Measuring Compliance and Continuous Improvement: Toward Excellence for Head Start

Head Start Monitoring Task Force Proposal
October 2012
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Measuring Compliance and Continuous Improvement: Toward Excellence for Head Start and Federally Funded Child Care

The Head Start Program

Head Start, since its birth 48 years ago, has demonstrated creativity, innovation and capacity for rapid implementation and expansion. As a high quality, standards-based early learning program, Head Start has led the development of what is now called the early learning continuum and has influenced the development of Pre-K and Quality Rating and Improvement Systems (QRIS) programs. Building on the program’s proud history, it is important that Head Start plays a leadership role in efforts to define high quality service delivery and to ensure both compliance and excellence in serving young children.

Head Start and Early Head Start programs serve nearly a million young children and their families each year as part of America’s investment in comprehensive early childhood care and education for vulnerable children. These programs embrace accountability and the mission to provide high quality services to the children in their charge. Their efforts are overseen at the federal level by the Office of Head Start in the Administration for Children and Families and by the Office of Management and Budget; at the state level by QRIS, child care licensing agencies, workers’ compensation agencies and more; and at the local level by various regulatory agencies. While these monitoring systems are intended to make sure standards of care are met, their work is often duplicative and inefficient.

Birth of the Task Force

At a time when efficiency and effectiveness of monitoring are a focus across government agencies, the National Head Start Association (NHSA) led the development of a Monitoring Task Force to engage the Head Start field in a conversation about monitoring reform both for Head Start and for the larger realm of early childhood care and education. The Task Force was encouraged in its efforts by Linda Smith, Deputy Assistant Secretary and Interdepartmental Liaison for Early Childhood Development for the Administration for Children and Families (ACF), who welcomed suggestions of innovative, cost-effective and efficient approaches to monitoring across Head Start and child care. The Task Force was encouraged by Ms. Smith to consider “out of the box” options which might best serve the goals of ensuring compliance with laws and regulations as well as providing structures to encourage top quality services.

The Task Force committee thanks Ms. Smith for her leadership and openness to working with the Head Start community and the early learning community. Embracing and implementing these proposals will help create a brighter, less stressful future for Head Start programs and will also improve the lives of children and families.

Community Survey

The Task Force began by surveying the Head Start field - administrators, staff members, and parents - about the strengths and weaknesses of the current system and tools as well as how parents participate in those systems. Nearly one thousand responses were gathered. The most frequent feedback from participants was that while the Head Start monitoring system is effective at achieving health and safety for children, it is also inconsistent and often slow, and fails to support grantees in need of improvement. Administrators also reported that monitoring reform should prioritize consistency and recognition of excellence.

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1 For the purposes of this paper “Head Start” is inclusive of Early Head Start, American Indian/Alaskan Native Head Start, Migrant and Seasonal Head Start, and the many creative and complex program models including home visiting and family child care partnerships.
Issues & Principles

After reviewing the field surveys, the Monitoring Task Force identified the following concerns as the basis for a critical overhaul of the Head Start Monitoring System:

1. Monitoring is currently driven by compliance; it does not acknowledge, reward, or encourage improvement and excellence.
2. The system is not applied consistently across all regions, cultures, and individual programs.
3. Reliance on high-stakes triennial reviews has led to "teaching to the test" and dangerous three-year gaps in oversight.
4. The system includes expensive redundancies and does not integrate well with other early learning programs.
5. The vast amount of data collected is not effectively utilized or analyzed for program improvement.

Consequently, the Monitoring Task Force considered ways to create a system that:

1. Ensures accountability and compliance to federal administrators, while promoting accountability and excellence to communities.
2. Is consistent across regions and considers the varied needs of different populations.
3. Incorporates data from existing state and local systems, including licensing and QRIS, to avoid unnecessary duplication of effort.
4. Quickly and deftly responds to the training and technical assistance needs of programs.
5. Ultimately ensures the highest quality service to children and families as efficiently and effectively as possible.

The Task Force has worked to make recommendations inclusive of Head Start, Early Head Start, Migrant/Seasonal and American Indian/Alaskan Native programs, as well as the complete array of settings and service delivery models across the continuum of early childhood care and education.

Purpose of the Proposal

The purpose of this paper is to stimulate learning, discussion, and thinking, while ensuring the Head Start community’s participation in the ongoing, national discussion of how to improve the definition and monitoring of quality and accountability in all early childhood settings – including Head Start. This paper reflects the ideas, thinking and work of a broadly constituted Task Force.

Proposal

The Office of Head Start (OHS) supports grantees, ensures program compliance and promotes excellence. Through its critical role of creating regulations, policies and standards, OHS creates the foundation that defines Head Start through compliance with the Performance Standards. The Task Force expects OHS to continue in this role. With the intent of improving both compliance and the pursuit of excellence, the Monitoring Task Force proposes that the current monitoring process be replaced by two distinct but connected systems. The first, Program Standards and Performance Auditing, would ensure program compliance with the Head Start Performance Standards using three major monitoring tools. The second, the Certification System, would create an objective body to define high

\[2 \text{ formerly referred to as a "Joint Commission for Performance Certification," language has been changed to reflect the intent that this be a new system} \]
quality programming and certify the level of quality programs are providing. These systems would incorporate monitoring data at the local, state and federal levels and reduce duplication of effort. Eventually, these could replace the triennial review, leading to a more balanced approach to monitoring programs that also positions Head Start, locally and nationally, as an accountable and energetic partner in the early learning and child development spectrum.

Program Standards and Performance Auditing

Every day, Early Head Start and Head Start programs are held to explicit, high-quality standards - and meet them. Compliance with these standards is necessary for the health and safety of children, but the Task Force recommends several changes that will reduce duplication of monitoring components and support targeted training and technical assistance for the programs that need it most. The Task Force recommends the creation or expansion of three monitoring tools, to be overseen by OHS. They are: a) increased web-based documentation of program data and outcomes using a “dashboard,” b) expanded use of auditing and annual assurances, c) on-site monitoring visits.

Dashboard and Document Review

The Task Force sought an alternative approach to determining accountability of Head Start and Early Head Start grantees and is convinced that the use of a “dashboard” of measures, reported regularly, provides a great tool both for agency management and for the Office of Head Start (OHS) to monitor performance on critical measures. For management, this tool enables early gap identification and ready adjustments in order to improve performance. For OHS, the tool provides a quick view of performance and a basis from which to request additional information if numbers are falling below designated targets. For both, the dashboard becomes the basis for further discussion and action planning.

There are national and state examples of this “Dashboard” approach in identifying key indicators. California’s New Directions Approach (New Directions CA CCLD, 2012) is developing key indicators for all their human services as part of a comprehensive study undertaken by the Institute of Social Research at the California State University at Sacramento. Another thorough and well-documented approach is being undertaken in the State of Washington in their Office of Early Learning, regarding child care (Hyde, 2011).
At the national level, the National Association for Regulatory Administration (NARA) uses a Key Indicator Approach in their Licensing Curriculum (2000) and has a portion of their website focusing on this approach (NARA, 2012); the National Association for Child Care Resource and Referral (NACCRRA) has used a key benchmarking approach that builds upon the “Key Indicator” methodology and has published bi-annual report cards on how well the states meet these national benchmarks (NACCRRA, 2007, 2009, 2011) for centers and homes (NACCRRA, 2008, 2010, 2012); and the National Resource Center for Health and Safety in Child Care (NRC) has developed a focused set of standards from a much larger and more comprehensive set of standards called Stepping Stones (AAP/APHA, 1995).

In addition to the Dashboard and CSI data being used for ongoing risk management assessment and program improvement, the Task Force recommends that OHS create a web-based system to document program outcomes, starting with school readiness and family engagement outcomes. This web-based system would make it possible to create data-based national, regional and state reports documenting the effectiveness of Head Start programs. This system could be designed to interact with state-based longitudinal data systems and to accept data from programs’ data management systems. This would reduce the data entry workload for programs. It would also create a uniform method for importing Head Start data into state longitudinal data systems.

Ultimately, OHS will determine which indicators they want to have grantees track. The work below illustrates one possible approach.

Creating a “Dashboard”

In strategic planning, best practices for successful implementation include the creation of a set of measures, identified as Critical Success Indicators or CSIs. CSIs are a small number of measures (7-12) that lend themselves to being tracked on a regular basis. Generally managers track these at least once per month. This enables them to look at current performance measures in relationship to expected results for that time period and fosters proactive efforts to bring the CSIs in alignment with the identified goals. The array of CSIs form a “dashboard” by which to manage the program as well as a tool by which to monitor performance.

CSIs are major indicators. CSI that are outside an expected range will raise the need for more data gathering and analysis to determine the significance of and reasons for the difference.

This approach should be used to constantly track Head Start and Early Head Start performance. The Task Force recommends that a common set of CSIs be established that could be reported in a single one or two page electronic report to the Office of Head Start (simultaneously to Washington DC and the appropriate regional office). The CSIs selected for this purpose would need to be a carefully determined combination of the important and easy to measure as well as some that may be a bit more difficult to measure, but that are also very important. We must be cautious to avoid measuring that which is easiest to measure instead of that which is most important.

The Task Force’s expectation is that tracking of key performance numbers on a constant and regular basis would make triennial reviews much less important and expensive. The triennial review might ultimately be dropped, and at the very least team size and duration of a visit could be dramatically reduced. Monitoring funds could then be directed primarily toward strengthening the monitoring of agencies with inadequate numbers being reported to the Office of Head Start or other concerns.
Recommendations for Implementation

The following are the Task Force’s proposed guidelines for the creation of Critical Success Indicators (CSIs) and suggested CSIs for OHS’s consideration. Although OHS will be the final arbiter of measures, these guidelines and indicators are based on key components of what is known to make a dashboard function well.

1. A small number of indicators is reported...not everything measured locally, but critically important indicators. When an indicator is higher or lower than anticipated, this raises the need for a deeper look at what is causing that number to deviate from projections and initiates actions to bring the numbers in alignment with targets. For example, if average daily attendance is down, the management team would look at attendance for individual classroom and centers to identify the source of the shortfall, and develop immediate steps to bring the attendance figures up. In this way, CSIs are a useful tool for managers, Board and Policy Council Members and OHS funders to monitor the success of a grantee on a regular basis.

2. Suggested CSIs are noted as quarterly or biannual numbers to be reported to OHS. Some may be tracked and reported less frequently (such as parent satisfaction or the PIR, an annual snapshot). Others may be studied weekly by the grantee as a management tool, as in the example above about attendance.

3. A key best practice in the use of CSIs and a dashboard is to measure not just that which is easiest to measure (such as attendance or enrollment), but that which is most important to be measured (i.e. child or family outcomes). Some CSIs are included early in the process even though the actual means of measuring is still being developed, in order to keep them in the forefront of investment. In the sample below, this is the case with school readiness outcomes and family service outcomes. Appropriate measures in these areas have yet to be designed, but achieving these outcomes is at the heart of Head Start’s purpose.

4. The items below would most likely be reported quarterly to OHS. Sub-indicators might NOT be included in a quarterly report, but could help shape that report.

5. In order to ensure the accuracy of these figures, under the A-133 Audit the Office of Head Start could direct auditors to review the back-up documentation for CSI reporting. This is already done when looking at the Form 425.

6. The Task Force suggests that the Head Start Enterprise System or a new web-based site be the recipient of these reports. All Head Start grantees already access the Enterprise System.

7. Attention will need to be paid to the development of technology/web-based software that would be required to collect, assemble and report this data on a local level. The investment here could be covered out of only a small portion of the dollars spent annually on the current monitoring system. These investments would be a one-time expense rather than major sustained ongoing technology expenditures. In addition, this web-based system would make it possible to create data-based national, regional and state reports documenting the effectiveness of Head Start programs. This system could be designed to interact with state-based longitudinal data systems and to accept data from programs’ data management systems. This would reduce the data entry workload for programs. It would also create a uniform method for importing Head Start data into state longitudinal data systems.
8. The information in number 11 below would also be tied to the proposed use of Stepping Stones in tracking matters of health and safety.

**Proposed Critical Success Indicators**

The Task Force’s proposed indicators and timeline appear in the table below. For programs reporting data, if numbers were at or beyond targeted levels, no explanation would be required. If numbers fell under targeted levels, an explanation and an improvement plan would be submitted along with the quarterly report.

<table>
<thead>
<tr>
<th>Proposed Indicator</th>
<th>Frequency of Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Average daily attendance for the month (Center-based HS or EHS) and percentage of planned contacts delivered (for Home-based HS or EHS)</td>
<td>Quarterly with Monthly Breakdown</td>
</tr>
<tr>
<td>2. Percentage of full funded/authorized child enrollment</td>
<td>Quarterly with Monthly Breakdown</td>
</tr>
<tr>
<td>a. Percent of turnover of enrolled children</td>
<td></td>
</tr>
<tr>
<td>b. Total number of children vs. funded enrollment to date</td>
<td></td>
</tr>
<tr>
<td>c. Percentage of completion of locally-defined recruitment priorities</td>
<td></td>
</tr>
<tr>
<td>3. Percentage of children meeting necessary health targets</td>
<td>Quarterly</td>
</tr>
<tr>
<td>a. Percent of children with established medical homes</td>
<td></td>
</tr>
<tr>
<td>b. Percent of children with established dental homes</td>
<td></td>
</tr>
<tr>
<td>c. Percent of children with health coverage</td>
<td></td>
</tr>
<tr>
<td>d. Percent of children with complete health records</td>
<td></td>
</tr>
<tr>
<td>4. Budget to actual targeted expenditure levels for the month</td>
<td>Quarterly</td>
</tr>
<tr>
<td>5. Percentage of non-federal share raised (budget to actual)</td>
<td>Quarterly with Monthly Breakdown</td>
</tr>
<tr>
<td>6. Percentage of non-federal share raised (budget to actual)</td>
<td>3 times Annually (Pre/Mid/Post) Reported with the Quarterly Report</td>
</tr>
<tr>
<td>Percentage of Child Outcomes targets achieved</td>
<td></td>
</tr>
<tr>
<td>a. Percent of children meeting school readiness benchmarks (to be defined)</td>
<td></td>
</tr>
<tr>
<td>b. Percent of children who have received follow-up early intervention services based upon screening results.</td>
<td></td>
</tr>
<tr>
<td>c. Percentage of classrooms meeting classroom measurement goals (CLASS or equivalent measure).</td>
<td></td>
</tr>
<tr>
<td>7. Percentage of Family Engagement targets achieved</td>
<td>Quarterly</td>
</tr>
<tr>
<td>a. Percent of families with family engagement goals identified</td>
<td></td>
</tr>
<tr>
<td>b. Percent of Family Partnership Agreements completed</td>
<td></td>
</tr>
<tr>
<td>c. Percent of families meeting family outcomes (to be defined)</td>
<td></td>
</tr>
<tr>
<td>d. Percent of fatherhood or male involvement (to be defined)</td>
<td></td>
</tr>
</tbody>
</table>
### Proposed Indicator

<table>
<thead>
<tr>
<th>Proposed Indicator</th>
<th>Frequency of Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. Human resources</td>
<td></td>
</tr>
<tr>
<td>a. Percentage of turnover of staff</td>
<td>Quarterly</td>
</tr>
<tr>
<td>b. Percentage of senior manager turnover.</td>
<td></td>
</tr>
<tr>
<td>c. Percentage of staff meeting required staff qualifications and or degrees</td>
<td></td>
</tr>
<tr>
<td>i. Number of staff with ECE degrees, either at the AA or BA level.</td>
<td></td>
</tr>
<tr>
<td>ii. Family service target (to be defined).</td>
<td></td>
</tr>
<tr>
<td>d. Percentage of staff with a minimum of 24 hours of in-service training/year.</td>
<td></td>
</tr>
<tr>
<td>9. Parent satisfaction ratings</td>
<td>Biannual</td>
</tr>
<tr>
<td>10. Number and percentage of children transported</td>
<td>Quarterly</td>
</tr>
<tr>
<td>11. Compliance with licensing rules, QRIS standards, and accreditation criteria (NAEYC or NECPA). Good indicators of how well a program is meeting health and safety standards and general program quality standards are defined by QRIS and Accreditation systems. Grantee will identify which standards they are subject to and their level of compliance. (Measurement and targets to be developed.)</td>
<td>Biannual</td>
</tr>
</tbody>
</table>

### Program Performance Auditing

Head Start programs are required to undergo numerous audits outside of Office of Head Start monitoring, including but not limited to:

1. Annual A-133 audit by an independent CPA/auditor
2. Review of A-133 audit by the Office of Management and Budget (OMB) Federal Audit Clearinghouse
3. USDA monitoring site-based audits
4. State and local inspections and audits

Each year, the Office of Head Start (OHS) makes recommendations to the Office of Management and Budget (OMB), which in turn puts out guidance for Head Start fiscal auditing. For most programs, the appropriate type of audit is an A-133, though the process varies for American Indian/Alaskan Native programs, programs run by institutions of higher learning, or other programs with specialized circumstances. Head Start programs then have audits conducted by independent auditors. To date, mandatory components of these audits have focused on areas of fiscal compliance, but the compliance supplement from the Department of Health and Human Services has included guidance in the Special Tests and Provisions section through which programs can be audited more broadly in areas including the minimum weeks of service, governing body, and medical and dental services.
Proposed Changes to Implementation

The Monitoring Task Force recommends that the Office of Head Start expand the guidance for audits of Head Start programs to include the additional areas of evaluation that are currently optional as well as others that can be examined by an auditor. These may include ERSEA procedures, enrollment of children with disabilities, submission of information to the Dashboard, USDA audits of food programs, and other areas deemed appropriate by OHS. The Task Force also recommends that OHS provide detailed explanations or training opportunities for auditors to ensure they have a deep understanding of the purpose and function of Head Start programs.

Potential Benefits

After initial implementation, expanded program performance auditing offers an opportunity for OHS to reduce the amount of time and energy invested in on-site triennial reviews by providing annual, independent documentation of each program’s performance. In the immediate future, fiscal representatives on monitoring teams will not be necessary because the effectiveness of auditors for evaluating programs’ finances is already clear. While some of the cost savings in reducing triennial reviews would be offset by increased program costs for audits, the Task Force believes the OMB A-133 compliance supplement would offer a more effective and efficient way of monitoring programs. A proposed model of the new auditing timeline appears in Figure 2.

Recommendations for Implementation

The details of implementation of program performance auditing are key to the success of this initiative. Task Force recommends the following steps to OHS:

1. Involve stakeholders in designing an expanded compliance supplement applicable both to A-133 audits and other types of common program audits.
2. Provide guidance for auditors unfamiliar with Head Start.
3. Create a procedure for timely review of audits and follow-up for programs with findings to address issues, support programs in resolving them, and take action if necessary.
4. Support regional offices in disseminating clear and consistent T/TA to programs about the changes to the auditing process.
5. Consider the varied needs of Tribal programs and those not typically evaluated with an OMB A-133 audit.

On-Site Monitoring Visits

The Task Force proposes that OHS require annual health and safety inspections to assess compliance with health and safety standards. On-site visitation is an important, useful, yet costly way to gather information and determine performance. As the Dashboard and A-133 monitoring tools would already have reviewed many aspects of program function, under the proposed system health and safety could be assessed annually with smaller, more efficient teams than current triennial reviews require or substituted by state or local inspections. The Task Force also recommends that additional and/or unannounced visits be conducted for grantees when areas of concern are identified by the various tools for compliance monitoring.

Figure 2. Audit Cycle
Health and Safety Standards

Health and Safety standards mean different things to different parts of the Early Learning Community. Head Start’s definition of Health and Safety Standards is narrower than that of the Stepping Stones standards developed by the American Academy of Pediatrics and used on a voluntary basis by the Child Care community. The Head Start Health and Safety standards overlap with the Stepping Stones standards in some areas but not others; the Stepping Stones standards are more comprehensive overall and cover content areas that are not part of the Head Start Health and Safety standards, however they do not address Family Engagement and Mental Health.

The Stepping Stones and Head Start Performance Standards Crosswalk aligns the 2nd edition of Stepping Stones and the Head Start Standards and analyzes their common areas. Almost all of the Stepping Stones standards have equivalent standards in Head Start. Stepping Stones is in revision and the 3rd revision will be completed in the Spring of 2013; a national conversation is on-going about how to operationalize the revised standards as part of child care monitoring nationally.

Recommendations for Implementation

The Task Force supports the goal of using Stepping Stones as a national standard process for assessing the basic quality of early learning programs. In the near future, the Task Force supports the use of the Stepping Stones tool for annual Health and Safety visits done by Head Start regional offices. In the long-term, implementation of cross-sector monitoring with the Stepping Stones tool may make best use of resources across the early learning system.

The Task Force was pleased to discover that the Stepping Stones 3rd Edition Methodology Committee has decided to create two levels of Stepping Stones – one similar to the current version and a second more stringent/shortened set to use as indicators. Within the Head Start standards, the Task Force supports the development and use of benchmarks and indicators as they relate to Health and Safety and Stepping Stones. Once CSIs and benchmarks are developed they can be used for differential monitoring, improved TA and program quality.

Hopefully over time the Stepping Stones standards will be the basis for systemic changes and improved quality of services to all young children.

Summary

The Task Force believes that the dashboard risk management tool, combined with the expanded performance audits and annual health and safety visits will if meet many if not all of the requirements for reviewing programs for compliance with the Head Start Standards. The need for triennial monitoring visits will be greatly reduced if not eliminated.
Adoption of these three tools would enable OHS to continually monitor program compliance and target technical support immediately to grantees showing signs of risk. This will allow OHS to use resources as efficiently and effectively as possible.

**Certification System**

In addition to compliance, the Head Start field survey identified a strong need to recognize and encourage high quality service. The Task Force recognizes that excellence is an important issue to everyone in the early childhood care and education field. In an effort to achieve an integrated system, the Task Force proposes that the National Head Start Association (NHSA), the National Indian Head Start Directors Association (NIHSDA), the Migrant/Seasonal Head Start Association (MSHSA), the Office of Head Start and partners working to serve young children at the community, state and national levels collaborate to create a Certification System that recognizes high quality programming.

While that diverse group would design the implementation of the Certification System, the Task Force offers the following suggestions for how Head Start be incorporated and how the Certification System could integrate current Head Start monitoring.

**Setting Standards and Integrating Systems**

In collaboration with OHS and early childhood stakeholders, the Certification System would create a model identifying progressive degrees of quality. The performance certification design would develop a clear and logical protocol for certification levels based on an integration of Head Start standards, early childhood accreditation, and quality ratings systems. This approach would provide applicants with information and benchmarks for reaching and exceeding minimum compliance levels. It is assumed that the certification tool would use a standard progressive matrix. (See Addendum B.)

The Head Start Program Performance Standards define what is required of a Head Start program. The Task Force recommends that the Certification System and partners carefully analyze the standards to gauge how they could help define levels of certification and rubrics for quality.

The Certification System would develop a crosswalk to support the ready articulation of assessment, validating and licensure processes into the proposed certification process. The Certification System would also assume the responsibility of communicating and negotiating with the owners, licensees and others responsible for the development and integrity of instruments and processes for certifying levels of program quality. Since the advancement of an integrated system is a core goal of the proposed certification process, communicating with state associations, institutions and organizations is key.

**Head Start Certification Implementation and Excellence**

It is hoped that over time, and with more discussion, the Certification System would replace the current on-site federal review process for Head Start; greatly reduce duplication of local, state and federal inspections; and could be a “low to no cost” alternative to current Head Start monitoring.

The Task Force imagines a system where grantees participating in the certification process would submit ratings, inspection reports and licenses. Based on the crosswalk articulation, the grantee would receive aggregate scores for areas of performance. Standard articulations might include: CLASS scores, Environmental Rating Scale scores, Program Admin-
istration Scale scores, NAEYC Accreditation, NAFCC Accreditation and others. Assessments would be conducted by an independent party in the case of CLASS, ECERS, etc. Monitoring teams from the certifying organization would conduct on-site review of areas of the standards not already addressed by a previous license or assessment. The Certification System and stakeholders will determine during the creation process the distinct processes and timeline for certification.

A fundamental function of the proposed certification process is promotion of continuous improvement toward excellence in the work done by Head Start and other organizations serving young children and their families. The Certification System would acknowledge a program’s strengths with certification.

Grantees would then have an opportunity to review their scores and establish a T/TA plan targeting areas of weakness or of desired excellence and using the rubric of the proximal performance level in those areas as a goal. Once the goals are achieved, grantees could request follow-up visiting to support higher performance certification.

This trajectory toward ever-improving quality holds programs accountable not only to the Office of Head Start but to the children and families who rely on Head Start programs for a wide range of high-quality services.

Adopting a Certification System affords Head Start and the early learning community opportunities to systematically coordinate, maximize resources and inspire improvements in quality. It will be an excellent vehicle for continuing work to define high quality programming and assist all programs’ on-going efforts to improve their services and assist all programs’ on-going efforts to improve their services.

Figure 3. Performance Certification Cycle – This cycle is intended to be implemented, at least initially, over a period of three years, with on-site visits and certification occurring during the third year.
Implementation

The Head Start and Early Head Start monitoring systems have been redesigned numerous times over the past fifty years, always with the intent of improving quality but often in ways that are unintentionally complex and sometime punitive to programs. The intent of this proposal is the same, to improve quality, and also to reduce duplication that has been cumbersome in the past and to make monitoring straightforward and non-invasive for high performing programs.

Head Start Programs

Currently, Head Start and Early Head Start programs are inspected or evaluated multiple times each year by various state and local agencies and every three years through an intensive review by OHS. Under the proposed system, on-site federal monitoring would consist of brief annual reviews focused on health and safety; state and local evaluations would be incorporated in program certification; and data collection through the dashboard, once fully realized, would help programs with short and long term planning. Performance Certification would also recognize programs for excellence and offer clear rubrics for improvement.

Under the proposed system, each program would:

- Provide regular dashboard data based on Critical Success Indicators
- Submit an A-133 audit report as enhanced and directed by OHS to include targeted compliance data
- Undergo an OHS-directed annual health & safety review
- Verify compliance with local regulatory licenses & permits
- Engage in proposed certification process to determine quality level

These components would either continue existing practices or replace less effective current practices. By asking programs to work smarter, not harder, this proposal enables them to better serve children by encouraging best practices that already take place in high quality programs every day.

Child Care Programs

The work of the Monitoring Task Force was undertaken with the understanding that Head Start monitoring has long been a closed system, and that the ability to integrate with other systems would be desirable as part of reform. To that end, the Certification System is intended to be designed collaboratively with partners including child care representatives.

The Task Force has worked to be inclusive of child care and early learning in this proposal, and it recognizes that more work will needs to be done to create a truly integrated early learning certification system.

American Indian/Alaskan Native Head Start Programs

The Task Force did its best to make recommendations that can be implemented for all kinds of Head Start programs. The Office of Head Start needs to carefully consider these factors when discussing how to best implement the proposal with American Indian/Alaskan Native Head Start Programs.

The following section was submitted by the National Indian Head Start Directors Association (NIHSDA):

Tribal Sovereignty

The 154 Head Start grantees in Region XI are typically smaller programs with a large percentage serving less than 150 children and 10 or more which service 20 children and their families. AIAN Head Start programs are administered by
Federally Recognized Tribal Government all having a “Trust Relationship” with the Federal government and are recognized as Sovereign Nations within the 26 states which they are located. Indian Law must be taken into consideration when the Office of Head Start or any agency undertakes a redesign of the existing monitoring system which is required by the Head Start Act, as amended. Indian Law is based within the U.S. Constitution! Unannounced federal onsite reviews are not conducted due to the “government-to-government” relationship between the federal government and Sovereign Nations.

A number of Tribes are located in multiple states’ areas and as a result are located within multiple state jurisdictions that have no or limited jurisdiction within “Indian Country.” State jurisdiction in the early learning and child care field is non-existent for AIAN grantees. The majority of AIAN grantees are not state licensed.

**Federal Monitoring**

The National Indian Head Start Directors Association has an extensive history in advocating for an improved federal monitoring system and its efforts will continue until there is a fair and balanced approach for monitoring AIAN grantees implemented by the Office of Head Start. Crucial in any approach for monitoring AIAN grantees is a system that is culturally relevant, responsive and reliant. For AIAN programs, the Head Start Program Performance Standards should be used as the basis for assessing the quality of services provided by the AIAN grantees with no reliance upon state developed quality improvement systems. Many states have had little involvement of Tribal grantees operating within their state in developing and evolving their quality improvement systems. Furthermore, many of the 26 developing systems, as reported by the Child Care Bureau and NAEYC, need to take stronger action in incorporating culturally responsive and relevant practices as a quality indicator. NIHSDA is concerned with the variance of quality indicators across the affected 26 states. Unlike the non-Indian regional programs, AIAN grantees undergo a comprehensive health and safety assessment conducted by Indian Health Services or tribally administered environmental health services and NIHSDA does not see limiting the federal onsite review to only health and safety issues.

NIHSDA also considers one tri-annual federal review for grantee compliance with the Head Start Program Performance Standards is appropriate within a five (5) year funding cycle.

**Data Dashboard**

NIHSDA supports the recommendation for the Office of Head Start in capturing of the multiple data points that are submitted by Head Start grantees (Dashboard) after a thorough study in selecting the key indicators in which grantees will be assessed. The data collection system development must include cost estimates for implementing the dashboard.

NIHSDA does not support the use of the federal A-133 audit as a major key indicator because tribes conduct annual single agency audits and most often do not adequately provide a thorough fiscal and program audit of the AIAN Head Start/Early Head Start programs, but the audits meet the federal requirements. NIHSDA could support the A-133 audit findings as one of the many data elements of the Dashboard. The self-assessment should be part of the data elements to specifically measuring grantees’ success in meeting the Head Start Program Performance Standards.

Furthermore, AIAN grantees are not typically licensed by a state agency and undergo a health and safety inspection (more comprehensive that state inspection) through the Indian Health Service or tribally operated environmental services. The annual grantee self-assessment should be included in the Dashboard and would serve as a basis for the federal onsite reviews and could be used by OHS to target key indicators for conducting federal reviews. Federal reviews would serve to verify and document grantees’ compliance with the Head Start Program Performance Standards.
NIHSDA has grave concerns about the use of CLASS as a major key indicator on the Dashboard and the potential penalty of CLASS findings resulting in possible re-competition. The CLASS measures are not culturally and linguistically appropriate for American Indian and Alaskan Native children. Furthermore, the CLASS reviewers most often are not familiar with AIAN cultures and often apply inappropriate observations during AIAN grantee reviews.

If the Dashboard is to be used as a monitoring tool for both the Office of Head Start and grantees the Dashboard must be open to both end users for decision making unlike the Enterprise System: not all information is available for grantee use. Within the concept of this system communication is crucial for effective application both at the grantee level and federal level. Regional office staff and the grantees will require training on the use and function of the Dashboard.

**Monthly Reporting**

Many of the AIAN grantees will not be able to adequately meet a requirement for “monthly reporting” of these data elements determined to be part of the Dashboard due to the costs associated with data management, e.g., data collection and entry: thereby, potentially placing the grantees in possible jeopardy for non-compliance with reporting requirements let alone other issues of non-compliance and triggers for recompletion. NIHSDA suggests that “quarterly reporting” within this data collection system is more appropriate and would include the Program Information Reporting system (PIR). Including quarterly PIR reports would require an administrative change in requirements by the Office of Head Start.

**Accreditation System**

A three tiered accreditation systems is overly cumbersome and burdensome for AIAN grantees. NIHSDA does not support a layer approach to accreditation. NIHSDA could support a system for accrediting AIAN grantees based upon the Federal on-site review process and a requirement of a thorough “self-study” by the grantees. The self-study would be parallel to the required self-assessment and would be structured on quality service management outcomes. This system would be a parallel system developed in concert with NIHSDA, grantee representatives, and early childhood program evaluators.

This system would eliminate the challenge in including AIAN Child Care programs who do not have a federal review and follow standards which are less comprehensive than the Head Start Program Performance Standards. The accreditation process could assess the inter-tribal collaboration of child care services and Head Start services. Most importantly, it would side-step the involvement of state quality improvement efforts inclusive of state licensing unless a AIAN grantee so selected to participate in a state system for quality improvement. AIAN grantees are not licensed by state agencies and have not been included or involved in efforts undertaken by state efforts for quality improvement systems.

A major factor that must be taken into consideration is the cost to the grantee for being accredited. If an accreditation process is instituted within the Law (Head Start Act), consideration must be given to reduced cost or no cost for grantees who serve less than 100 children and a base cost not being more than three thousand dollars and have a built in scale for grantees serving above 100 children (cost per child). Cost is a strong consideration for AIAN programs due to the region’s history of underfunding AIAN programs over a period of time. AIAN grantees still are not at parity with regionally funded non-Indian Head Start programs. Additionally, a good number of AIAN programs have moved away from the NAEYC Accreditation process due to the cost of undergoing such a review.
Migrant and Seasonal Head Start Programs

The Task Force did its best to make recommendations that can be implemented for all kinds of Head Start programs. The Office of Head Start needs to carefully consider these factors when discussing how to best implement the proposal with programs who serve migrant and seasonal children and their families.

The following section was submitted by the Board of the National Migrant Seasonal Head Start Association:

Unique Characteristics of Migrant and Seasonal Head Start Programs (MHS)
The 26 Head Start grantees in Region XII share many unique characteristics that must be considered when making changes and recommendations to the current Monitoring Systems. More than 60% (sixty) of the children served in MHS Programs are between the ages of 6 weeks and 3 years old infants and toddlers. MHS Programs do not offer a typical year-round program model, but rather provide programming according to the needs of families, often dictated by growing and harvesting demands and seasons. MHS Programs can be in operation from as few as 6 weeks to a full typical school calendar year. MHS Programs also offer services outside the typical regional Head Start hours of operation. Programs may start as early as 4 am and end as late as 7 pm. Programs may offer families services six (6) days a week. Many MHS Programs are in rural communities which may complicate service delivery. Migrant families are mobile and transitional in nature. This common characteristic offers an additional layer of circumstances which may impact program services. Additionally, any new system of monitoring must take into consideration the unique relationship that exists between MHS Grantees and contracted Family Child Care Providers. Although this model may have the appearance of a Delegate/Grantee Relationship, it in fact is not the case.

Federal Monitoring
The National Migrant Seasonal Head Start Association has an extensive history in advocating for an improved federal monitoring system and its efforts will continue until there is a fair and balanced approach for monitoring Region XII grantees implemented by the Office of Head Start. Crucial in any approach for monitoring MHS grantees is a system that is culturally relevant, responsive and reliant. NMSHSA fully supports any Federal Monitoring System that will ensure and maintain programs of quality and accountability.

NMSHSA also considers one tri-annual federal review for grantee compliance with the Head Start Program Performance Standards is appropriate within a five (5) year funding cycle.

Data Dashboard
NMSHSA supports the recommendations of the Task Force as related to data dashboards concept. NMSHSA supports any effort which will streamline program data for easy interpretation and ensure quality performance and accountability. Any data collection system development must include cost estimates for implementing. NMSHSA supports the A-133 audit findings as one of the many data elements of the Dashboard. The self-assessment should be part of the data elements to specifically measure grantees’ success in meeting the Head Start Program Performance Standards. The annual grantee self-assessment should be included in the Dashboard and would serve as a basis for the federal onsite reviews and could be used by OHS to target key indicators for conducting federal reviews. Federal reviews would serve to verify and document grantees’ compliance with the Head Start Program Performance Standards. As indicated by NIHSDA, NMSHSA shares concerns about the use of CLASS as a major key indicator on the Dashboard and the potential penalty of CLASS findings resulting in possible re-competition. MHS Programs have found CLASS measures are not culturally and linguistically appropriate for Migrant Seasonal Head Start children. Furthermore, the CLASS reviewers most often are not familiar with the unique characteristics of MHS Programs and may often conclude inaccurate and inappropriate
observations. And lastly, CLASS is not designed for infant toddler teacher interactions which would mean judging on a disproportionate percentage of children we serve.

**Monthly Reporting**

As recommended by National Indian Head Start Directors Association (NIHSDA), NMHSA shares a similar concern that MHS grantees may not be able to adequately meet a requirement for “monthly reporting” of data elements determined to be part of the Dashboard due to the costs associated with data management, e.g., data collection and entry: thereby, potentially placing the grantees in possible jeopardy for non-compliance with reporting requirements. Such jeopardy may determine a MHS Grantee to be in non-compliance and therefore be a trigger for re-competition. NMSHSA suggests a data collection system which is more appropriate and would include the Program Information Reporting system (PIR).

**Accreditation System**

NMSHSA Supports the Task Force’s recommendation of a three tiered accreditation systems. NMSHSA supports a layered approach to accreditation. NMSHSA supports a Certification System approach as well. NMSHSA agrees and supports any efforts which will maintain quality programs or serve to raise the quality and accountability of any program providing Head Start services. Any implementation of an accreditation system must take into account any cost associated with such a system. All considerations must be taken for any MHS program due to the history of underfunding for MHS programs. MHS grantees are still not equally funded compared to regional Head Start counterparts.

**State QRIS Systems**

Currently, there is significant variation in Head Start’s role in state QRIS systems, both in terms of input and evaluation. Head Start standards and measurement of child outcomes and family engagement have informed the development of QRIS systems in some states. Head Start/Early Head Start programs also participate in QRIS systems, especially in states where QRIS is tied to licensing. However, in most states QRIS participation is voluntary. The Race to the Top-Early Learning Challenge (RTT-ELC) initiative requires that states’ work toward the goal of all publicly-funded early learning programs participating, which is moving states with RTT-ELC awards toward a more inclusive approach.

A primary goal of the Certification System of high quality services process is to align and incorporate state and nationally recognized validating systems, which will build on Head Start’s history of collaboration and improve integration. The Task Force intends for this proposal to complement the work being done developing QRIS systems in states, not supplant it. The proposed Certification System would recognize how each state with a QRIS system validates programs’ quality. For states just beginning to develop their QRIS systems, states struggling with how to best include Head Start programs in their QRIS system or states working to include Head Start in their development of longitudinal data and outcomes tracking, this new system could be a strong basis for collaboration and integration.

**Next Steps**

This report has described a proposed avenue for monitoring reform, but any change that takes place must begin with the current system. The following section describes (1) how elements of the current system will evolve under this proposal, (2) immediate steps for transitioning to the proposed system, and (3) how efficiency and effectiveness will be improved through that process.
Transitioning the Current Head Start Monitoring System

Under the proposed system, triennial reviews, T/TA and DRS would all evolve in their implementation, but their goals of ensuring compliance, supporting programs, and competing low performers would still be met and with increased consistency and speed.

Currently, the OHS monitoring system assesses compliance with the Head Start Performance Standards through triennial reviews. Based on those reviews, programs’ needs, and instructions from OHS, the regional training and technical assistance systems (T/TA) provide support to programs. The Designation Renewal System (DRS) forces programs that are out of compliance with the Performance Standards, have low CLASS scores, or fail a range of auditing/licensing procedures to compete with other potential providers for continued grant funding.

Triennial Reviews

The Triennial Review would no longer exist in its current form, but the areas of program function it addresses would be monitored for compliance:

- Funding, ERSEA, enrollment, and other areas designated by OHS would be captured by the A-133 audit and/or dashboard system.
- Health and Safety standards would be evaluated annually.
- Remaining Performance Standards would be evaluated either by the Certification System or by focused OHS on-site monitoring.
- CLASS scores would be taken by outside assessors and submitted by programs to the Certification System as part of certification.

Training and Technical Assistance

Training and Technical Assistance during implementation would focus on helping programs implement the dashboard and integrate it with their existing internal monitoring systems. Ultimately, however, under the new proposal T/TA would be targeted in two ways. First, OHS would use trends in dashboard data to quickly identify programs in need of compliance support. Second, based on certification ratings from the Certification System, programs would create their own improvement plans and request specific T/TA in order to meet them. These two methods are intended to make the most effective use of T/TA time and funding and to both avoid compliance issues and support program excellence.

The Task Force also recommends Office of Head Start create a system to support program improvement through establishing a regular annual assessment and feedback loop for key program processes essential to quality (e.g. self assessment, community assessment, annual audit, TTA plan, ERSEA, PIR data, Family Engagement outcomes, Program Annual Report, School Readiness Goals, and the program’s grant). Each of these processes would be assessed by OHS staff annually using national assessment tools (these tools would be developed using OHS’s national centers). The results of these assessments would be discussed with the grantees, creating a feedback loop to programs assisting them in improving quality. It would provide OHS with a uniform, consistent internal method for assessing program quality and assisting TA and professional development, while creating the foundation for a mentoring relationship between OHS and programs. Implementing this recommendation would create a clear, supportive mentoring relationship between Head Start programs and OHS based on trust and collaboration to improve program quality.

Designation Renewal System

The Final Rule on Designation Renewal, released in the fall of 2011, calls for programs to compete for continued funding if they fail to meet a set of seven key conditions. All of these would continue to be monitored under the current system. Through the dashboard, audit, and site-visit, OHS would monitor compliance in many areas and would gather
reports on licensing and status as a going concern. The Certification System would evaluate scores on the CLASS and other assessments, as well as compliance with performance standards, and would designate programs found out of compliance or below a certain threshold on CLASS in a low performing category. The Office of Head Start could then consider either lack of compliance with elements under their oversight or a rating of low performance by the Certification System as grounds for recompetition.

**Efficiency and Effectiveness**

The current monitoring system consumes funding and resources across the Head Start infrastructure, at the grantee, OHS, vendor and contractor levels, each year. Additional dollars are spent to monitor quality in federally funded child care settings.

While analyses of cost savings remain to be undertaken as these proposals are further developed, greater efficiency and higher quality of monitoring and accountability can be projected in several areas. First, data gathering through the dashboard and A-133 reduce the oversight burden on federal Head Start monitoring teams and will allow the Office of Head Start to send smaller, better trained teams into the field to conduct site visits. Second, once training is provided to all Head Start programs about implementation of the new systems, OHS will be able to use data from the dashboard to provide individualized and immediate training and technical assistance to programs with indications of risk. Third, as program certification motivates improved service delivery across Head Start and Early Head Start, T/TA costs and the expense of the Designation Renewal System will be reduced.

While the Certification System model would require funding, this could be redirected from savings elsewhere. The performance certification fee would be paid to the certifying organization by the grantee as an allowable cost.

In addition, a primary function of the certification process is to recognize and encourage excellence across Head Start and Early Head Start programs. This would support grantees in gaining access to private and public quality-related early learning resources.

**First Steps**

The elements of the Program Standards and Performance Auditing system already exist in some form, and can be immediately redesigned to work in the more streamlined ways described above. Creation of the Certification System requires deliberate work on the part of the National Associations, the Office of Head Start, and leaders from the child care field to develop definitions and degrees of certification. Once developed, the Certification System will offer national certification for all Head Start, Early Head Start and early childhood care and education programs.

To begin this work, the Task Force recommends the Office of Head Start immediately implement this proposal by doing the following:

1. Develop a dashboard system and identify Critical Success Indicators, as well as a process for review of CSIs and development of corresponding targeted T/TA.
2. Work with OMB on expanded guidance for A-133 audits.
3. Identify targeted performance standards and monitoring procedures and develop a process for on-site Health/Safety reviews.
4. Convene early childhood care and education stakeholders to establish an inclusive vision for a Certification System that would encourage excellence throughout the field for all children.
**Recommendations**

The earliest years of a child’s life are the foundation for his or her life-long health, development and learning. Local, state and federal monitoring systems are intended to ensure that early childhood care and education settings support those early years. Head Start and Early Head Start programs embrace that same goal, and work hard to meet rigorous standards and go beyond them. To that end, monitoring systems should both support compliance and encourage excellence.

Aligned with its objectives, the National Head Start Association’s Head Start Monitoring Task Force recommends the following:

1. Creation of a Performance Standards and Program Auditing system overseen by the Office of Head Start to provide consistent, responsive oversight of compliance in areas critical to basic program function and children’s health and safety.
2. Creation of a Certification System to recognize program excellence and facilitate the integration of local, state and federal monitoring into a coherent rating system.
3. On-going discussion across the Head Start field and throughout the early childhood care and education community about what impact is, how to measure it, and how to ensure that monitoring drives the pursuit of excellence in serving vulnerable children and families.
Addendum A: Task Force Members

Phil Accord
Jane Adams
Jeffrey Capizanno
Terry Casey
Bill Castellanos
Gayle Cunningham
Denny Demers
Emmalie Dropkin
Richard Fiene
Kay Floyd
Kathryn Helsel
Tameka Henry
Blair Hyatt
Manda Klein-Lopez
Gretchen Knowlton
Pauline Koch
Therese Magnuson
Tammy Mann
Anne Mitchell
Tim Nolan
Michele Pino
Vanessa Rich
Cleo Rodriguez
Joel Ryan
Tommy Sheridan
Sandy Simar
Esmirna Valencia
Yasmina Vinci
Danny Wells
Addendum B: Sample Matrix of Performance Standards Converted for Performance Certification

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Addendum C: References


