

INDIANA HEAD START & EARLY HEAD START **NEEDS ASSESSMENT**

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INTRODUCTION

In 1990, the federal Administration for Children and Families (ACF) began awarding Head Start collaboration grants to establish Head Start State Collaboration Offices (HSSCOs) with an appointed State Director of Head Start Collaboration tasked with supporting the development of multi-agency and public/private partnerships at the state level. State Directors of HSSCOs assist Head Start and Early Head Start recipients in collaborating with state and local planning entities and coordinating Head Start services with state and local services. The Indiana Head Start State Collaboration Office (IHSSCO) was established in 1996 to ensure the coordination of services and to lead efforts that support diverse entities working together.

The Improving Head Start for School Readiness Act of 2007 ("Head Start Act") requires HSSCOs nationwide to annually assess the needs of Head Start recipients in their state. The Head Start Act also requires HSSCOs to use the needs assessment results to inform annual updates to the HSSCOs' strategic plan goals and objectives. The information may be used to inform recipients, improve programs, and support recipients in meeting Head Start Program Performance Standards and other federal regulations. A summary report is made available to the general public in each state.

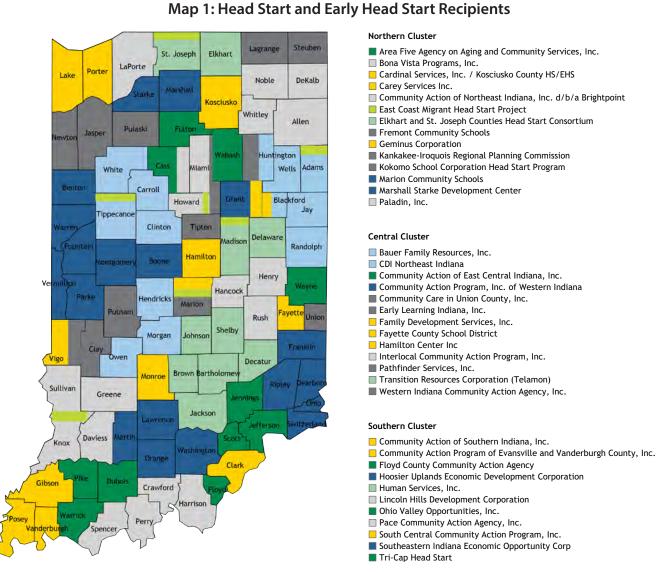
The federal Office of Head Start has annual priority areas that guide HSSCOs' work plans in supporting Head Starts, Early Head Starts, and Early Head Start-Child Care Partnerships.

- Partner with state child care systems emphasizing the Early Head Start-Child Care Partnership initiatives
- Work with state efforts to collect data regarding early childhood programs and child outcomes
- Support the expansion and access of high quality, workforce, and career development opportunities for staff
- Collaboration with state Quality Rating and Improvement Systems (QRIS)
- Work with state school systems to ensure continuity between Head Start and receiving schools

PROFILE OF INDIANA HEAD START PROGRAMS INDIANA RECIPIENTS

Head Start programs operate locally to help young children from low-income families prepare to succeed in school while promoting children's development through early learning, health, and family well-being. Head Start grant recipients deliver child development services in center-based, home-based, or family child care settings. All recipients continually work toward the mission for eligible children and families to receive high-quality services in safe and healthy settings that prepare children for school and life.

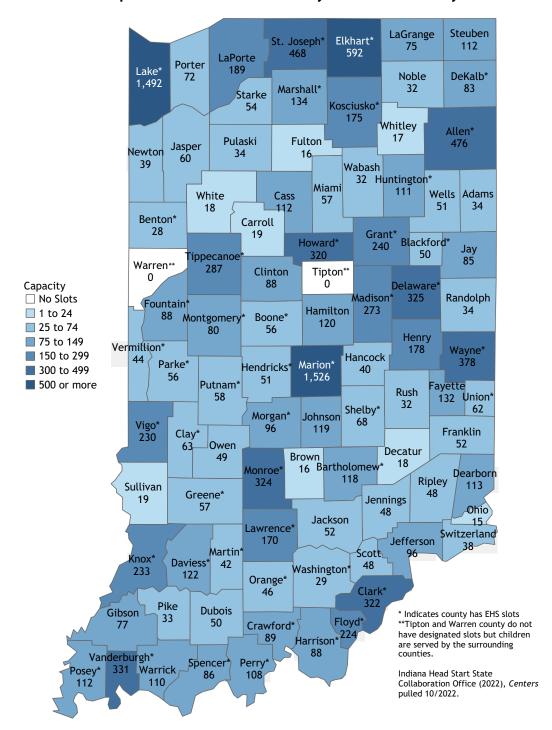
Indiana has 38 Head Start and Early Head Start grant recipients serving Hoosiers across the state.



2023 Indiana Head Start & Early Head Start Needs Assessment

ENROLLMENT (CAPACITY)

In 2021-2022, Indiana recipients reported the capacity to serve 13,293 children and 116 pregnant women. Head Start (HS) programs can serve 10,816 children, while Early Head Start (EHS) programs can serve 2,477 children. These totals include 196 slots for children of migrant and seasonal workers.



Map 2: Total Head Start and Early Head Start Slots by Counties

¹Office of Head Start, *Program Information Report*, National and Indiana, 2021-22.

While enrollment has fluctuated over the past 4 program years, funded enrollment has decreased in the last 18 to 24 months. Recipients may be reducing seats for a variety of reasons. Some recipients may be decreasing seats to invest additional funding in supporting their workforce to improve recruitment and retention and better serve families.

 2018-19
 98 2,530

 2019-20
 11,101
 122 2,432

 2020-21
 11,429
 108 2,799

 2021-22
 10,816
 116 2,477

 Head Start
 Pregnant Women
 Early Head Start

Figure 1: Enrollment Trend by Program Type

Source: Office of Head Start, Program Information Report, National and Indiana, 2021-22.

ELIGIBILITY

Head Start serves children ages 3 to 5 (age determined as of the state's kindergarten entry date), while Early Head Start serves pregnant women, infants, and toddlers to age 3. Federal eligibility guidelines state that most children and pregnant women must also fall into one of the following categories:

- Children from families with incomes below the U.S. Department of Health and Human Services poverty guidelines (100% Federal Poverty Level [FPL])
- Children from families experiencing homelessness
- Children from families receiving public assistance (such as Temporary Assistance for Needy Families [TANF] or Supplemental Security Income [SSI])
- Children in foster care regardless of foster family's income
- Children from families eligible for the Supplemental Nutrition Assistance Program (SNAP)

Head Start programs may enroll up to 10% of children from families that have incomes above the poverty guidelines. Programs may also serve up to an additional 35% of children from families whose incomes are above the poverty guidelines but below 130% of the poverty line ONLY IF the program can ensure that certain conditions have been met. The program must conduct sufficient outreach to meet the needs of eligible children who fall in the above categories, prioritizing the enrollment of the children in the above categories before enrolling children from families with incomes up to 130% of the poverty line.

Head Start and Early Head Start programs are statutorily required to maintain a waiting list. Locally, programs use federal guidelines to create a point system to determine eligibility and prioritization. Additional criteria may be considered in a local program's point system (e.g., child's health, parental status, child's disabilities, and environmental factors). Programs are required to implement local priorities as each program enrolls children; it is important to contact the local Head Start or Early Head Start program directly to learn about their specific eligibility requirements and waiting list information.

NUMBER OF INDIANA CHILDREN WHO MAY BE ELIGIBLE FOR HEAD START OR EARLY HEAD START SERVICES



495,257 children under 6.

This includes 239,636 0- to 2-year-olds and 255,621 3- to 5-year-olds.

The Annie E. Casey Foundation, KIDS COUNT Data Center, Child population by single age in Indiana, 2021. https://datacenter.kidscount.org.



283,304 households receiving SNAP.

More than a quarter of a million households received Supplemental Nutrition Assistance Program (SNAP) benefits in December 2022, a 1% decrease from December 2021(286,835).

FSSA Division of Family Resources, Monthly Management Report, December 2022, Online.



93,230 children under 6 in poverty.

19% of young children are living below the poverty line.

An additional 29,708 (6%) of young children are living between 100-125% FPL.

U.S. Census Bureau, American Community Survey 5-Year Estimates 2017-2021, Table B17024.



7,877 children received TANF in December 2022, a 13% decrease from the previous year (9,053).

FSSA Division of Family Resources, Monthly Management Report, December 2022, Online.



15,364 children experienced homelessness in the 2020-2021 school year, which is lower than the previous 2 school years.

National Center for Homeless Education, Indiana, 2020-21 Online.



5,899 children under 6 in foster care.

1,428 of the children removed from their homes in 2021 were below the age of 1.

U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, The AFCARS Report: Indiana, 2021.

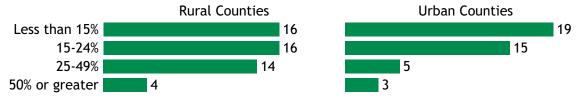
URBAN/RURAL ANALYSIS

According to the United States Department of Agriculture (USDA) definitions, Indiana has 44 metro counties and 48 nonmetro counties. The USDA bases determinations on population, degree of urbanization, and adjacency to a metro area. The terms metro and nonmetro are used as a proxy to identify urban and rural counties across the state and determine the capacity for Head Start and Early Head Start centers to provide services for children under the age of 6 living in poverty in each type of county.

Head Start and Early Head Start programs in Indiana are currently able to serve more children experiencing poverty in rural communities. This calculation is based on the total number of slots (of all program types) in a county divided by the number of children under the age of 6 living in poverty. Eight urban counties have the capacity to serve over 25% of the population of young children in poverty, and 18 rural counties have that capacity.

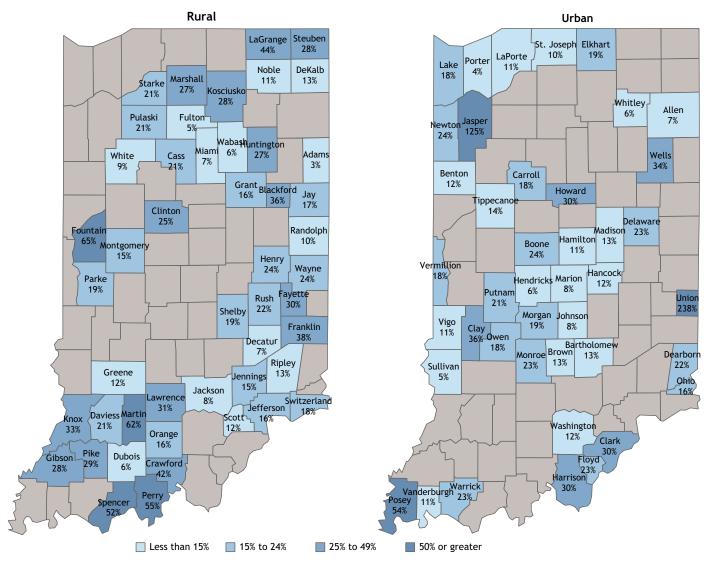


Figure 2: County Capacity Ranges in Head Start and Early Head Start Programs to Serve Children in Poverty



Source: Indiana Head Start State Collaboration Office (2022), *Centers* pulled 11/2022; U.S. Census Bureau, 2017-2021 American Community Survey 5-Year Estimate, Table B17024.

Map 3: Percentage of Children in Poverty that Head Start and Early Head Start have the Capacity to Serve



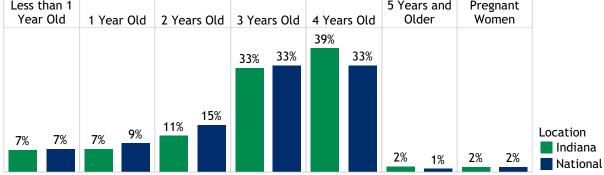
Source: Indiana Head Start State Collaboration Office (2022), Centers, pulled 10/2022; U.S. Census Bureau, 2017-2021 American Community Survey 5-Year Estimates, Table B170

² The capacity to serve only takes into account income eligibility of 100% FPL and below. It does not account for children who fall into other eligibility categories.



AGE BREAKDOWN

Head Start and Early Head Start serve pregnant women and children birth through age 5; 72% of children served are 3- and 4-year-olds. The breakout of children by single age and pregnant women served in Indiana is comparable to those served nationally by Head Start and Early Head Start.



Source: Office of Head Start, *Program Information Report*, National and Indiana, 2021-22. *Due to rounding, Indiana does not equal exactly 100%.

Early Head Start also provides services and makes referrals to pregnant women. Once the child is born, often the child takes the mother's slot in Early Head Start. In 2022, less than half (46%) of women enrolled in Early Head Start during their third trimester, while 15% enrolled as early as their first trimester.

ENROLLMENT BY PROGRAM TYPE

Head Start and Early Head Start operate multiple program types, including center-based, home-based, family child care, locally designed, and services for pregnant women. Most funded enrollment was in center-based programs (89%), followed by home-based (9%).

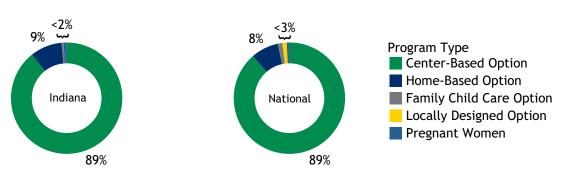


Figure 4: Funded Enrollment by Program Type

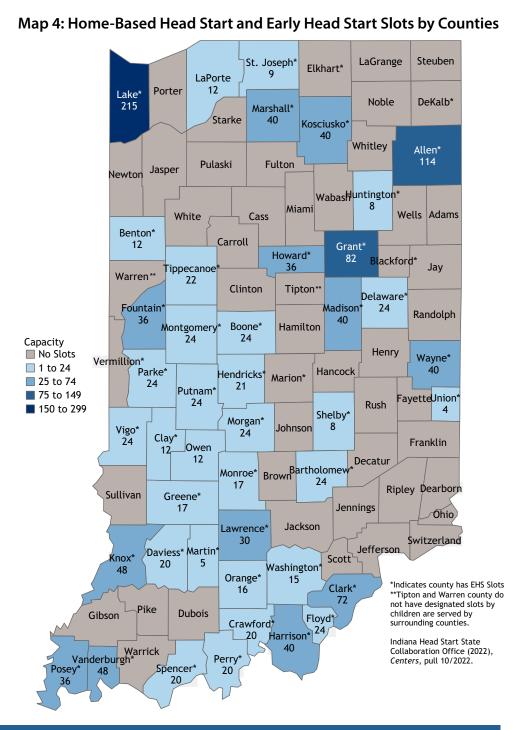
Source: Office of Head Start, Program Information Report, Indiana, 2021-22.



HOME-BASED PROGRAMS

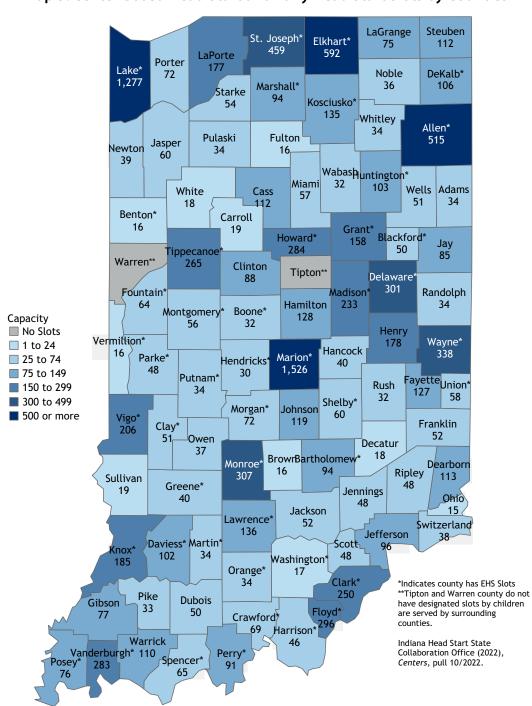
Home-based programs provide services to children and pregnant women through "visits with the child's parents, primarily in the child's home and through group socialization opportunities in a Head Start classroom, community, facility, home, or field trips." Families receive a weekly home visit lasting about 90 minutes. Early Head Start participants receive at least 46 visits and 22 group socialization activities per year, and Head Start participants receive 32 visits and 16 group socialization activities per year.

The 1,237 home-based program slots are distributed across less than half of Indiana counties.



CENTER-BASED PROGRAMS

Center-based programs provide education and child development services to children in a classroom setting. Approximately nine in 10 Head Start and Early Head Start slots in Indiana are in center-based programs (11,977).



Map 5: Center-Based Head Start and Early Head Start Slots by Counties



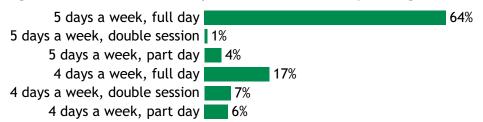
CENTER-BASED PROGRAM SCHEDULE BREAKDOWN

As of August 2021, Head Start programs must provide at least 1,020 annual hours of planned class operations over the course of at least eight months per year for at least 45% of Head Start center-based funded enrollment (ECLKC, ACF-PI-HS-21-02).

The Office of Head Start enacted this requirement based on the benefits of longer service duration. These benefits include promoting school readiness, stronger child and family outcomes, supporting the needs of parents, delivering the full range of services, and meeting program goals.

Two thirds (64%) of Head Start and Early Head Start centers operate full day for 5 days a week, and 17% operate during the full day for 4 days a week. In addition, the data below shows some recipients operate on a part-day schedule and/or 4 days a week.

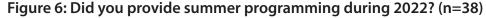
Figure 5: Head Start and Early Head Start Centers Operating Schedule

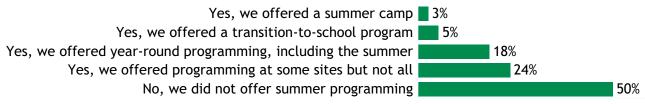


Source: Indiana Head Start State Collaboration Office (2022), Centers pulled 11/2022. *Due to rounding, does not equal exactly 100%

Recipients reported whether they changed their operating schedule to increase services for families and their communities. One in five (19%) respondents changed their operating schedule. Of those that changed their operating schedules, most (11%) changed from part-day to full-day, and 5% changed from 4 to 5 days a week, and one program changed by moving to full day and 5 days a week. Two thirds (68%) of respondents reported not changing their operating schedule. The remaining (13%) other responses indicated answers unrelated to the operating schedule, such as reducing classrooms and/or enrollment and switching homebased slots to center-based slots.

Half of respondents provided some form of summer programming, including those who offered year-round services, transition-to-school programs, and separate summer programming. In addition, some recipients offered summer programming at some sites, but not all.

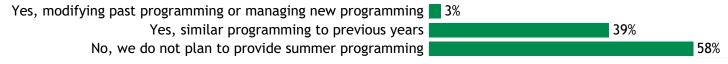




Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Two fifths (42%) of respondents plan to provide summer programming in 2023. Some plan to modify past programming or manage new programming, while others are running similar programming from previous years.

Figure 7: Do you plan to provide summer programming in 2023? (n=38)





COMPREHENSIVE SERVICES

Head Start focuses on the whole child, which extends to the whole family. Children and families involved with Indiana Head Start programs have diverse needs. Early childhood education is just one of the four components of a Head Start or Early Head Start program.

EDUCATION

Providing various learning experiences to help children grow intellectually, socially, and emotionally.

HEALTH

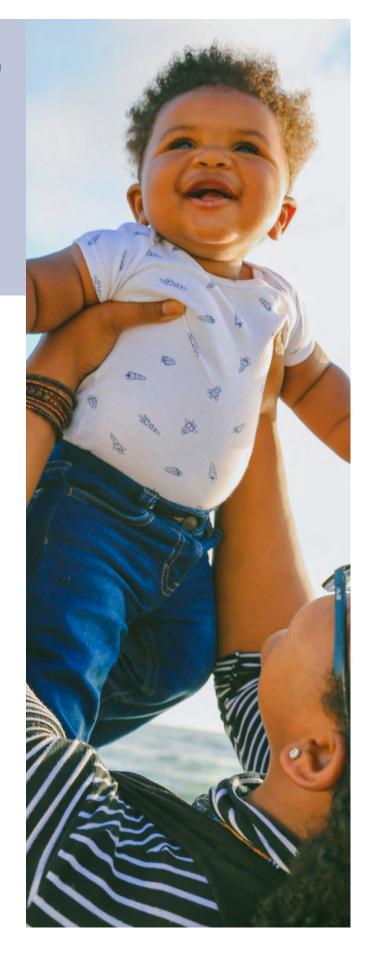
Providing health services such as immunizations, dental, medical, mental health, nutritional, and early identification of health problems.

PARENT INVOLVEMENT

Involving parents in the planning and implementation of activities. Parents serve on policy councils and committees that make administrative decisions, participate in classes and workshops on child development, and volunteer in the program.

SOCIAL SERVICES

Providing outreach to families to determine what services they need.



FEDERAL PRIORITY AREAS

OVERVIEW

The federal Office of Head Start has annual priority areas that guide Head Start Collaboration Offices' work plans in supporting Head Start, Early Head Start, and Early Head Start-Child Care Partnerships. These priority areas focus on community partnerships, child outcomes, staff development, quality improvement ratings, and school partnerships.

STAKEHOLDER OVERVIEW

Stakeholders play a major role in partnering with Head Start programs to support access to quality early care and education programs as well as other comprehensive services. The Indiana Head Start State Collaboration Office contacted various stakeholder organizations to ask them how they gather information about Head Start and Early Head Start, what information would be helpful for their work, and how they collaborate with Head Start programs.

The stakeholder survey was sent to the following organizations.

CHILD CARE RESOURCES AND REFERRAL AGENCIES	EARLY CHILDHOOD EDUCATION COALITIONS	EARLY LEARNING INDIANA	FIRST STEPS
INDIANA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN	INDIANA DEPARTMENT OF CHILD SERVICES	INDIANA DEPARTMENT OF EDUCATION	SPARK LEARNING LAB

PRIORITY AREA 1: COMMUNITY PARTNERSHIPS

PARTNER WITH STATE CHILD CARE SYSTEMS EMPHASIZING THE EARLY HEAD START-CHILD CARE PARTNERSHIP INITIATIVES

Head Start programs establish community relationships and partnerships with local organizations to facilitate access to services to support children and families. Partnerships range from local and state agencies providing an array of services to meet the needs of Hoosier families.

In addition to community partnerships, Indiana has five child care partnership recipients serving six counties. Most child care partnership slots are for Early Head Start programs, but some Head Start programs also have child care partnership slots.

Early Head Start-Child Care Partnerships support communities by expanding the number of high-quality early learning environments for infants and toddlers in low-income families.

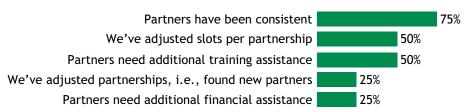
Map 6: Early Head Start-Child Care Partnership Programs in Indiana



HEAD START RECIPIENTS

Of the recipients that hold a Child Care Partnership grant, 75% reported their partner programs have been consistent. Half of recipients said their partners need additional training assistance and that they have adjusted slots per partnership. One in four stated their partners need further financial assistance and have adjusted their partnerships by finding new partners.

Figure 8: If you hold a Child Care Partnership grant, which of the following applies to you? (Select all that apply) (n=4)



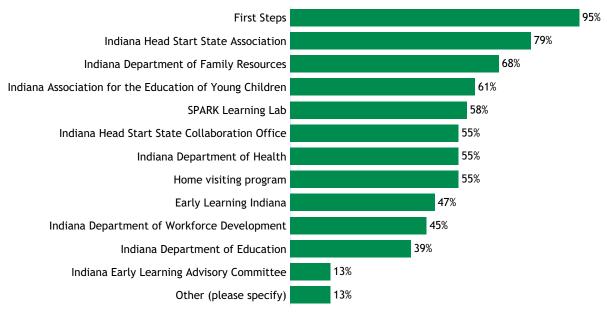
Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

In addition to Child Care Partnership grants, this priority area encompasses partnerships emphasizing the same initiatives, such as access to quality early childhood education, programs available to low-income families, and comprehensive services. Recipients identified which state and local entities they partnered with last year.

Of the statewide entities, most recipients partnered with First Steps, followed by the Indiana Head Start State Association.
Statewide partnerships include organizations supporting early childhood education, elementary education, health, and workforce development.



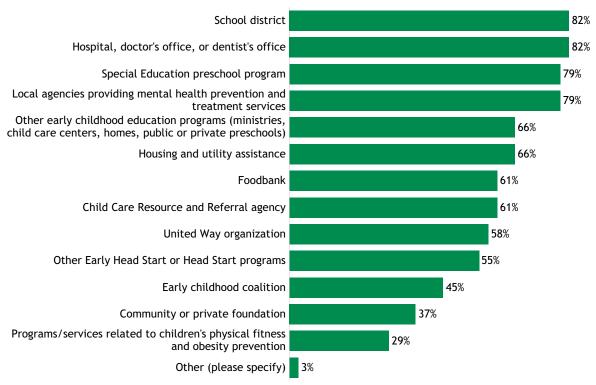
Figure 9: Which of the following statewide entities have you partnered with in the last year? (Select all that apply) (n=38)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

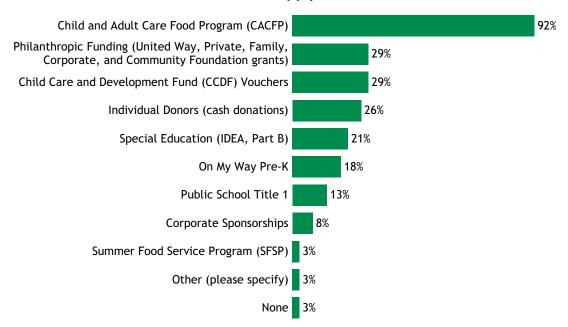
In addition to statewide partnerships, Head Start recipients partnered with local entities to support the needs of children and families. These entities provide services targeted to support health, education, housing, and more. Recipients commonly partnered with their school districts, hospitals, doctor's offices, and dentist's offices.

Figure 10: Which of the following local entities have you partnered with in the last year? (Select all that apply) (n=38)



In addition to statewide partnerships, Head Start recipients partnered with local entities to support the needs of children and families. These entities provide services targeted to support health, education, housing, and more. Recipients commonly partnered with their school districts, hospitals, doctors' offices, and dentists' offices.

Figure 11: What funding streams does your program blend and braid to support your services? (Select all that apply) (n=38)

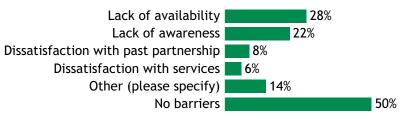


Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Recipients were asked for more information about their participation in one funding opportunity – the On My Way Pre-K program. Recipients identified if they had signed on to the On My Way Pre-K program in the last year. Approximately one in five recipients signed on to the program within the past year, while one tenth were already enrolled. More than one tenth were not participating but were interested in the program and two fifths were uninterested in participating.

Half of the recipients indicated they have no barriers when partnering with these entities. Those who did experience a barrier most frequently identified a lack of availability and awareness. For those who indicated other barriers, they cited time and staffing shortages as a barrier to building partnerships.

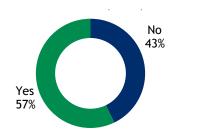
Figure 12: What are the barriers to partnering with these entities? (Select all that apply) (n=36)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Over half of grantees have a strategic relationship with a foundation or coalition focusing on early childhood education, an increase from previous years.

Figure 13: Do you have a strategic relationship with a foundation or coalition focusing on early childhood education? (n=35)



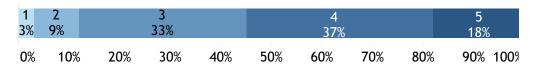
Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

STAKEHOLDERS

Input is collected from stakeholders to understand stakeholders' knowledge about Head Start programs. Stakeholders play a crucial role in improving child outcomes because of their direct connections with children and families in Indiana. If stakeholders know what Head Start programs can provide, they can connect families with Head Start resources that can benefit them, helping reach more children and families in Indiana.

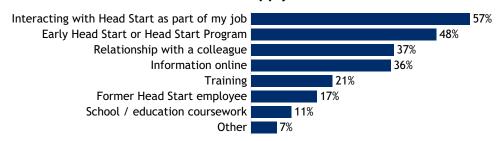
Most stakeholders were knowledgeable about Head Start and Early Head Start programs in Indiana. This was unsurprising as over half of the respondents interact with Head Start as part of their job. Many respondents also gathered information directly from Early Head Start or Head Start programs.

Figure 14: On a scale of 1-5, how knowledgeable are you about Head Start and Early Head Start programs in Indiana? (1 being least knowledgeable and 5 being very knowledgeable) (n=133)



Source: Indiana Head Start State Collaboration Office. (January 2023). External stakeholder survey. [Unpublished raw data].

Figure 15: Where have you gathered your information about Head Start and Early Head Start? (select all that apply) (n=151)



Source: Indiana Head Start State Collaboration Office. (January 2023). External stakeholder survey. [Unpublished raw data].

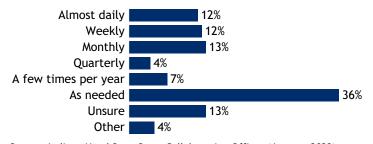
Respondents to the stakeholder survey reported how they collaborate with Head Start programs. Approximately three quarters said they refer families to Head Start, about one third said they receive referrals from Head Start, and more than one quarter said they bring partners together. Collaboration also included stakeholders providing professional development opportunities and other services to Head Start programs.

Figure 16: In what capacity do you collaborate with Head Start programs? (select all that apply) (n=139)



The top frequency stakeholders collaborated with Head Start programs was as needed. A total of about one third collaborated either monthly, weekly, or almost daily.

Figure 17: How often do you or your office collaborate with Head Start programs? (n=138)

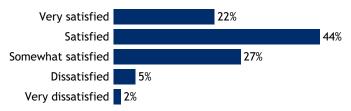


Source: Indiana Head Start State Collaboration Office. (January 2023).

External stakeholder survey. [Unpublished raw data].

Approximately two thirds of respondents reported feeling "satisfied" or "very satisfied" with their Early Head Start and Head Start partnerships. More than one quarter reported feeling "somewhat satisfied." The remaining respondents felt "dissatisfied" or "very dissatisfied."

Figure 18: How satisfied are you with your partnership with Early Head Start and Head Start? (n=124)



Source: Indiana Head Start State Collaboration Office. (January 2023). External stakeholder survey. [Unpublished raw data].

Success Stories from Collaboration

"Geminus Head Start has been helpful in providing efficient services to parents who have children with special needs. The children who receive these services are achieving new goals that are created by their teachers' use of their IFSP report."

"Head Start referred a client to Community Partners and we were able to assist them with paying a Nipsco bill."

"I have referred a family to Head Start that really wanted a preschool program, but did not qualify for preschool through the school district - family was very grateful to be able to receive services."

"There are many success stories. Families that would have been turned [away] because they didn't have and couldn't afford child care. Families that were listed as homeless and would have remained that way, if they didn't have child care. A mother who was [in] a domestic violent affair and needed to get on her feet, child care set the momentum she needed."

~ External stakeholder feedback

^{*}Due to rounding percentages exceed 100%.

Although many external stakeholders are satisfied with their Head Start partnerships, there are still barriers that prevent them from beginning or furthering their collaboration. Stakeholders commonly identified communication barriers such as slow or no response from programs. Some programs also cited a lack of knowledge of Head Start as a limitation in knowing how to collaborate. Head Start's limited capacity and waiting lists were a barrier to helping families that the stakeholders serve to access the services.

Stakeholders identified whether they had heard of the Head Start Policy Council, a group of Head Start and Early Head Start parents and community members who help lead and make decisions about their programs. Approximately one third of respondents had heard of the Head Start Policy Council, and a small percentage of the respondents currently serve or have previously served on a local policy council.

SECTION HIGHLIGHTS

Partnerships have

remained similar to previous years. The top three partnerships include Child and Adult Care Care Food Program (CACFP), philanthropic entities, and Child Care and Development Fund (CCDF).

Stakeholders most commonly collaborate with Head Start by referring

families

to their services.

Stakeholders are **Satisfied** with their Head Start partnership.



PRIORITY AREA 2: CHILD OUTCOMES

WORK WITH STATE EFFORTS TO COLLECT DATA REGARDING EARLY CHILDHOOD PROGRAMS AND CHILD OUTCOMES

Head Start and Early Head Start programs collaborate with families, staff, and community service providers to promote positive, enduring outcomes for children. Head Start recipients focus on achieving child outcomes to ensure children are:

- Safe
- Healthy and well
- Learning and developing
- Engaged in positive relationships with family members, caregivers, and other children
- Ready for school
- Successful in school and life

Head Start recipients collect child and family outcomes data to support and provide valuable input and data for a state-level early childhood education (ECE) data system. Child development screenings, assessments, and curricula are essential to meeting the Head Start standards.

Head Start requires all children to receive developmental, sensory, and behavioral screenings within 45 days of entering the program. Developmental screening is a process involving partnerships with parents to identify concerns about a child's development. Approximately two in five recipients use a version of the Ages & Stages Questionnaire (ASQ) as their primary screening tool. Brigance was the second most identified screening tool by recipients.

ASQ (all editions)

Brigance (all editions)

Dial (all editions)

Denver Developmental Screening - II

Acuscreen

3%

Figure 19: Instruments used by Programs for Developmental Screening

Source: Office of Head Start, *Program Information Report*, Indiana, 2021-22.

In addition to developmental screening tools, recipients use ongoing child assessments to understand and support children's development over time. The information collected through observation and documentation helps inform curriculum planning, teaching, and individualized aid for all children. Over half of recipients use Teaching Strategies GOLD Online as their primary assessment tool. This far exceeds the use of the other assessment tools reported by recipients.

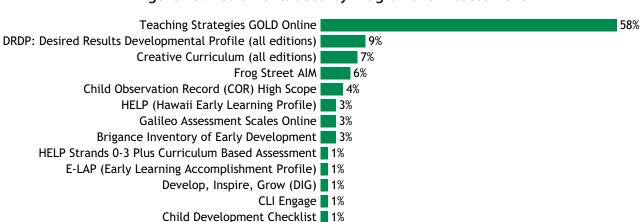


Figure 20: Instruments used by Programs for Assessment

 ${\tt Source:\ Office\ of\ Head\ Start}, \textit{Program\ Information\ Report},\ Indiana,\ 2021-22.$

Head Start recipients rely on high-quality, research-based curricula to promote measurable progress toward children's healthy development. The curriculum provides guidance on what content to cover and what teaching methods to use. The various Creative Curriculum versions were the top three primary curricula used by center-based Head Start and Early Head Start programs. The Creative Curriculum provides a set of resources to support active learning through various learning experiences.

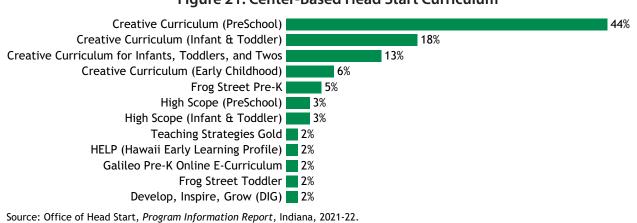


Figure 21: Center-Based Head Start Curriculum

Some recipients provided stories of how they are using technology to innovate. A common theme among respondents was using technology to increase family engagement and communication. Examples included using technology for virtual meetings and using designated apps to message families. One recipient stated, "We have branched out in a variety of online platforms to use so we can reach parents where they are." Another theme was using technology to increase outreach; multiple recipients stated they use social media to reach new and current families.

Recipients also shared stories of other ways they are innovating in their programming. Head Start and Early Head Start centers are finding creative ways to engage families. Some examples include hosting family dinners, providing education packages for families to take home, and hosting virtual events.

SECTION HIGHLIGHTS

Programs layer **developmental SCREENING** with instruments such as ASQ and Brigance.

Teaching Strategies GOLD is the top **assessment tool** used by programs.

Programs commonly identified Creative Curriculum and Frog Street as their chosen Curriculum.



PRIORITY AREA 3: CAREER DEVELOPMENT

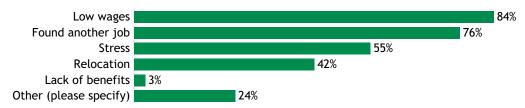
SUPPORT THE EXPANSION AND ACCESS OF HIGH QUALITY, WORKFORCE, AND CAREER DEVELOPMENT OPPORTUNITIES FOR STAFF

The Office of Head Start requires at least 15 hours of professional development per year to support individual development plans and career goals. Career development reflects an individual's goals, motivation, and approaches to learning. Head Start programs work with staff to further career and professional development opportunities and address turnover and retention issues.

HEAD START RECIPIENTS

Turnover remains a prominent issue in the workforce. Recipients who experienced turnover identified low wages as the most common reason for employees leaving their positions. Employees finding another job was the second most commonly identified reason for leaving. Other responses included retirement, loss of staff to charter or public school systems, and health reasons.

Figure 22: If you experienced turnover in the past year, why did your employee(s) choose to leave their position? (Select all that apply) (n=38)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Nearly all recipients adjusted their recruitment practices in the past year. Many found increased pay and expanded reach on social media helpful. Recipients also identified the recruitment practices they found not beneficial. Recruiting at colleges and universities and contacting qualified applicants from the past were among the recruitment efforts recipients did not find helpful.

Figure 24: Have you adjusted your recruitment practices in the past year? (n=38)

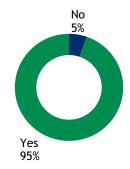
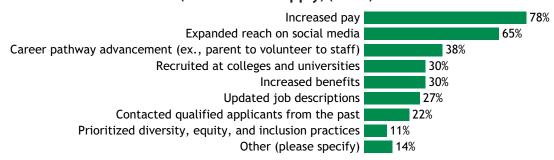
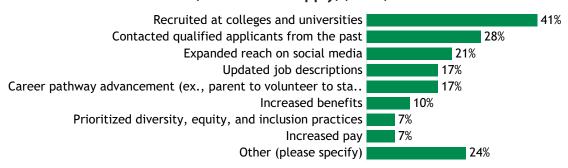


Figure 24: Which of the following recruitment practices has been helpful to your program? (Select all that apply) (n=37)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Figure 25: Which of the following recruitment practices has NOT been helpful to your program? (Select all that apply) (n=29)





Respondents also reported the benefits they offer their employees. All recipients provide health insurance to their employees, while nearly all offer dental and vision insurance. Recipients commonly offered paid vacation time, paid sick time, and wellness support and programs.

Many recipients also offered professional development and training time and education assistance to help their staff's career development goals. Less commonly offered benefits include free or reduced fee child care.

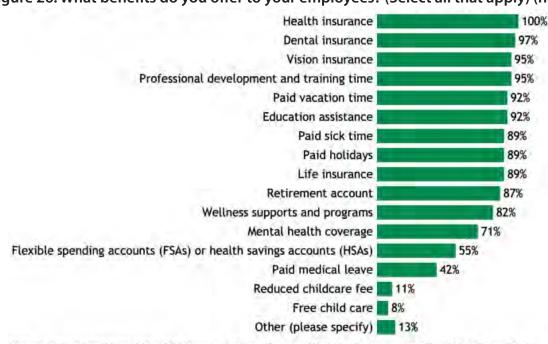


Figure 26: What benefits do you offer to your employees? (Select all that apply) (n=38)

Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Higher education credentials and/or degrees remain the top career development need for Head Start and Early Head Start staff, followed closely by professional development.

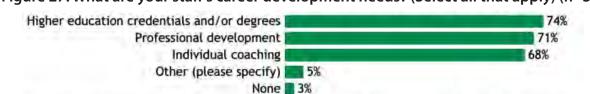


Figure 27: What are your staff's career development needs? (Select all that apply) (n=38)

Respondents reported whether their team used the Teacher Education and Compensation Helps, or T.E.A.C.H., Early Childhood Indiana scholarship this year. 86% of recipients said their staff had utilized the T.E.A.C.H. Early Childhood Indiana scholarship, and 8% reported they were interested in learning more.

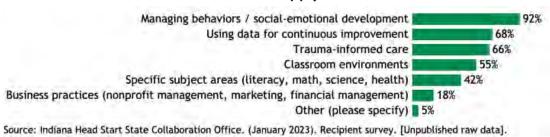
Figure 28: Have any of your staff utilized the Teacher Education and Compensation Helps or T.E.A.C.H. Early Childhood Indiana Scholorshipo? (n=36)



T.E.A.C.H. addresses the issues of under-education, poor compensation, and high turnover within the early childhood workforce. Head Start center directors, teachers, assistant teachers, and home visitors are among those who can participate in the program.

When specifically asked about Head Start staff's professional development needs, most recipients identified managing behaviors/social-emotional development as the most common need. Over half of the respondents also identified using data for continuous improvement and trauma-informed care as needs for their staff.

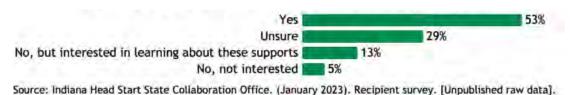
Figure 29: What are the professional development areas that your staff needs? (Select all that apply) (n=38)



Recipients reported the resources they are missing or that need strengthening in Indiana to support the needs of their staff. More support for recruiting staff is a commonly identified need among Head Start recipients. There is also a need for staff who have the appropriate skill level. Some recipients also identified wanting more communication and collaboration among various directors, as well as with the state office, in addition to professional development training opportunities. Lastly, recipients identified the need for mental health support for children, families, and staff.

Mental health is an important topic among early childhood education professionals. More than half of recipients reported their staff utilized mental health support, while more than one tenth have not used these services but are interested in learning more about these supports.

Figure 30: Have your staff utilized any mental health support? (n=38)



SECTION HIGHLIGHTS

Most programs adjusted their

recruitment

practices within the past year.

All programs offer

health insurance

to their employees, and many offer other additional benefits.

Higher education credentials and/or degrees remains the top

career development

need of program staff.

Many programs reported their staff used the Teacher Education and Compensation Helps or

T.E.A.C.H.

Early Education scholarship.



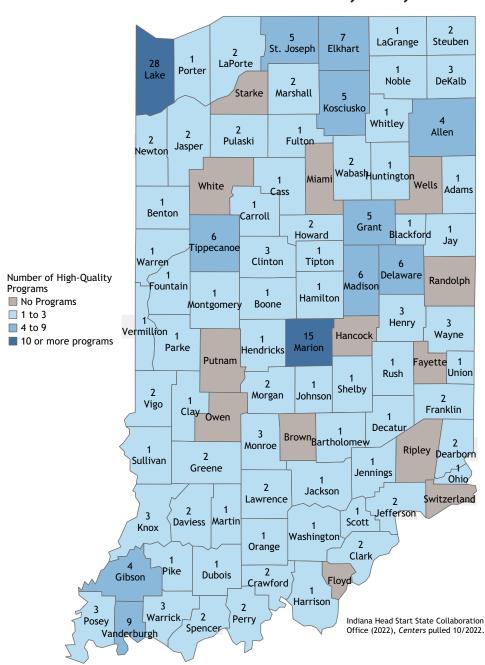
PRIORITY AREA 4: HIGH-QUALITY CARE

COLLABORATION WITH STATE QUALITY RATING AND IMPROVEMENT SYSTEMS (QRIS)

Head Start recipients are collaborating with Indiana's Quality Rating and Improvement System (QRIS) called Paths to QUALITYTM (PTQ). PTQ is a statewide rating system for early childhood education programs, and participation is voluntary. Programs are rated Level 1-4, with Level 4 being the highest rating that programs can attain. Indiana defines high-quality programs as those rated Level 3 or 4 on PTQ.

As of January 2023, the Office of Early Childhood and Out-of-School Learning showed that out of 285 Head Start and Early Head Start centers, 201 were active and participating in PTQ. Of the centers participating in PTQ, 171 are rated high quality (Levels 3 or 4). Head Start and Early Head Start centers rated as high quality are in 73 of Indiana's 92 counties.

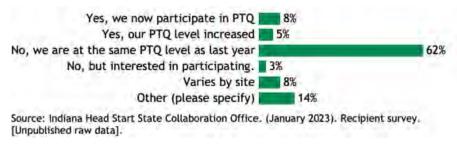
Map 7: High-Quality Head Start and Early
Head Start Centers by County



HEAD START RECIPIENTS

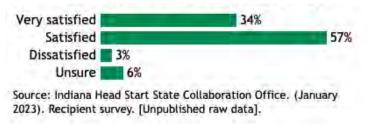
Recipients reported whether their PTQ status had changed in the last year. Approximately two thirds of recipients remained at the same PTQ level. Five (13%) recipients increased their level or began participating in PTQ within the past year.

Figure 31: Has your status with Paths to QUALITY (PTQ) changed in the last year? (n=37)



Most of those participating in PTQ felt satisfied or very satisfied with their experience. Only one participant felt dissatisfied with their experience.

Figure 32: If you participate in Paths to QULAITY (PTQ), what has been your experience? (n=35)



A few recipients expanded upon their reasoning for feeling dissatisfied in an open-ended response. Some felt the process was complicated and repetitive of other efforts. Another respondent stated they were dissatisfied with the lack of response from the PTQ office.

For those not participating in PTQ, funding was the only identified reason for them not being involved.

SECTION HIGHLIGHTS

71% of Head Start centers participate in Paths to QUALITY.

PTQ level as last year.

Most of those participating in PTQ are **satisfied** with their experience.



PRIORITY AREA 5: SCHOOL PARTNERSHIPS

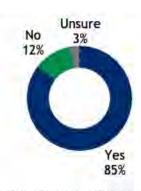
WORK WITH STATE SCHOOL SYSTEMS TO ENSURE CONTINUITY BETWEEN HEAD START AND RECEIVING SCHOOLS

Across the country, more than 320,000 children and their families transition from Head Start programs to kindergarten every year. Children and families are more likely to experience long-term school success when transitions are successful. Partnerships between Head Start programs and their local schools strengthen the ease of transition and set children up for success.

HEAD START RECIPIENTS

Many programs have a kindergarten transition plan with their local school(s). Kindergarten transition is most effective when leaders build a collaborative team and a focused plan. Kindergarten transition plans allow Head Start and school partners to identify goals, consider current practices, and plan for improvement.

Figure 33: Does your program have a kindergarten transition plan with the local school? (n=34)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

Recipients specified their formalized transition plans included meeting with kindergarten staff, working with Family Service Coordinators, school visits with families, and official written plans and MOUs.

Recipients reported if they felt satisfied with their school partners supporting kindergarten transition. Over half stated they were satisfied or very satisfied with their partner's support. However, one in 10 were dissatisfied with their school partner's support.

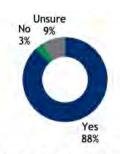
Figure 34: How satisfied are you with your school partners supporting kindergarten transition? (n=31)



Source: Indiana Head Start State Collaboration Office, (January 2023). Recipient survey. [Unpublished raw data].

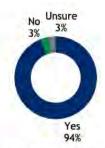
In addition or in place of a kindergarten transition plan, most recipients have clear guidelines for kindergarten entrance that their program uses for planning purposes. Ninety-four percent of recipients communicate with school staff about expectations for kindergarten entrance.

Figure 35: Are there clear guidelines for kindergarten entrance that your program uses for planning purposes? (n=33)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

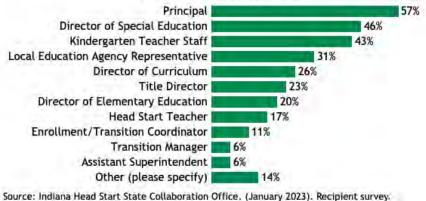
Figure 36: Do you communicate with school staff about expectations for kindergarten entrance? (n=33)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

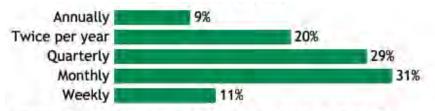
Over half of the recipients identified principals as their contact for collaboration or information sharing. The director of special education and kindergarten teacher staff were a close second and third identified connection.

Figure 37: Who is your school district contact for collaboration or information sharing? (Select all that apply) (n=37)



Approximately one third of those who communicate with school partners do so monthly or quarterly. Only a few respondents communicate on a weekly or annual basis.

Figure 38: How often do you communicate with your school partners? (n=35)



Source: Indiana Head Start State Collaboration Office. (January 2023). Recipient survey. [Unpublished raw data].

SECTION HIGHLIGHTS

85%

of programs have a kindergarten transition plan with their local school.

Over half

of the Head Start recipients are satisfied with their school partnership.

Nearly all

recipients communicate with school staff about expectations for kindergarten entrance.



RECOMMENDATIONS

- Identify ways to increase awareness and communication with community partners.
- Continue to strengthen school partnerships to establish a smooth transition to kindergarten for children and their families.
- Continue to use the T.E.A.C.H. scholarship program to support staff career development needs.



APPENDIX A: DATA COLLECTION AND METHODOLOGY

The Indiana Head Start State Collaboration Office (IHSSCO) contracted Transform Consulting Group to conduct its statewide needs assessment and report the results. This report has been compiled using feedback from Head Start and Early Head Start recipients, education partners, and other stakeholders. IHSSCO recognizes that feedback from external partners that supports, complements, and streamlines services for children and families is equally valuable. The needs identified by stakeholders will also provide comprehensive feedback to inform IHSSCO's strategic plan and relationships with Head Start programs in local communities.

Transform Consulting Group utilized a mixed methods design for this needs assessment, including a review of the 2022 Head Start Program Information Report (PIR) for Indiana and the United States, surveys distributed to Head Start and Early Head Start recipients, surveys distributed to Head Start education partners and stakeholders, and other data provided by the federal Office of Head Start and the Indiana Office of Early Childhood and Out-of-School Learning.

The purpose of the grant recipient survey was to assess how Head Start recipients collectively respond to the identified community, state, and federal priority areas. The survey asked questions regarding Indiana Head Start recipients' experience with creating partnerships necessary for success, data collection and use, professional development, the state Quality Rating and Improvement System (QRIS), and kindergarten readiness alignment with schools.

The grant recipient survey link was emailed to all Head Start and Early Head Start directors across the state. All but one grantee who was contacted to take the survey completed it between November 2022 and February 2023. Respondents to the recipient survey serve all 92 counties in the state.

The stakeholder survey was sent electronically to key external stakeholders. In total, 157 survey responses were received from January through March 2023 from eight organizations: Indiana Department of Child Services, Early Learning Indiana, Indiana Department of Education, First Steps, Child Care Resource & Referral agencies, SPARK Learning Lab, Indiana Association for the Education of Young Children (INAEYC), and early childhood education coalitions. The external stakeholders also include education partners from professional associations and other local education agencies. This survey asked stakeholders how they gather information about Head Start and Early Head Start, what information would be helpful for their work, and how they collaborate with Head Start programs.

APPENDIX B: GLOSSARY

Center: An individual facility where center-based programming is provided. Recipients may operate more than one center.

Early Head Start: A program providing services to children ages 0-3 and pregnant women. Early Head Start programs must adhere to the Head Start Program Performance Standards.

Funded Enrollment: Total number of enrollees (children and pregnant women) the program is funded to serve.

Grant: The Office of Head Start (OHS) administers grant funding and oversight to the 1,600 public and private nonprofit and for-profit agencies that provide Head Start services in local communities. A grantee may be the recipient of more than one Head Start grant.

Recipient: The organization that has the grant with the federal government for the administration of the Head Start and/or Early Head Start grant. This organization may provide services directly or via partnerships/delegate agencies. Grantee and recipient can be used interchangeably.

Head Start: (a.) A federally-funded program that provides comprehensive early childhood education, health, nutrition, and parent involvement services to low-income children, birth to 5 years of age, and their families. (This is a universal use of the term encompassing both Head Start and Early Head Start.) (b.) A program providing services to children ages 3-5. Head Start programs must adhere to the Head Start Program Performance Standards.

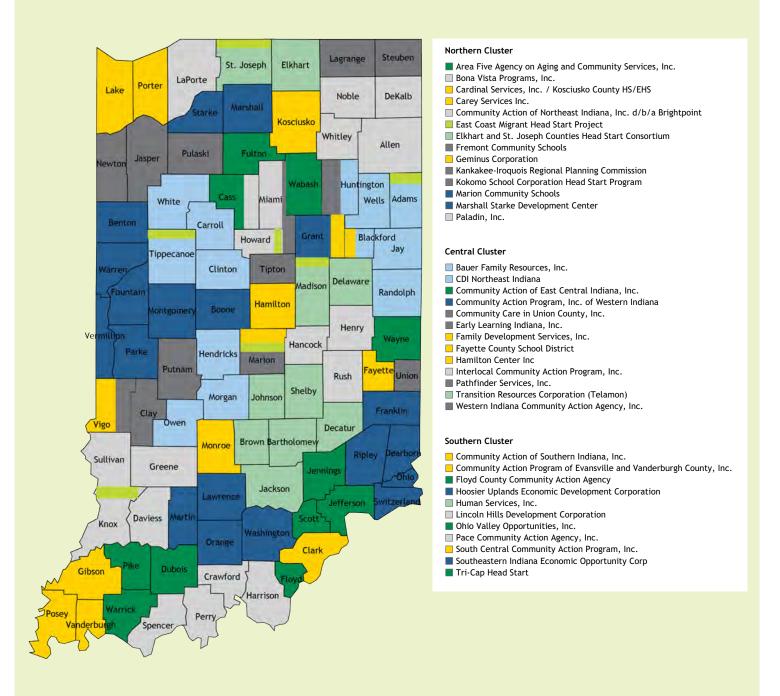
Policy Council: A required part of Head Start program governance, the Policy Council is composed of elected parents and community members. Per the Head Start Act, it is responsible for the direction of the Head Start program, including program design and operation and long-term planning, goals, and objectives.

Program Information Report: An annual report completed and filed electronically at the end of each program year by every Head Start program in the nation, supplying data used by the Administration on Children, Youth and Families (ACYF) to report to Congress and for program monitoring.

Program Type: Refers to Head Start, Early Head Start-Child Care Partnerships, or Migrant & Seasonal Head Start programming. A center may offer more than one type of program.

APPENDIX

C: MAP OF INDIANA HEAD START AND EARLY HEAD START RECIPIENTS



APPENDIX

D: TABLE OF INDIANA HEAD START AND EARLY HEAD START RECIPIENT INFORMATION

Г	Grantee	Counties Served	Contact Name and Email	
1	Area Five Agency on Aging and Community Services, Inc.	Cass, Fulton, Wabash	Lori Frame, lframe@areafive.com	
		Carroll, Clinton, Tippecanoe, White, Hendricks, Morgan, Owen	Kim Ryan, kryan@bauerfamilyresources.org and Dedee Rhea	
3	Bona Vista Programs, Inc.	Cass, Howard, Miami	Bailley Maxwell, bnmaxwell@dsiservices.org	
4	Cardinal Services, Inc. / Kosciusko County HS/EHS	Kosciusko	Kathryn Fields, kathryn.fields@cardinalservices.org	
5	Carey Services Inc.	Blackford, Grant	Beth L. Wickham, bwickham@careyservices.com	
6	CDI Northeast Indiana	Adams, Blackford, Huntington, Jay, Randolph, Wells	Cari Reiley, creiley@neindianahs.org	
7	Community Action of East Central Indiana, Inc.	Wayne	Marcus Fleagle, mfleagle@caeci.org	
8	Community Action of Northeast Indiana, Inc. d/b/a Brightpoint	Allen, DeKalb, Noble, Whitley	Mary Lee Freeze, maryleefreeze@mybrightpoint.org	
9	Community Action of Southern Indiana, Inc.	Clark	Merry Streigel (Interim), mstreigel@casi1.org	
10	Community Action Program of Evansville and Vanderburgh County, Inc.	Gibson, Posey, Vanderburgh	Mary Goedde, mgoedde@capeevansville.org	
11	•	Benton, Boone, Fountain, Montgomery, Parke, Vermillion, Warren	Dawn Gritten, dgritten@capwi.org	
12	Community Care in Union County, Inc.	Union	Jennifer English, jennenglishnow@gmail.com	
13	Early Learning Indiana, Inc.	Marion	Ashleigh Hoekstra, ashleighh@dayearlylearning.org	
14	East Coast Migrant Head Start Project	Adams, Howard, Knox, Madison, Marion, St. Joseph, Tippecanoe	Petra Gonzales, pgonzales@ecmhsp.org	
15	Elkhart and St. Joseph Counties Head Start Consortium	Elkhart, St. Joseph	Kathy L Guajardo, kguajardohs@sbcsc.k12.in.us	
16	Family Development Services, Inc.	Hamilton, Marion	Teresa Rice, trice@fds.org	
17	Fayette County School District	Fayette	Mallory Cameron, mcameron@fayette.k12.in.us	
18	Floyd County Community Action Agency	Floyd	Tara L Meachum, tmeachum@fcheadstart.com	
19	Fremont Community Schools	Lagrange, Steuben	Pam Covell Anderson, pam.covell@vistulahs.org	
20	Geminus Corporation	Lake, Porter	Karen Carradine, karen.carradine@geminus.org	
21	Hamilton Center Inc	Vigo	Tiffany Cherry, tcherry@hamiltoncenter.org	
22	Hoosier Uplands Economic Development Corporation	Lawrence, Martin, Orange, Washington	Debra Beeler, dsbeeler@hoosieruplands.org	
23	Human Services, Inc.	Bartholomew, Brown, Decatur, Jackson, Johnson, Shelby	Aimee Nichalson, anichalson@hsi-headstart.com	
24	Interlocal Community Action Program, Inc.	Hancock, Henry, Rush	John Pennycuff, jpennycuff@icapcaa.org	
25	Kankakee-Iroquois Regional Planning Commission	Jasper, Newton, Pulaski	Tiffany Stigers, tberkshire@urhere.net	
26	Kokomo School Corporation Head Start Program	Howard, Miami, Tipton	Kelly Wright, kwright@kokomo.k12.in.us	
27	Lincoln Hills Development Corporation	Crawford, Harrison, Perry, Spencer	Martha Thomas, mthomas@lhdc.org	
28	Marion Community Schools	Grant	Allison Reed, areed@marion.k12.in.us	
29	Marshall Starke Development Center	Marshall, Starke	Jane Pollitt, jpollitt@marshall-starke.org	
30	Ohio Valley Opportunities, Inc.	Jefferson, Jennings, Scott	Hope Ulrich, hulrich@ovoinc.org	
31	Pace Community Action Agency, Inc.	Daviess, Greene, Knox, Sullivan	Angela Lange, alange@pacecaa.org	
32	Paladin, Inc.	LaPorte	Theresa Argueta, theresa.argueta@imagination.care	
33	Pathfinder Services, Inc.	Huntington	Elizabeth Hire, ehire@pathfinderservices.org	
34	South Central Community Action Program, Inc.	Monroe	Stacey Edwards, stacey@insccap.org	
35	Southeastern Indiana Economic Opportunity Corp	Dearborn, Franklin, Ohio, Ripley, Switzerland	Melody Minger, hsdirector@sieoc.org	
36	Transition Resources Corporation (Telamon)	Delaware, Madison	Jama Donovan, jdonovan@transitionresources.org	
37	Tri-Cap Head Start	Dubois, Pike, Warrick	Molly Wuchner, molly@tri-cap.net	
38	Western Indiana Community Action Agency, Inc.	Clay, Putnam, Vigo	Shelly Conine, sconine@wicaa.org	

APPENDIX

E: HEAD START AND EARLY HEAD START FUNDED SLOTS BY COUNTY

County	Early Head Start Slots	Head Start Slots	County	Early Head Start Slots	Head Start Slo
Adams	0	34	Lawrence	34	136
Allen	119	357	Madison	105	168
Bartholomew	64	54	Marion	307	1,219
Benton	12	16	Marshall	40	94
Blackford	16	34	Martin	8	34
Boone	12	44	Miami	0	57
Brown	0	16	Monroe	57	267
Carroll	0	19	Montgomery	20	60
Cass	0	112	Morgan	36	60
Clark	72	250	Newton	0	39
Clay	12	51	Noble	0	32
Clinton	0	88	Ohio	0	15
Crawford	20	69	Orange	12	34
Daviess	41	81	Owen	0	49
Dearborn	0	113	Parke	12	44
Decatur	0	18	Perry	20	88
DeKalb	16	67	Pike	0	33
Delaware	99	226	Porter	0	72
Dubois	0	50	Posey	36	76
Elkhart	104	488	Pulaski	0	34
Fayette	0	132	Putnam	12	46
Floyd	64	160	Randolph	0	34
Fountain	12	76	Ripley	0	48
Franklin	0	52	Rush	0	32
	0	16	Scott	0	48
Fulton	0	77	Shelby	16	52
Gibson	114	126	Spencer	20	66
Grant	9			87	381
Greene	· ·	48	St. Joseph	0	54
Hamilton	0	120	Starke	0	112
Hancock	0	40	Steuben	0	112
Harrison	20	68	Sullivan	0	
Hendricks	16	35	Switzerland		38
Henry	0	178	Tippecanoe	78	209
Howard	92	228	Tipton	0	0
Huntington	60	51	Union	28	34
Jackson	0	52	Vanderburgh	80	251
Jasper	0	60	Vermillion	12	32
Jay	0	85	Vigo	80	150
Jefferson	0	96	Wabash	0	32
Jennings	0	48	Warren	0	0
Johnson	0	119	Warrick	0	110
Knox	51	182	Washington	12	17
Kosciusko	40	135	Wayne	72	306
LaGrange	0	75	Wells	0	51
Lake	348	1,144	White	0	18
LaPorte	0	189	Whitley	0	17

Source: Indiana Head Start State Collaboration Office (2021), Centers, pulled 10/2022.