Recommendations for Expansion and Partnership

Context for Expansion and Partnership

The first few years of life are formative for all children, and their environment and experiences during this period shape their brains in ways that underlie life-long learning, health, and well-being. Our national commitment to Head Start and Early Head Start recognizes the fundamental way that providing safe, nurturing early learning to children while supporting their families’ ability to work and parent effectively creates opportunity across generations for stability and success. To realize that commitment, programs across the country have dedicated themselves to a mission of intervention and support for those children who are most vulnerable to the long-term effects of poverty, homelessness, disability, and family instability.

For more than a decade, Head Start and Early Head Start programs have partnered with local child care centers and family child care homes to expand access to high quality care, and there are early learning communities across the country eager for the chance to build on this model and extend quality even further to vulnerable children and families. Funding allocated in the FY 2014 budget for expansion and conversion of Early Head Start slots and creation of new Early Head Start-Child Care (EHS-CC) Partnerships offers an exciting opportunity to both build on Early Head Start’s history of partnership and consider the innovative development of new models and practices. Too many families are working hard to make ends meet and struggling to offer their children better lives. By increasing access to Early Head Start services, we ensure more of these families have the support they need to achieve stable and lasting success.

Given the importance of making partnerships an effective model, the National Head Start Association (NHSA) and California Head Start Associations have spent the last year engaged in discussions with local Head Start and Early Head Start grantees, state associations, national organizations representing child care constituencies, and other community members. In January of 2014, NHSA also conducted a voluntary survey about EHS-CC partnerships with the Head Start field that gathered responses from about 200 Head Start and Early Head Start grantees and worked with the Early Care and Education Consortium and Experience Early Learning to gather responses from child care providers. In addition, the National Head Start Association and the California Head Start Association have convened a Partnership Project Working Group with representation from a very broad range of child care and Early Head Start practitioners as well as national organizations committed to early learning (see addendum A).

Throughout these conversations, numerous themes emerged:

1. There is overwhelming need for services for children 0 to 3. We have long known that Early Head Start is able to reach less than 5% of eligible infants and toddlers; in the NHSA survey, 128 of the responding programs had among them more than 61,000 children of these ages in need of services beyond those they were able to serve.

2. Funding cuts due to sequestration have undermined partnerships in many parts of the country and have made child care partners less confident about entering into contracts that can be at risk of Federal cuts.
3. The Designation Renewal System continues to hamper partnering. For Early Head Start grantees, the single deficiency trigger in the Designation Renewal System has seriously undermined the desire to partner with child care. While many child care partners are of high quality, 84% of Head Start/Early Head Start grantees in NHSA’s survey were concerned that new child care partners would struggle to meet the Head Start standards and could put their entire grants at risk.

4. Effective partnerships take time, communication, and relationships. When partners rush into contracts, the quality of their work together is often undermined. Many different factors in terms of funding, standards, and oversight need to be mutually understood before contracts are signed.

5. This is a wonderful opportunity. There are communities with partnerships that strengthen children, families, and both partners as well as the entire local early learning community. 98% of Head Start survey respondents with existing partnerships are or may be interested in new funds for partnerships, as well as 90% of those who do not have partnerships. Among family child care providers, 87% expressed interest in.

Based on broad discussions and outreach to the early learning community, the National Head Start Association offers the thoughts and recommendations below as the Administration for Children and Families, the Office of Head Start, and the Office of Child Care prepare for the next steps in this process to support implementation to benefit children, families, and programs. These recommendations are designed to support local decision making by new and existing grantees about models that best support a community, including but not limited to the following:

1. An Early Head Start grantee operates home-based, center-based, and/or combination services and contracts with center-based or family child care providers serving Early Head Start eligible children.
2. An Early Head Start grantee operates home-based, center-based, and/or combination services and also operates child care services to extend the Early Head Start day or to meet the needs of non-Early Head Start eligible families.
3. An Early Head Start grantee operates an administrative network of contracted family child care homes serving eligible children.
4. An Early Head Start grantee operates home-based, center-based, and/or combination services and blends funding streams within classrooms so that eligible Early Head Start children are integrated with children served through other funding mechanisms.

The National Head Start Association plans to continue conversations throughout the early childhood field about design and implementation of Early Head Start-Child Care Partnerships and welcomes the opportunity for dialogue with the Administration for Children and Families as well.

**Roll-out of Expansion and Partnership Funds**

The Funding Opportunity Announcement (FOA) should allow applicants the option to describe how they plan to spend funds in each year of the five year grant cycle, whether for partnerships or for direct expansion. The Funding Opportunity Description and evaluation criteria for “Demonstration of Need for Child Development and Health Services: Location, Population, and Service Delivery Options” can be used to identify the Office of Head Start’s preference for creation of partnerships. In some geographic areas,
particularly rural areas, limited numbers of potential child care partners may mean that direct expansion of Early Head Start is the most practicable option.

Because child care partnerships often involve small numbers of slots within center-based or family child care programs, the Office of Head Start should consider a higher than usual Expected Number of Awards for each state or service area to allow programs to apply for small numbers of slots that may still represent multiple partnerships, especially in geographic areas with fewer opportunities for partnership. At the same time, economies of scale should be considered.

The Approach section of the Project Description in the FOA should give applicants the flexibility to plan for direct expansion during the initial years of the grant cycle simultaneous with local community outreach and establishment of contractual partnerships, followed by phased-in expansion of the number of slots provided through center-based or family child care partnerships. This time allowed for establishing partnerships is fundamental to success. As in existing Early Head Start FOAs, programs should describe their process, timeline, and criteria for identifying partners including their existing or potential commitment to quality. Renewal of a five year partnership grant should be contingent in part upon the grantee’s efforts to implement the timeline successfully while allowing for factors outside the grantee’s control.

For grantees who are seeking to establish first time partnerships, a period at the beginning of the grant cycle should be allowed to be used to engage community providers, including activities such as (1) educating local center-based and family child care providers about Early Head Start standards, practices, and monitoring; (2) providing professional development training to center-based and family child care staff and funding substitutes; (3) offering support for quality improvements to facilities, curriculum, and materials; and (4) beginning contract negotiations with local child care programs where the Early Head Start and child care programs mutually desire a partnership. During these periods, the Office of Head Start may choose to document the number of child care programs, staff, and ultimately children who are reached by professional development efforts.

Successful Early Head Start-Child Care Partnerships often have designated staff and carefully designed systems in place to ensure the partnership is effective. The “Past Performance” and “Organizational Capacity” evaluation criteria should call for applicants for these grants to demonstrate capacity and experience with creating, managing, and maintaining a network for training/mentoring.

The Project Budget and Budget Justification section of the FOA should allow programs to outline separate budgets for different years of the five year grant if they are planning to implement partnerships over time. During an initial period of local quality improvement, program costs may include:

- Salaries for the Early Head Start-child care partnership manager, mentor coaches, and monitoring staff
- Staff time for the Early Head Start and child care directors and administrative staff
- Training for child care staff (credentialing, CLASS training, etc.)
- Substitute teachers to allow child care staff to participate in training
- Funding to child care programs for facilities improvements
- Funding to child care programs to improve curriculum and classroom materials
- Costs for legal support for contract development
Once a partnership has been established, any or all of the following may be included in Early Head Start budgets, depending on the terms of the contract established between the Early Head Start grantee and the child care provider:

- Salaries for child care teachers
- Salaries for Early Head Start teachers placed with the child care partner
- Salaries for family service workers serving child care partners
- Salaries for the Early Head Start-child care partnership manager, mentor coaches, and monitoring staff
- Staff time for the Early Head Start and child care directors and administrative staff
- Staff time for the Early Head Start education, health, nutrition, disabilities, and other manager/specialist level staff
- Training for child care staff (credentialing, CLASS training, additional PD as needed)
- On-going purchase of materials, technology, and facilities maintenance
- Transportation for children

Because partnerships may best meet the needs of eligible families when they offer full working day, full year services, programs may blend Early Head Start dollars and child care subsidy dollars to fund partnership slots.

During expansion, existing Head Start and/or Early Head Start grantees should have the opportunity to convert their existing grants into a birth to five grant and incorporate new grant funds to expand services to children birth to four.

In addition, the National Resource Centers should allocate some of their resources to develop and disseminate resources related to partnerships. Funds should also be set aside for American Indian/Alaskan Native and Migrant and Seasonal Head Start programs to expand or form partnerships. These partnerships may be structured differently given the unique needs and resources of tribal and migrant communities and the birth to five nature of migrant and seasonal programs.

**Regulation and Monitoring**

During the local quality improvement phase, the Office of Head Start should use the A-133 audit to ensure appropriate fiscal accountability on behalf of grantees. Grantees should document the impact of their local quality efforts by reporting the use of funds, the numbers of child care programs and child care staff reached with training, certification levels attained by child care staff as a results of training, and the number of children in child care affected by the training provided. The Office of Head Start may also choose to set benchmarks or other means of demonstrating content and quality of training provided.

Existing Head Start Program Performance Standards should be used in partnership sites, though the birth to four funding for partnerships raises questions about using Early Head Start regulations to serve three year olds. The Office of Head Start should consider amending the Head Start standards to include greater flexibility for family child care and center-based classroom ratios when settings serve primarily children ages two and three. Revised ratios would better enable partnerships in states where child care
ratios that allow a provider to enroll significantly more children than Head Start ratios make partnership unappealing to child care providers.

Once contracts are signed between the Early Head Start grantee and a child care program, there should be flexibility for a period of up to 6 months laid out in the contract for the training of child care provider staff and facilities improvements before children are served; this period should be monitored using the A-133 audit.

Once the training and facilities improvement are complete and a partnership site begins serving children, there should be a period of 18 months before the partnership site is eligible for on-site monitoring for the Designation Renewal System. The Office of Head Start should create a new critical indicator benchmark tool to be used during this period by both agencies in the partnership and regional T/TA to evaluate and support child care partners in working toward meeting Head Start standards. In addition, the Office of Head Start should work with the team that developed the critical indicators for Head Start monitoring to adapt these into a separate set of critical indicators that Early Head Start grantees, their partners, and OHS monitors can use to monitor center-based and family child care partners.

Partnerships are fundamentally equal relationships, but in this case there can be a risk factor for the Early Head Start programs when their partners are monitored on the Head Start Program Performance Standards with implications for all grants the programs hold. Early Head Start grantees who have discovered a non-compliance or deficiency in an established partner program should have the flexibility to either terminate the partnership (based on criteria for immediate termination laid out in their contract) or establish a support plan that requires the partner to address the concern and meet Head Start standards. Depending on the program’s needs, the plans should be designed for improvement over up to 24 months through on-going professional development or other supports using benchmarks to track progress toward the goal. Regional T/TA systems should support programs in addressing the needs of their partners.

**Conclusion**

On behalf of both existing and eligible Early Head Start providers, and especially on behalf of the children and families who need this window of opportunity, the National Head Start Association wishes to express gratitude for the Administration’s commitment to expanding early learning opportunities. Given the flexibility to design effective local models, the time to establish strong partnerships, and the support to improve local quality over time, the early childhood field stands ready to demonstrate our long-standing commitment to quality for the highest need children and families. The National Head Start Association will continue to work to support them in their efforts and welcomes the opportunity to discuss these recommendations further.
Addendum A: Partnership Project Members

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