas (06CH10663) Early Head Start Mesquite (06CH7151) Early Head Start/Child Care Partnership (HP0007) Head Start (delegate agency of Head Start of Greater Dallas)



Program Description

ChildCareGroup began in 1901 as the first Settlement House in Texas. Our first location, known as The Neighborhood House near the corner of present-day Cedar Springs and McKinney Avenue in Dallas, was established with a single purpose – to educate and care for the children of women who worked in Dallas' cotton industry. Over the years we have expanded our programming and have adopted the more holistic service model we still practice today; however, one things has remained constant: our profound commitment to helping families raise intellectually, emotionally and physically healthy young children. This history of caring remains at the heart of ChildCareGroup's mission today.

ChildCareGroup works to end the cycle of intergenerational poverty through the research-based Two-Generation Approach, linking our high-quality early childhood education programs with other core programs/services that help families increase self-sufficiency. As 'early adopters' of the 2Gen model in Dallas County, we constantly work to refine this model to best meet the needs of our clients.



Enrollment

ChildCareGroup served a total of 940 children in Early Head Start and Head Start classrooms around Dallas County in partnership with a number of community agencies, Dallas Independent School District and Head Start of Greater Dallas.

The ChildCareGroup Early Head Start program served a total of 258 children in Dallas, 99 children in Mesquite, and 142 children in the Child Care Partnership. An additional 441 children were served in the Head Start program.

Programs achieved full enrollment through the school year and Early Head Start centers had a waiting list.

Almost 29% of children ages 0-5 in Dallas County live in poverty. Approximately 2,380,091 children are under 5 years of age, so we can assume that over 690,000 children are eligible for Head Start and Early Head Start programs. ChildCareGroup serves approximately .14 percent of those children. Full enrollment was maintained during the 2017-18 program year.

Each participant was determined to be eligible based on criteria established by the federal Office of Head Start. Data related to children's eligibility was as follows:

Type of Eligibility	EHS	EHS	EHS/CC	Head
	Dallas	Mesquite	Partnership	Start
Income below 100% of poverty line	213	105	111	404
Recipient of public assistance (TANF, SSI, etc.)	15	4	8	26
Status as foster child	4	0	2	7
Status as homeless	7	2	3	15
Over income	2	0	1	14



Characteristics of Children and Families

<u>Language</u>

For all ChildCareGroup programs, 75% of families identified English as their primary language, while another 23% identified Spanish as their primary language. Many of our families are bi-lingual and proficient in both English and Spanish. The highest percentage of Spanish speakers is in our home-based program in Mesquite.

In Dallas, 69% of the families identified themselves as monolingual English speakers, and 31% identified themselves as predominantly Spanish speakers.

In Mesquite, 25% of the families identified themselves as monolingual English speakers, and 75% identified themselves as predominantly Spanish speakers.

In Partnership classrooms, 91% of the families identified themselves as monolingual English speakers, and 9% identified themselves as predominantly Spanish speakers.

In the Head Start program, 88% of the families identified themselves as monolingual English speakers, and 10% identified themselves as predominantly Spanish speakers.

Ethnicity and Race

The race and ethnicity of children enrolled in Early Head Start and Head Start is as follows:

Race and Ethnicity	African American	Hispanic	White	Other
TOTAL in All Programs	51%	46%	1%	1%
EHS Dallas	49%	48%	0%	1%
EHS Mesquite	13%	85%	1%	0%
EHS Partnerships	64%	27%	6%	2%
Head Start	57%	40%	1%	1%

Early Head Start Dallas

Health Services, Dental Services

Head Start and Early Head Start must provide high quality health and dental health services that are developmentally, culturally and linguistically appropriate. Within 30 days after the child enters the program or receives the first home visit, staff must work with the families to determine whether each child has an ongoing source of continuous, accessible care provided by a health care professional who maintains the child's ongoing health record. If a child does not have a source for ongoing care and health insurance coverage is lacking, the program must assist families in finding a source of care and health insurance that will meet the required criteria as soon as possible. The table below shows information about the availability of insurance for the children.

Early Head Start Dallas

Health Information	Number of children at End of Year
Children with health insurance	230
Children with ongoing source of health care	227
Children up to date with preventive and primary care	113
Children up to date with immunizations	142

Early Head Start Mesquite

Health Information	End of Year
Children with health insurance	101
Children with ongoing source of health care	103
Children up to date with preventive and primary care	63
Children up to date with immunizations	55

Early Head Start/Child Care Partnership

Health Information	End of Year
Children with health insurance	130
Children with ongoing source of health care	132
Children up to date with preventive and primary care	30
Children up to date with immunizations	83

Head Start

Health Information	End of Year
Children with health insurance	466
Children with ongoing source of health care	455
Children up to date with preventive and primary care	89
Children up to date with immunizations	283

Early Head Start and Head Start children received assistance for health conditions as indicated below:

Health	EHS Dallas	EHS Mesquite	EHS CC	Head Start	TOTAL
Condition			Partnership		
Anemia	3	8	0	5	16
Asthma	0	0	0	34	34
Hearing Difficulties	0	0	0	8	8
Vision Problems	3	1	0	41	45
High Lead Levels	2	0	0	1	3
Diabetes	0	0	0	0	0

Childhood obesity continues to be a national program and the Office of Head Start monitors children's body mass index as a way to provide assistance and guidance to parents of children who are considered overweight or obese. During the 2018-19 program year, 8% of enrolled Head Start children were considered to be overweight or obese as indicated by their BMI. This is below the state statistic of 14.9% of 2-4 year olds with obesity. Infants and toddlers are not evaluated for obesity.



DENTAL SERVICES

Children in Early Head Start and Head Start often have significant needs for dental services. ChildCareGroup partners with the Colgate Dental Van to provide dental checks for all Head Start children. Health staff work with families to connect them with an appropriate dentist for regular follow up care.

Mental Health Services and Services for Children with Disabilities

MENTAL HEALTH SERVICES

The social/emotional development of infants, toddlers, and preschoolers is a critical component of school readiness. ChildCareGroup supports the mental health of children and families in a variety of ways –

- Curriculum:
 - The research-based Frog Street curriculum used in all center classrooms embeds the Conscious Discipline philosophy and methodology in each week's planning. This includes leading children in mindfulness activities focusing on improving self-regulation and peer to peer activities that encourage empathy.
 - Second Step, a social/emotional curriculum, is used weekly in all Head Start classrooms.
- Professional Development:
 - Each year teachers participate in trainings to learn more about the social/emotional challenges that children in poverty face and strategies to mitigate the toxic stress that many of our children experience.
- Mental Health Services:
 - ChildCareGroup employs a mental health professional to assist children and staff by identifying challenging behavioral situations, assisting teachers with helpful classroom strategies and referring children and families for therapeutic services as needed.

CHILDREN WITH DISABILITIES

Early Head Start and Head Start children with disabilities participated in an inclusive educational environment with their peers because of the partnership between Early/Head Start and the local Part C provider as well as partnerships with private service providers.

Program	EHS Dallas	EHS Mesquite	EHS/CC Partnership	Head Start	TOTAL
Children with Disabilities	8	14	6	40	76



Results of Monitoring Visits

ChildCareGroup did not receive a monitoring visit during the 2017-18 program year

Financial Reports

	A	В	С	D	Ε	F	G	Н	I	J	K	L	М	Ν	0	P	Q	R
1	I	Π						Ι										
2	STATED IN 000's		HEAD	START		EHS-D	ALLAS		EHS-ME	SQUITE		EHS-PAR	NERSHIP		то	TAL		
3			2018	2019		2018	2019	Τ	2018	2019		2018	2019	Π	2018	2019		
4			Actual	Budget		Actual	Budget		Actual	Budget		Actual	Budget		Actual	Budget	These fin	ancials are
5																	stated on	a calendar
6	Federal Funding	Π	2,979	3,234	Г	2,519	2,676	Т	943	1,021		1,508	1,530	Π	7,949	8,462	year basis	while each
7	Private Funding	Π	714	533		617	473		2	4		77	193		1,409	1,204	progra	m has a
8	In-Kind Contributions		628	404		200	257		14	-		237	223		1,078	883	different fiscal year. In-	
9	Total Revenue		\$ 4,321	\$ 4,171		\$ 3,335	\$ 3,406		\$ 958	\$ 1,026		\$ 1,822	\$ 1,946		\$10,436	\$10,548	kind is	stated in
10	Salaries & Wages		2,177	2,148		1,744	1,698		545	625		355	356		4,821	4,827	accorda	nce with
11	Employee Benefits & Taxes		468	587		456	597		117	152		74	101		1,114	1,437	Generally	Accepted
12	Occupancy	Π	367	322		174	129		68	80		17	13		626	544	Accounting	g Principles
13	Other Cash Operating Expenses		687	711		762	725		223	169		1,226	1,252		2,898	2,857	and therefo	ore excludes
14	In-kind Expneses	Π	628	404		200	257	T	14	-		237	223		1,078	883	cettain	types of
15	Depreciation & Amortization		5	9		-	-		-	-		-	-		5	9	volunteer l	nours which
16	Total Expenses		\$ 4,333	\$ 4,180		\$ 3,335	\$ 3,406		\$ 966	\$ 1,026		\$ 1,909	\$ 1,946		\$10,543	\$10,557	qualify as	match for
17	Surplus/(Deficit)	Π	\$ (12)	\$ (9)		\$ 0	\$ (0)		\$ (7)	\$ -		\$ (87)	\$ (0)		\$ (107)	\$ (9)	these p	rograms.

Efforts to Prepare Students for Kindergarten, Documentation of Children's Progress

School Readiness

ChildCareGroup believes that school readiness begins in the context of consistent, nurturing relationships. From an infant's entry into the Early Head Start program, teachers work to create strong social/emotional supports for children by responding to their needs, talking to them, and working with parents to education and engage them.

As children grow, they experience an Early Head Start classroom with a print-rich environment and activities planned to increase experiences with language, cognition, and physical growth. Self-help skills are taught and encouraged as children become more independent.

Children in the home-based program benefit from weekly visits from trained parent educators who work with parents to plan school readiness experiences throughout their child's daily activities.

Head Start classrooms focus further on school readiness as children experience both teacher-led and child-led activities. Emphasis on language and literacy, cognitive development, pre-writing skills, social/emotional development and physical growth exists in each classroom.



Curriculum

CCG currently uses Frog Street curriculum in Early Head Start and Head Start classrooms. Created by Dr. Pam Schiller, the curriculum incorporates Dr. Becky Bailey's Conscious Discipline[®] and includes 52 weeks of activity choices specifically created for children ages 6 weeks –age 5. Activity choices are organized around the five developmental domains used by the Head Start Early Learning Outcomes Framework and offer differentiated instruction options to meet the needs of all learners. Teachers are able to easily incorporate activities into daily routines as well as share activities with parents to extend the learning day into the home. Head Start curriculum aligns with the Texas PreK curricular guidelines as well.

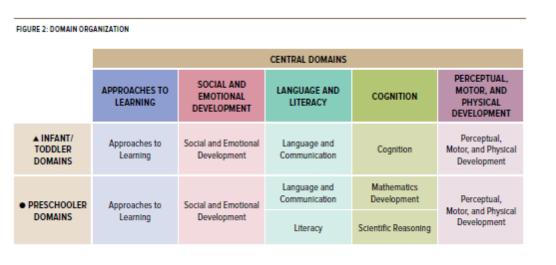
In the home-based program, ChildCareGroup uses the research-based Parents As Teachers (PAT) model. Weekly visits area conducted by trained parent educators who integrate all Head Start learning domains into their family activity plans. Child progress is measured at each visit and activity plans are individualized on a weekly basis.



Head Start Early Learning Outcomes Framework

ChildCareGroup utilizes the Office of Head Start Early Learning Outcomes Framework to guide

all education strategies.



Head Start Early Learning Outcomes Framework: Ages Birth to Five 1 7

Professional Development/Qualifications of Teacher/SRI

ChildCareGroup teachers have a minimum of a CDA and many hold AA degrees. The agency implements Practice-Based Coaching in all classrooms by using Education Specialists and Master Teachers for peer to peer evaluation and learning.

ChildCareGroup Head Start classrooms at the Landauer, Martin Luther King, and Bock locations participate in the SRI (School Readiness Initiative) partnership with Dallas Independent School District (DISD). Children are dually enrolled in ChildCareGroup's Head Start program and DISD preK and receive instruction from both a ChildCareGroup teacher and a DISD certified teacher. Teachers collaborate with lesson planning and instructional time to prepare children for a seamless transition to a preK or kindergarten classroom.

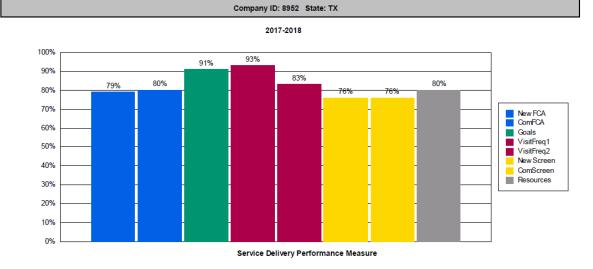
Home-Based Program

The chart below illustrates the performance measures report for the essential requirements of the Parents As Teachers (PAT) model used by ChildCareGroup parent educators. Twenty-eight percent of the children enrolled in the PAT Born Learning Program are also Early Head Start children.

Performance Measures Report for Service Delivery Essential Requirements

The chart below depicts your affiliate's performance on the service delivery essential requirements, based on your affiliate's APR data. This chart assists you in understanding your affiliate's level of fidelity and in planning related continuous quality improvement efforts. This information also helps you understand how your affiliate's performance compares to the 60% national minimum level.

Child Care Group/Parents as Teachers



NewFCA % of newly enrolled families (enrolled 90 days or more) that had an initial family-centered assessment completed within 90 days of enrollment ComFCA % of families that had a family-centered assessment completed and documented during the program year

Goals % of families with at least 1 documented goal during the program year

VisitFreq1 % of families with 1 or fewer high need characteristics that received at least 75% of the required number of visits per month

VisitFreq2 % of families with 2 or more high need characteristics that received at least 75% of the required number of visits per month

New Screen % of newly enrolled children who received a complete, initial screening in the required time frame (within 90 days of enrollment, or by 7 months of age if enrolled prior to 4 months of age).

Ann Screen % of children that received a complete screening during the program year and were enrolled

Resources % of families connected by their PE to at least 1 community resource during the program year

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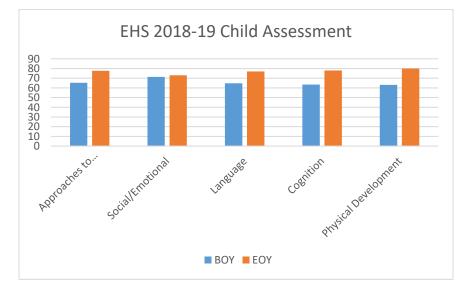
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Child Assessment Results

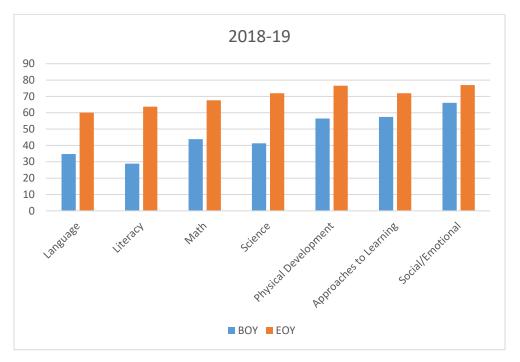
ChildCareGroup uses the LAP (Learning Accomplishment Profile) tool to assess center-based children three times each year.



Infant/Toddler ELAP results for 2018-19



Preschool LAP-3 results for 2018-19



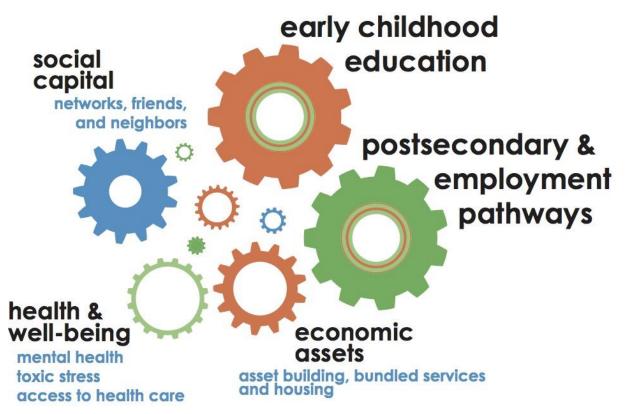
LAP assessment results are used in a variety of ways:

- Teachers use LAP data to individualize learning for each child and share child progress with parents. In addition, information is shared with the CCG inclusion staff for referral if a child is performing below national norms in any domain.
- Education Specialists/Managers use LAP data to determine teacher training needs, classroom materials, curriculum and support needs, and center strengths and challenges.
- The Director of Center-Based Programs uses LAP data to determine Early Childhood Program training needs and curriculum and material strengths and challenges.
- The VP of Early Childhood Programs and the Director of Quality Assurance use LAP data to determine areas of emphasis for Early Childhood Programs and to measure and report on program progress and quality.

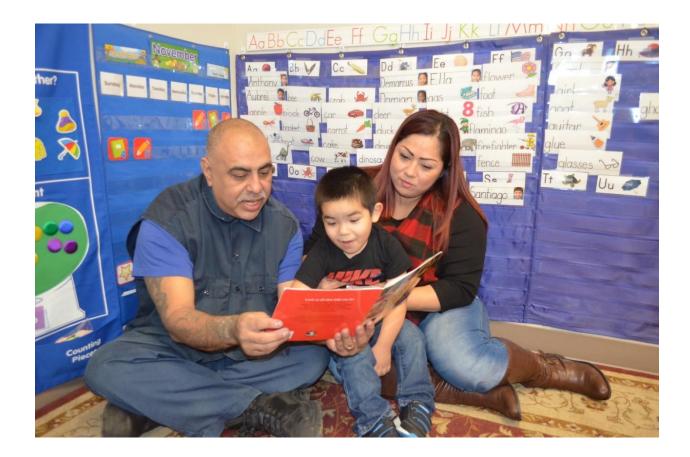
Parent, Family and Community Engagement

ChildCareGroup offers a robust parent and family engagement model using a two-generation approach.

In 2016, as part of our strategic plan, ChildCareGroup adopted an intentional focus on serving children and parents together. By providing children with quality, evidence-based early education programs, we prepare them for success in school and life. At the same time, we know children can't lift themselves out of poverty. Our programs also give parents the support and tools necessary so they can more toward greater self-sufficiency. Our efforts are based on the five components of the Aspen Institute's Ascend Network's Two-Generation Model.



ChildCareGroup utilizes over 40 partnerships with community agencies to provide services and referrals to parents and families.

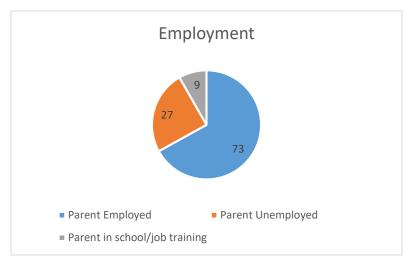


Characteristics of Families

ChildCareGroup children are most often being raise in single-parent households with the mother as the primary care-giver. Overall, 73 percent of families have at least one parent employed and 72 percent of families have at least a high school diploma.

	TOTAL in	EHS Dallas	EHS	Partnership	Head Start
	all		Mesquite		
	programs				
Single Parents	74%	75%	39%	92%	78%
Two-parent families	26%	26%	61%	8%	22%
Children parented by	97%	98%	99%	97%	96%
parents					
Children parented by	1%	2%	0%	1%	2%
grandparents					
Children parented by other	0%	0%	0%	0%	0%
relatives					
Children in foster care	2%	1%	0%	3%	3%

Employment



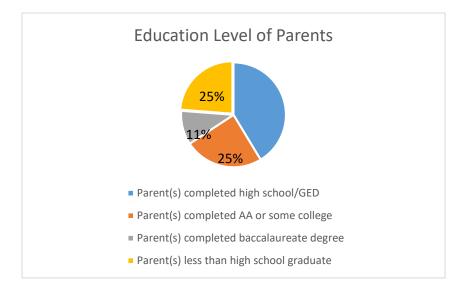
Program-wide, 73% of ChildCareGroup parents are employed.

In the Early Head Start Dallas program, 75% of parents are employed. In the EHS Mesquite program, 77% of families have at least one parent employed. In the EHS Partnership program, 65% of parents are employed and in the Head Start program, 74% of parents are employed.

Education

ChildCareGroup parents show a need for secondary and post-secondary education opportunities.

Overall, 25% of parents have less than a high school degree; 43% of parents have a high school degree; 25% have an AA degree or some college courses and 11% have a baccalaureate degree.



Education	EHS Dallas	EHS Mesquite	Partnership	Head Start
Parent has less than high school diploma	28%	47%	16%	20%
Parent has high school diploma	44%	29%	50%	44%
Parent has AA or some college courses	12%	8%	12%	41%
Parent has baccalaureate degree	17%	16%	22%	3%

Federal Services	EHS Dallas	EHS	Partnership	Head Start
		Mesquite		
Families receiving TANF (cash assistance)	2%	0%	1%	1%
Families receiving SSI (disability benefits)	10%	10%	10%	6%
Families receiving WIC (food vouchers)	74%	74%	60%	48%
Families receiving SNAP (food stamps)	58%	46%	51%	48%
Families experiencing homelessness	4%	1%	3%	4%

How Data is Used

ChildCareGroup uses several outcome-based evaluations to contribute to program evaluation and quality improvement. Annual goals and outcomes are reviewed twice each year to ensure staff accountability and guide decisions. Child assessment outcomes are reviewed at mid- and end-of-year and shared with staff, parents, governing body, and policy council. Outcome data in each domain determines training topics, curriculum decisions, and program emphasis for each year. Family Risk Assessment outcomes are reviewed at the beginning and end of each program year to assess family needs, determine what community partners might be utilized to provide family services, and observe family progress. Outcomes are shared with staff, parents, governing body, and policy council.

The chart below illustrates the process that ChildCareGroup uses for data collection, goal setting, and program evaluation.

	Data Collected: PIR, Community Needs Assessment, Child Assessment, Family Risk Assessment, Self-Assessment, Ongoing Monitoring Compliance, etc.
	Goals Set (Measurable Objectives and Outcomes): In collaboration with staff, policy council, governing board, and parents and informed by data collected
	Action Steps/Activities: Effective teaching strategies, research-based curriculum, family engagement, community partnerships, health and inclusion practices, two generation programming
	Program Evaluation (Outcomes and Objectives): Child Assessments, Family Risk Assessments, PIR data, ASQ, Compliance Indicators, Health and Safety Screener, ongoing monitoring protocol, etc.
V	Correction as Needed: Corrective Action Plan