



NATIONAL HEAD START ASSOCIATION

National Head Start Association 2010 Policy Agenda (As of 1/29/10)

The National Head Start Association (NHSA) is the national voice for Head Start and Early Head Start programs, collectively “Head Start.” NHSA is a private not-for-profit membership organization dedicated to meeting the needs of Head Start children and their families. It represents more than 1 million children, 200,000 staff and 2,600 Head Start programs in the United States. The Association provides support for the entire Head Start community by advocating for policies that strengthen services to Head Start children and their families; by providing extensive training and professional development to Head Start staff; by providing technical support to Head Start programs; and by developing and disseminating research, information, and resources that enrich Head Start program delivery.

Created in 1965, Head Start is the most successful, longest-running, national school readiness program in the United States. It provides comprehensive education, health, nutrition, and parent involvement services to low-income children and their families. Early Head Start was added and began serving children in 1996. More than 27 million pre-school aged children have benefited from Head Start and Early Head Start programs.

About NHSA’s Agenda

This 2010 Policy Agenda is a roadmap for educating policy makers and for advocating for changes in current law, regulation, and practice. NHSA sought input into the formulation of the policy agenda in a variety of ways, including surveying the Head Start community and holding a policy agenda session at NHSA’s September 2009 Leadership Institute. NHSA’s public policy agenda reflects feedback from member programs, state and regional Head Start associations, and Head Start parents, teachers, and staff. Research-based best practices and effective innovations also informed the development of this policy agenda.

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The National Head Start Association, an independent membership organization, advocates on behalf of the entire Head Start community and provides training and resources to Head Start programs nationwide.

This policy agenda is a statement of policy changes that the Head Start community would like to have implemented. These changes can be implemented through the enactment of federal legislation or the implementation of federal regulations or guidance. The policy changes in this agenda fall into three categories: 1) policy changes requiring federal legislation, 2) policy changes requiring administrative action (regulatory or guidance), and 3) mix of policy changes requiring a mix of legislation and administrative actions.

FEDERAL LEGISLATION

This section contains policy changes that can be made through the enactment of federal legislation.

Expanding Access to Quality Head Start Programs

Sufficient federal funding is critical to ensure that Head Start programs remain quality programs. In Fiscal Years 2009 and 2010 federal lawmakers appropriated \$2.35 billion in new funds to expand Head Start and Early Head Start enrollment and begin reversing a 13 percent real cut in funding (inflation-adjusted) that these programs experienced between Fiscal Years 2002 and 2008.

NHSA recommends that President Obama and the U.S. Congress:

- ✓ Approve a \$3.74 billion increase for Head Start (including Early Head Start) in the Fiscal Year 2011 regular appropriations bill. This increase would sustain the American Recovery and Reinvestment Act enrollment gains and make an additional payment on President Obama's "Zero to Five" plan. Such funds would increase Head Start enrollment by 33,505 slots and Early Head Start enrollment by 62,467 slots.¹

Strengthening Head Start Community Participation on the State Advisory Councils on Early Childhood Education and Care

The Improving Head Start for School Readiness Act of 2007 authorized \$100 million to create State Advisory Councils on Early Childhood Education and Care, and the American Recovery and Reinvestment Act appropriated these funds. The councils were intended by federal lawmakers to enable major early childhood actors within a state to have a seat at the table; however concerns have been voiced in the Head Start

¹ The increase in Head Start enrollment includes Migrant/Seasonal Head Start and American Indian/Alaskan Native Head Start enrollment.

community in many states about amount of Head Start representation on these councils.

NHSA recommends that:

- ✓ Congress and President Obama support the inclusion of language in the Early Learning Challenge Fund legislation that would strengthen the ability of the Head Start community to participate on these councils.

Reforming the Child Care Development Fund (CCDF)

The Child Care Development Fund is authorized by the Child Care and Development Block Grant Act (CCDBG) and Section 418 of the Social Security Act. Through the CCDF, the federal government provides additional funds to states, American Indian/Alaskan Native tribes, and U.S. territories to help low-income families access child care through grants, certificates, and contracts with child care providers. Federal lawmakers may consider legislation to reauthorize the CCDF in 2010. Working parents and guardians of children in Head Start have expressed concerns about the impracticability of the CCDF eligibility determination period and about the amount of family co-payments during the current recession. In addition, because of the low funding levels available to families who receive the child care subsidy, a more cost-effective approach would be to maximize the use of these funds to fund wrap around care for low-income families also receiving services at high-quality Head Start or pre-k programs.

NHSA recommends that Congress and President Obama:

- Support the passage of legislation to--
 - ✓ Extend the child care subsidy eligibility determination period from 6 to 12 months for families and from 6 to 24 months for Head Start families using the child care subsidy to fund wrap around services to coincide with the period of annual eligibility for the Head Start or pre-k program that their child attends.
 - ✓ Cap family co-payments at 10 percent of income.
 - ✓ Establish minimum base reimbursement rates for providers caring for children receiving federally funded child care assistance at no less than the 75th percentile of the current market rate.
 - ✓ Encourage and provide incentives for states to dedicate a significant portion of the CCDF funds for exclusive use to fund wrap around services at Head Start programs (as Nevada currently does).

- ✓ Eliminate barriers to families using child care subsidy funds for wrap around services at Head Start programs by allowing Head Start agencies to submit applications on behalf of families.

Expanding Access to Evidence-Based Home Visitation Programs

In his Fiscal Year 2010 budget proposal, President Barack Obama proposed \$8.5 billion over ten years for a home visitation program. This new mandatory spending program would provide funds to states for evidence-based home visitation programs serving children and their low-income families. Under the home visitation legislation currently being considered by federal lawmakers, qualifying states can provide these funds to programs, such as Early Head Start, which clearly follow an evidence-based model of home visitation and demonstrate favorable impacts on child and family outcomes. Early Head Start programs provided home-based services to nearly 50,000 children and their low-income families during the 2007-2008 program year.²

NHSA recommends:

- ✓ Congress and President Obama support the passage of legislation which would provide funds to states for evidence-based home visitation programs serving children and their low-income families.

Making Sure that Children Are Healthy by Strengthening the Child and Adult Care Food Program (CACFP)

CACFP enables Head Start programs to provide nutritious meals. Federal lawmakers are considering legislation to reauthorize CACFP.

NHSA recommends:

- ✓ Congress and President Obama support the approval of legislation to raise CACFP meal and snack reimbursement rates for Head Start programs.

Reforming the Elementary and Secondary Education Act

Federal lawmakers have begun considering the reauthorization of the Elementary and Secondary Act. ESEA reauthorization provides an opportunity for the Head Start

² U.S. Department of Health and Human Services. (2008). Head Start Program Information Report for the 2007-2008 Program Year. National Level Summary Report for Early Head Start Programs.

community to advocate for legislation to enhance the collaboration and coordination between school districts and Head Start programs.

NHSA recommends:

- ✓ Congress and President Obama support the approval of ESEA legislation to authorize funds and to provide incentives to school districts to work toward the provision of seamless, comprehensive, and continuous early childhood education services for children from birth to age eight.
- ✓ Congress and President Obama support the passage of legislation to require that LEA's provide timely child assessments for children attending Head Start programs.

Ensuring that Head Start and Early Head Start Programs Have Appropriate Facilities

Maintenance and replacement of Head Start and Early Head Start facilities is an urgent and pressing need in the Head Start community. In fact, 73 percent of respondents to NHSA's policy agenda survey indicated that additional funding for facilities should be among the Top 5 NHSA priorities.

NHSA recommends that Congress and President Obama:

- ✓ Approve additional funding for Head Start facilities through jobs bills or other appropriate legislation.

And, that the Office of Head Start:

- ✓ Make it easier for Head Start and Early Head Start programs to maintain and replace their facilities by streamlining the 45 CFR Part 1309 process.
- ✓ Work with relevant departments and agencies in the Obama Administration to leverage capital and streamline regulations to foster community collaborations and more effective leveraging of resources to build, maintain, and replace Head Start facilities.

ADMINISTRATIVE ACTIONS (REGULATIONS OR GUIDANCE)

This section contains policy changes that can be taken through the implementation of federal regulations or guidance.

Maintaining Parental Voice and Participation in Program Governance

One of the successes of Head Start programs is their ability to promote the involvement of parents in their children's education and in the operation of Head

Start programs. This remarkable feature is one of the backbones of the program and must not be lost.

NHSA recommends that the Office of Head Start:

- ✓ Clarify the timing, purpose and effect of Policy Council approval. It is the position of NHSA that Policy Council approval is an essential part of the Head Start program and that the statutory provision calling for “meaningful consultation and collaboration” between the Policy Council and the governing body (Sec. 642(d)(1)(B)) means that Congress intended a strong and substantial role for the Policy Council in program governance. To be clear, NHSA strongly opposes treating the Policy Council as merely an advisory body. We believe that the Policy Council must work in concert with the governing body prior to a Head Start agency taking action on the Policy Council’s required responsibilities.
- ✓ Ensure in its revised regulations that the list set forth at Sec. 642(c)(2)(D) and the other items set forth in more general terms at Sec. 642(c)(2)(A) be connected and included into appropriate regulations so that the obligations of Head Start programs in establishing the general responsibilities of the Policy Council are clear. The list of responsibilities for the Policy Council at Sec. 642(c)(2)(A) includes responsibility for the direction of the Head Start program, including program design and operation, and short- and long-term planning goals and objectives, while Sec. 642(c)(2)(D) enumerates other Policy Council responsibilities.
- ✓ Interpret the statutory language regarding the scope of Policy Council approvals over decisions to terminate “program staff” as broadly as possible in the new regulations, taking into account the specific requirements of the Head Start Act.

Ensuring that Regulations Concerning Program Governance Are Clear and Appropriate and Promote Accountability

Head Start programs’ governance regulations are very important to the proper performance of the Head Start program. With the current Administration’s focus on accountability and transparency, the programs regulations on this subject should be revised.

NHSA recommends that the Office of Head Start:

- ✓ Clarify the statutory language regarding Conflicts of Interest at Sec. 642(c)(1)(C) for the governing body and Sec. 642(c)(2) for the Policy Council

and ensure that the regulations follow best practices for Conflicts of Interests and are not overly restrictive.

- ✓ Keep the regulations consistent with past Policy Council election practice and allow a representative form of governance, e.g., the parents of each center or program option elect their own representatives.
- ✓ Reconcile the various groups that Standards of Conduct apply to in the regulations and clarify which body is responsible for what elements. The rationale for this recommendation is that the Act provides the governing board and the Policy Council certain responsibilities for standards of conduct (Sec. 642(c)(1)(E)(iv)(X) for the governing body and Sec. 642(c)(2)(D)(VI) for the Policy Council). The governing body's responsibility for standards of conduct is for "members of the governing body, officers and employees of the Head Start agency, and consultants and agents who provide services and furnish goods to the Head Start agency" and the Policy Council's responsibility is for standards of conduct for "program staff, contractors, and volunteers."
- ✓ Ensure that the regulations clarify the public entity Governing Body composition exception and explicitly clarify that an exception from the composition requirement is just that – a full exemption.
- ✓ Clarify in the regulations that at least one parent in addition to the early childhood expert must sit on the Governing Body unless exceptions apply.
- ✓ Include clear language in the regulations addressing who the Governing Body is or can be for Head Start programs operated by universities or state, county, and local governments.

Making Sure the Eligibility Process for Head Start Services Is Clear

The Head Start Act requires that several different groups receive priority, including homeless children (Sec. 640(m)(l)), Early Head Start children transitioning to Head Start in a program that provides both services (Sec. 645A(b)(10)); and if a program decides to include children at up to 130 percent of the federal poverty level, then it must first prioritize children under the federal poverty level, homeless children, and children with disabilities (Sec. 645(a)(1)(B)(iii)(II)(aa) and (bb)).

NHSA recommends that the Office of Head Start:

- ✓ Clarify in the regulations that if a program does not choose to use the 130 percent option, that the program need only prioritize homeless children, and if the EHS transitioning to Head Start situation applies, then that should to be prioritized as well.

- ✓ Explain in regulations what priority means. We recommend that each different type of prioritized group should receive additional points in a point based system, rather than “jumping ahead of the line” of all others or in effect, automatically enrolling certain children, which could cause funded enrollment and teacher-student ratio problems.
- ✓ Clarify in the regulations an exception for reporting enrollments for Migrant/Seasonal Head Start programs (sometimes monthly enrollment numbers appear lower than funded enrollment because Migrant/Seasonal Head Start enrollments are calculated cumulatively).

Making Sure Head Start Programs Meet Their Funded Enrollment by Creating a Clear and Simple Enrollment Process

To ensure that Head Start programs provide comprehensive services to the maximum number of eligible children and families and to ensure that publicly funded program dollars are well-spent, NHSA strongly supports the efforts of Head Start providers to meet the enrollment requirements in the Act. The Act includes both a requirement for 100 percent “funded enrollment” at Sec. 642(g) and sanction for chronic under-enrollment. The Secretary may define a Head Start agency with actual enrollment below 97 percent of its funded enrollment after 12 months as “chronically under-enrolled” (Sec. 641 A(h)(5)(A)). Funded enrollment is defined at Sec. 641A(h)(1)(C), and actual enrollment is defined at Sec. 641A(h)(1)(A).

NHSA recommends that the Office of Head Start:

- ✓ Clarify the various elements of enrollment and its processes (including what chronic under-enrollment means) in the regulations.
- ✓ Make clear the definition of enrollment vacancy and ensure that programs continue to be allowed a specific period of time to replace children during which slots are considered enrolled (such vacancies do not reduce actual enrollment). We believe that the existing regulations regarding 30-day or 60-day enrollment vacancies are consistent with the Act and recommend that they continue to apply.

Providing Flexibility for Head Start Programs Regarding Non-Federal Share

By statute, Head Start programs receive 80 percent of their funding from the federal government and must include a non-federal share of not more than 20 percent. The non-federal share may be in cash or in kind, fairly evaluated, including plant, equipment, or services (Sec. 640(b)). Unfortunately, recession-induced state and local budget cuts have made it much more difficult for Head Start to meet the 20 percent

matching share. Indeed, the challenges of finding local non-federal matching funds have grown. Many potential community partners for Head Start programs like AmeriCorps programs and the Federal Work Study programs already contain a local match – but currently none of these partnerships can be counted toward non-federal share since they are in part funded with federal dollars.

NHSA recommends that the Office of Head Start:

- ✓ Review and revise its regulations and Policy Clarifications on matching share to allow programs as much flexibility to define what is counted as a match.
- ✓ Make a practice of granting matching share waivers (allowable under the Head Start Act) regularly and speedily.

Ensuring that Homeless Children Are Enrolled in Head Start Programs in a Transparent, Practical Manner with Minimal Burden to the Children and Their Families

Under the Improving Head Start for School Readiness Act of 2007, homeless children are now eligible for enrollment in Head Start programs. Although the Act provides some flexibility on when documentation can be received for homeless children, the Head Start community needs additional clarity (beyond what is in the non-binding Policy Clarification guidance) on what can be counted as a homeless child’s documentation and proof of residency. In addition, homeless children are often in transitional situations which can lead to different service areas (a homeless family moving from shelter to shelter, for example).

NHSA recommends that the Office of Head Start:

- ✓ Include by regulation a signed certification from a parent or guardian attesting to the fact that the child is homeless. It could have checkable boxes like school systems do, listing all of the options for homelessness under the McKinney Vento Homeless Assistance Act definition; then the parent can check off boxes that apply to his/her child’s situation. Homeless families should be given 90 days to provide all necessary documentation.
- ✓ Deem homeless children eligible to attend a Head Start program for the duration of their eligibility period (the year their eligibility is determined and the following year). A homeless child should not be dropped (or expelled) from Head Start because their homeless family moves to another service area.

- ✓ Provide training and technical assistance about the McKinney Vento Homeless Assistance Act's requirements and the Head Start program's responsibilities in meeting the requirements.

Preventing Hardship to Head Start Programs by Permitting Three-Year Renewable Waivers for the 10 Percent Enrollment Requirement for Children with Disabilities Throughout their history, Head Start programs have served in an inclusive manner millions of children with disabilities. The Act requires that the Secretary shall establish policies and procedures to assure that not less than 10 percent of the total number of children actually enrolled by each Head Start agency and each delegate agency will be children with disabilities who are determined to be eligible for special education and related services, or early intervention services, as appropriate, as determined under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.), by the State or local agency providing services under section 619 or part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

Unfortunately, there are some Head Start programs that cannot meet the 10 percent requirement, despite their best recruitment efforts, due to myriad community issues, including increasingly more narrow definitions of disability by Local Education Agencies (LEA). For those programs, the Act empowers the Secretary to establish policies and procedures to provide waivers of the disability requirement "for not more than three years" (Sec. 640(d)(4)).

NHSA recommends that the Office of Head Start:

- ✓ Issue regulations that clearly explain that these three-year waivers can be renewable. However, some programs are unable to meet this requirement because of demographics of the community and other reasons.
- ✓ Allow children receiving disability services from an LEA to count toward a Head Start program's disability percentage.
- ✓ Ensure that the Head Start monitoring system does not penalize Head Start programs if they are unsuccessful in partnering with LEAs, as long as the program documents its efforts to establish MOUs.
- ✓ Provide response to intervention training.
- ✓ Recognize that Head Start programs collaborate with LEA's and Part C agencies to provide services to children with disabilities and Head Start programs should not be penalized for failing to meet timelines to provide services of children with disabilities if the local and state agencies are responsible for the timelines not being met.

Providing Slot Conversion Regulations That Best Meet the Community's Needs

A major strength of Head Start programs is that they are community-based, and their services are tailored to meet the needs of their specific communities. Recognizing this strength, federal lawmakers approved language in the Head Start Act that allows for conversion of part-day programs to full-working day programs and the conversion of part-day slots to full-working day slots. Moreover, the Act allows Head Start slots to be converted to Early Head Start slots. The American Recovery and Reinvestment Act of 2009 ("ARRA") does not negate the statutory language in the Head Start Act on slot conversion, nor change the need for certain programs to request conversion.

NHSA recommends that the Office of Head Start:

- ✓ Create a quick and easy process to convert part-day programs to full-working day programs, part-day slots to full-working day slots, and Head Start slots to Early Head Start slots when Head Start programs can justify their conversion request. This process must provide programs with flexibility and authority to make these conversions from year-to-year to respond to changing community needs and conditions.
 - Conversion of Part-Day to Full-Day Services:
 - Programs should be provided with training and technical assistance and resources to help them develop a conversion plan and convert slots.
 - Conversion of Head Start to Early Head Start Slots:
 - Create a streamlined or expedited application process for converting Head Start slots to Early Head Start slots for grantees or delegate agencies already serving Early Head Start children.
 - Permit programs converting Head Start slots to Early Head Start slots to serve fewer children because serving infants and toddlers is significantly more expensive than serving three- and four-year-olds and to negotiate the start period for serving infants and toddlers so that there is sufficient planning time for providing best services to these children.

Ensuring that Data Confidentiality Is Implemented Pragmatically in Head Start Programs

Head Start programs are data-driven organizations. The Office of Head Start collects data from programs to ensure that each meets the Head Start Program Performance Standards and to make policy decisions regarding the financial management and operation of these programs. Head Start programs compile and use data to track child outcomes and to meet their rigorous monitoring requirements.

NHSA recommends that the Office of Head Start:

- ✓ Carefully examine the extent to which FERPA requirements are compatible with how data are collected and used in Head Start and draft data confidentiality regulations in a manner appropriate to the specific nuances of how Head Start programs operate.

Ensuring that Head Start Programs Can Effectively Continue to Provide Needed Services to Children and Families Living in Rural Areas

A large proportion of our nation's children and families live in rural areas and need Head Start services. Rural areas pose unique challenges for Head Start programs. The challenges include: families living far apart from each other, small numbers of families in a service area, scarce community resources, difficult access to college and university offerings of early childhood degrees and credentials, and sometimes few medical doctors and dentists in a service area.

To address these challenges, NHSA recommends that the Office of Head Start:

- ✓ Make special accommodations for rural programs when revising the Head Start Program Performance Standards by allowing for a waiver process for rural programs that have "unique challenges" (Sec. 641A(a)(2)(B)(x)), and are having difficulties recruiting teachers with baccalaureate degrees.

Strengthening Head Start's New Assessment System

The Head Start Act requires that the Secretary develop a new child assessment system in consultation with national experts and the Head Start community. This system will consist of measures and scientifically based and developmentally appropriate education performance standards related to school readiness that are based on the Head Start Child Outcomes Framework to assess the development of children attending Head Start programs.

NHSA recommends that:

- ✓ The Office of Head Start involve the National Head Start Association in the development of this system and take into account the Act and the National Academies' Report on Developmental Outcomes and Assessments for Children Aged Zero to Five.

Creating an Accountable Re-Designation or Re-Competition System for Head Start Grant Renewal

The Act requires that the Secretary shall develop a system to determine whether a Head Start grant shall be subject to re-competition. The Office of Head Start convened an expert panel which released its report and recommendations about the creation of such a system. The Office of Head Start's next step is to propose regulations to create and implement such a system and present these draft regulations for public comment.

NHSA recommends that:

- ✓ The Office of Head Start ensure that the re-competition process is fair, transparent, streamlined, and not burdensome to programs.

MIX OF LEGISLATIVE AND ADMINISTRATIVE CHANGES

This section contains policy changes that can be made through the implementation of legislation and federal regulations or guidance.

Ensuring Quality Workforce in Head Start Programs Is Essential to Helping Maintain the Quality of Head Start Programs

Human resource managers in business and governmental organizations have long recognized the importance of having excellent human capital to enable their organizations to thrive. Federal lawmakers recognized this need when they enacted the Improving Head Start for School Readiness Act of 2007. The Act mandated that Head Start programs require their teachers and staff to have certain educational degrees and credentials and to undergo background checks. The Act at Sec. 648A(a)(2)(A)(ii) also permits Head Start programs to provide financial assistance to Head Start teachers to pursue a baccalaureate or advanced degree in early education or a baccalaureate or advanced degree, coursework equivalent to a major relating to early childhood education, and "experience teaching preschool-age children." After completing their Head Start-funded degrees or completing their coursework, these individuals must teach or work in a Head Start program for a minimum of 3 years or repay the total or a prorated amount of the funds received based on the length of service to the Head Start program (Sec. 648A(a)(6)). In addition, many Head Start teachers and staff have a high student loan debt load because they have borrowed funds through federal student loan programs to help them obtain baccalaureate degrees, and they are eligible for federal loan forgiveness programs. Unfortunately, these programs are not well-funded.

NHSA recommends that the Office of Head Start:

- ✓ Let individual programs define “experience teaching preschool-aged children” in their own policies and then follow their policies.
- ✓ Provide training to teachers and staff on how to work with special populations.
- ✓ Issue regulations to improve the ability of Head Start programs to conduct background checks by making the process more efficient and timely.
- ✓ Define a maximum caseload for a full-time family service worker that is practical and reasonable and allows the FSW flexibility to work with differing needs of families. Also provide guidance on family service worker training, such as for case management, crisis management, experience working with adults/adult education, cultural competency, reflective practice, mentoring/coaching skills, motivational interviewing, dealing with the change process, and working with special populations.

NHSA recommends that Congress and President Obama approve legislation to:

- ✓ Expand access for Head Start teachers and staff to participate in federal student loan forgiveness programs by appropriating adequate funds.

Promoting Collaboration and Coordination of Early Childhood Programs by Ensuring Clear Legislation and Guidance about How and When a Memorandum of Understanding (“MOU”) with a Local Educational Agency Must Occur

We strongly support increased collaboration and coordination among Head Start programs and Local Educational Agencies (LEAs). Increased collaboration and coordination can lead to more efficient uses of community resources and encourage policies that strengthen the ability of parents to transition their children from Head Start to kindergarten. The Head Start reauthorization intended to accomplish this by requiring Head Start programs to enter into MOU’s with LEAs. If, however, the LEA is “unable or unwilling to enter into such a memorandum” then the Head Start agency is required to notify ACF and the State Collaboration Director (Sec. 642(e)(5)(B(ii))). However, there is no corresponding requirement for LEAs and as such, the MOUs do not always work as intended.

NHSA recommends that the Office of Head Start:

- ✓ Explain in regulation how and when notification to the Office of Head Start must occur and what criteria it will consider in its determination of unable or unwilling.

And that Congress include in appropriate legislation:

- ✓ A reciprocal requirement for school districts receiving Title 1 funding regarding entering into MOUs with local Head Start agencies unless the local Head Start agency is “unable or unwilling to enter into such a memorandum.”

Supporting the Development of State Early Learning Systems

President Obama proposed investing new funds to provide incentives to states to develop or strengthen state early education and learning systems. House Education and Labor Committee Chairman George Miller proposed ELCF legislation to provide competitive grants to states to build a comprehensive, high quality early learning system for children aged birth to five. The House approved an ELCF bill that would provide \$1 billion per year for eight years for these competitive grants to states. The House legislation would create two categories of grants: Quality Pathway Grants and Development Grants. The House legislation has a maintenance of effort provision to ensure that the state does not decrease funding for early education, encourages the development of Quality Rating Systems (QRSs), and provides an important role for the State Advisory Councils on Early Childhood Education and Care. In the Senate, there is also ELCF legislation under consideration. The Senate ELCF legislation has many of the provisions of the House bill.

NHSA recommends that:

- ✓ Congress and President Obama support the passage of ELCF legislation to provide competitive grants to state to build a comprehensive, high quality early learning system for children aged birth to five as long as the provisions in the Senate bill regarding the maintenance of effort and Head Start participation on the State Advisory Councils on Early Childhood Education and Care are maintained.
- ✓ The Office of Head Start provide leadership and technical assistance to the Head Start community on how to position Head Start Program Performance Standards favorably within state QRSs.

Because we remain committed to serving all segments of the Head Start community including the Migrant/Seasonal Head Start and American Indian/Alaskan Native Head Start programs, the National Head Start Association thanks all of its members and others who were involved in the formulation of this policy agenda. For any questions or comments concerning the agenda, please contact Yasmina Vinci at yvinci@nhsa.org or Ben Allen at ballen@nhsa.org.