North Dakota Head Start Collaboration Office Needs Assessment Summary

2019

Becky Eberhardt, Head Start Collaboration Administrator

Introduction

The Head Start Act http://eclkc.ohs.acf.hhs.gov/hslc/standards/Head%20Start%20Act (as amended December 12, 2007) requires the Head Start Collaboration Offices (HSCOs) to conduct an annual needs assessment of Head Start and Early Head Start grantees. The purpose of the 2018 Head Start Collaboration Needs Assessment is to evaluate perceptions held by Head Start and Early Head Start programs to inform strategic planning for the year. The HSCO is currently using a needs assessment which covers all priority areas and yearly has minor changes that assess the needs of programs through state focus areas.

This report presents findings from a survey of staff and directors representing Head Start and Early Head Start programs serving North Dakota children and families for the grant year 2019-2020. The purpose of the survey was to gather information for a site-based assessment of Head Start/Early Head Start programs with a specific focus on the level of collaboration between the agencies and that of others serving children and families in North Dakota.

The goal is to simply assess how Head Start and Early Head Start programs collectively respond to the various priority areas, as listed by the Office of Head Start. The North Dakota Head Start Collaboration Office continued this year with a series of questions that directly correlate with the priority areas.

The report was prepared through the North Dakota Head Start State Collaboration Office, North Dakota Department of Public Instruction-Office of Early Learning through a grant from the U.S. Department of Health and Human Services, Administration for Children and Families.

Purpose

The intent of this report is to understand the landscape of Head Start and Early Head Start in North Dakota, identify key findings that support ongoing collaboration, or the development of new collaborations as well as the development of recommendations, based on the two data sources.

The 2019 Needs Assessment is comprehensive of 2 data sources:
1. Survey Analysis & Findings: The survey was conducted via Survey Monkey in 2019 and distributed to all Head Start and Early Head Start directors in the State of North Dakota.
2. Program Information Report (PIR) Statewide Data findings conducted by the Office of Head Start.

 The recommendations are what will drive the work of the Head Start Collaboration in the upcoming year, and will inform state and local partners about Head Start and Early Head Start perceptions and needs across the state.

Overview of the Head Start and Early Head Start Programs

Head Start is a "national program that promotes school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families." The program provides grants to local agencies, both public and private, non-profit and for-profit, who in turn provide services to economically disadvantaged children (http://www.acf.hhs.gov/programs/ohs/about/). North Dakota has had Head Start programs since 1965, when the national program began. The Early Head Start Program, which began in 1995, focuses on expectant mothers and children from birth through age 3. Although federally funded, programs must provide a 20 percent local funding match. Head Start programs are free-of-charge to participants. Ten percent of enrollment must be made available to children with disabilities. At least 90 percent of children enrolled in Head Start programs must meet federal income guidelines   (http://www.nd.gov/dhs/services/childfamily/headstart/).

In 2019, the poverty guidelines used by the U.S. Department of Health & Human Services for a family of four was $25,750 (https://aspe.hhs.gov/2019-poverty-guidelines). The basic elements of Head Start are regulated through federal Program Performance Standards. However, grantees and parents have control over individual programs, which are designed to meet the needs of families in the local community. Services can be delivered in different ways, including center-based programs, home-based options, and combination models (https://eclkc.ohs.acf.hhs.gov/programs/article/head-start-programs).
.

Head Start Collaboration offices were created in order to facilitate collaboration between different Head Start programs within a state. The North Dakota Head Start State Collaboration Office (HSSCO) is part of the Office of Early Learning of the North Dakota Department of Public Instruction. The goals of the HSSCO are to assist in building early childhood systems and access to comprehensive services and support for all low-income children; encourage widespread collaboration between Head Start and other programs and services; augment Head Start's capacity to be a partner in State initiatives on behalf of children and families; and facilitate the involvement of Head Start in state policies, plans, processes, and decisions affecting the Head Start target population and other low-income families (https://eclkc.ohs.acf.hhs.gov/programs/article/head-start-collaboration-offices). The HSSCO is also tasked with addressing the priorities set by the federal Office of Head Start, to include regional priorities. These priorities include partnering with state child care systems emphasizing the Early Head Start-Child Care (EHS-CC) Partnership Initiative, working with state efforts to collect data regarding early childhood programs and child outcomes, supporting the expansion and access of high-quality workforce and career development opportunities for staff, ccollaborating with State Quality Rating Improvement Systems (QRIS), working with state school systems to ensure continuity between Head Start and Kindergarten Entrance Assessment (KEA) and other regional priorities that include health, workforce, and enrollment.

Summary of North Dakota Head Start and Early Head Start Programs

North Dakota had total funded enrollment for 1,964 participants for the 2018-2019 program year. According to Head Start Program Information Report data, total funded enrollment in 2017-2018 was for 2,149 participants.

Total cumulative enrollment in 2018-2019 was 2,470, which represented 2,410 children, and included 60 pregnant women. Funded enrollment was decreased in the previous years, some of which is accounted for by changes in the duration hours that programs are offering. The regional initiative is to continue to provide high quality services and increase the hours that children are receiving services.

STUDY DESIGN

Study Objectives

The goal of the needs assessment is to conduct survey of the needs of Head Start agencies in the areas of coordination and collaboration with specific focus around the national and regional priority areas as required by the collaboration offices'. These areas are: 1) Partnering with state child care systems emphasizing the Early Head Start-Child Care (EHS-CC) Partnership Initiative 2)Working with state efforts to collect data regarding early childhood programs and child outcomes 3) Supporting the expansion and access of high-quality workforce and career development opportunities for staff 4) Collaborating with State Quality Rating Improvement Systems (QRIS) 5) Working with state school systems to ensure continuity between Head Start and Kindergarten Entrance Assessment (KEA) 6) other regional priorities that include services for health, workforce, and enrollment.

This report presents the results of the 2019-2020 needs assessment and assesses changes since the last needs assessment conducted in 2018-2019.

Survey Instruments and Methodology

The Office of Head Start does not specify the methodology or instrument used to collect information. Head Start Collaboration Office directors do have a common resource and guidance they can follow on the ECLKC website portal, but guidance is optional. The Head Start Collaboration Office utilized a survey to collect information from local Head Start and Early Head Start grantees. The purpose of the survey was to gain a deeper understanding of how Head Start and Early Head Start grantees experience collaboration with state and local agencies. Questions were incorporated to address the national and regional priority areas that were outlined above, with individual questions for each priority area. Additionally, the survey was to understand where the Head Start community would like to see efforts focused in the upcoming year. The same survey was used to collect data this year as last year to assess improvement in collaboration, as well as a shift in where collective and collaborative efforts are executed. The results were then compiled, analyzed, and presented back to grantees for feedback.

The current assessment was focused toward identifying the major needs of programs, the children, and families they serve continuing into the 5-year grant period. Head Start directors were invited to participate in the Head Start Collaboration Office (HSCO) needs assessment survey. Directors were encouraged to participate, but if they could not fill out the survey or wanted to provide more input from their program, they were encouraged to send the

survey on to other staff. Thirty-two people participated in the survey, all self-identified in the survey. All answers were de-identified in this summary.

Presentation of Findings

A note on the analysis: Findings are based on responses to a non-scientific survey. The results, though informative, are not to be considered representative of all Head Start and Early Head Start employees in North Dakota. The purpose is to simply inform the Head Start Collaboration Office and other partners, for use in ongoing planning.

Programs Offered

Respondents were asked to characterize the programs they currently have or expect to have in place by 2020. Many offer more than one program or program model. All 32 respondents answered this question. Due to an issue with the online survey format, programs were not able to select multiple program models. Respondents were able to provide a comment explaining the models that they plan to offer by 2020. Five programs reported that they are co-located with Early Childhood Special Education programs, Early Intervention program, a community partnership, Public Pre-k, a partial day program or have an Early Head Start Child Care partnership or a combination of these choices.

Please check all program models you currently offer or plan to offer in your agency by 2020.
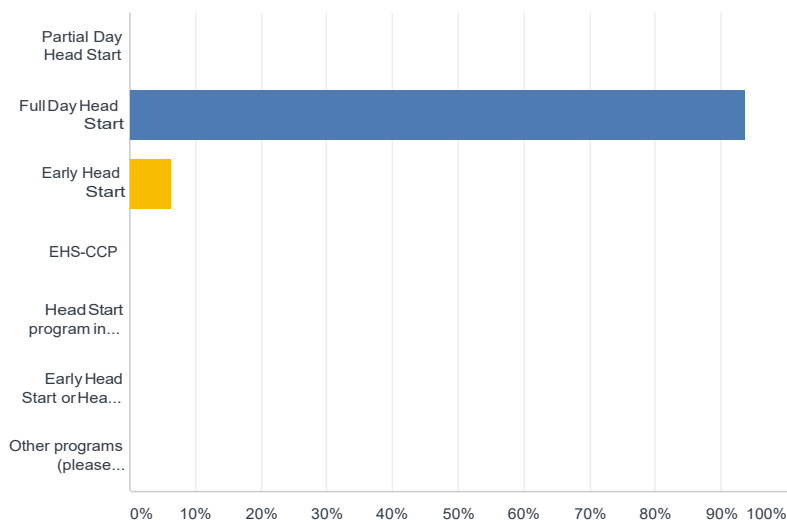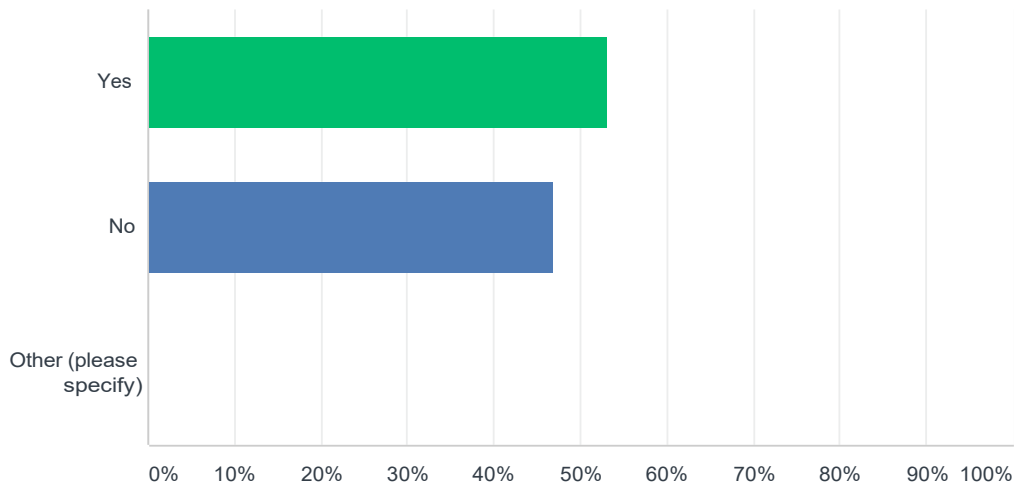
ANSWER CHOICES	RESPONSES	
Partial Day Head Start	0.00%	0
Full Day Head Start	93.75%	30
Early Head Start	6.25%	2
EHS-CCP	0.00%	0
Head Start program in tandem with special needs preschool	0.00%	0
Early Head Start or Head Start program in tandem with child care (not EHS-CCP)	0.00%	0
Other programs (please specify)	0.00%	0

Licensed Programs and Bright & Early ND EHS/HS Program Participation:

Early Head Start and Head Start programs in North Dakota can choose to be licensed. In order to participate in child care subsidy or the QRIS-Bright and Early, a program must be licensed. Due to the complexity of the system, there is a variation amongst programs in participating in these two programs. As state law and administrative rule changes in North Dakota it will continue to be important to see what effects this may have on Head Start programs.

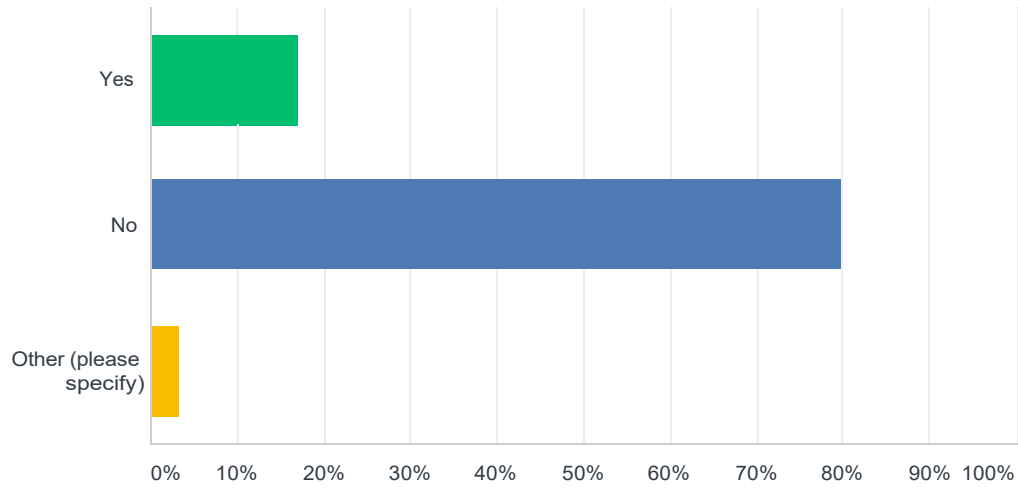## Is your program licensed through the state of North Dakota or Tribal CCDF?

Answered: 32   Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	53.13%	17
No	46.88%	15
Other (please specify)	0.00%	0
TOTAL		32

Is your program in Bright & Early ND (ND QRIS)?

Answered: 29   Skipped: 4

ANSWER CHOICES	RESPONSES	
Yes	17.24%	5
No	79.31%	23
Other (please specify)	3.45%	1
TOTAL		29

Potential HSCO Roles:

Respondents were asked to identify something that would be helpful for HSCO to address in the next year. To de-identify specific answers, the answers are listed in general categories listed in order of frequency of response. The responses were:

• Increased collaboration between Head Start agencies and local child care programs to ensure that quality, full-working day, and full-calendar year services are available to children and families who need them. (7)

• Increase collaboration between the Office of Early Learning and Child Care Aware system, Bright & Early ND, Growing Futures, and HS/EHS to promote quality early education programs. (7)

• Increase collaboration between state education agencies and state child care licensing agencies to improve the standards of quality and reduce regulatory barriers facing early childhood programs. (6)

• Additional linkages between Head Start, local Child Care Aware, Bright & Early ND, Growing Futures, and the Early Childhood Services Administration. (4)

• Additional capacity in child care programs for quality infant-toddler care through linkages with Head Start professional development. (4)

Items listed are appropriate areas for the HSCO to have a system level role in supporting and are part of the current strategic workplan.

Collaboration with Partners

Respondents were asked to identify the level of collaboration between the local EHS/HS program and the community partner. The most frequent response is highlighted in green. In a few cases, the most frequent response is the same in more than one category.

Critical to the success of Head Start programs are strong working relationships with partners. 18 respondents answered this question.

To what extent does your Head Start and/or Early Head Start program partner with the following community and state support services? Please mark each area once. Choices are:- High Level Collaboration- Moderate Collaboration- Limited Collaboration- No Collaboration- Not Applicable

Answered: 24 Skipped: 9

	HIGH LEVEL COLLABORATION	MODERATE COLLABORATION	LIMITED COLLABORATION	NO COLLABORATION	NOT APPLICABLE	TOTAL
Local Education Agencies-Transitions	18	6	0	0	0	24
Local Education-Part B	14	5	0	0	2	21
Early Intervention - Part C	7	7	2	1	2	19
ND Department of Commerce Grant	0	3	2	8	6	19
CCA Agencies	1	3	2	4	6	16
Head Start T/TA	15	4	1	0	0	20
Bright & Early ND	0	1	3	9	6	19
Child Care Licensing	2	3	5	8	1	19
Striving Readers	4	5	2	4	6	21
Libraries and/or local Museums	3	8	4	5	0	20
Child Care Centers (for continuation of full-day, year-round services)	1	3	5	10	0	19
Infant & Toddler Mental Health Services	1	3	3	3	8	18

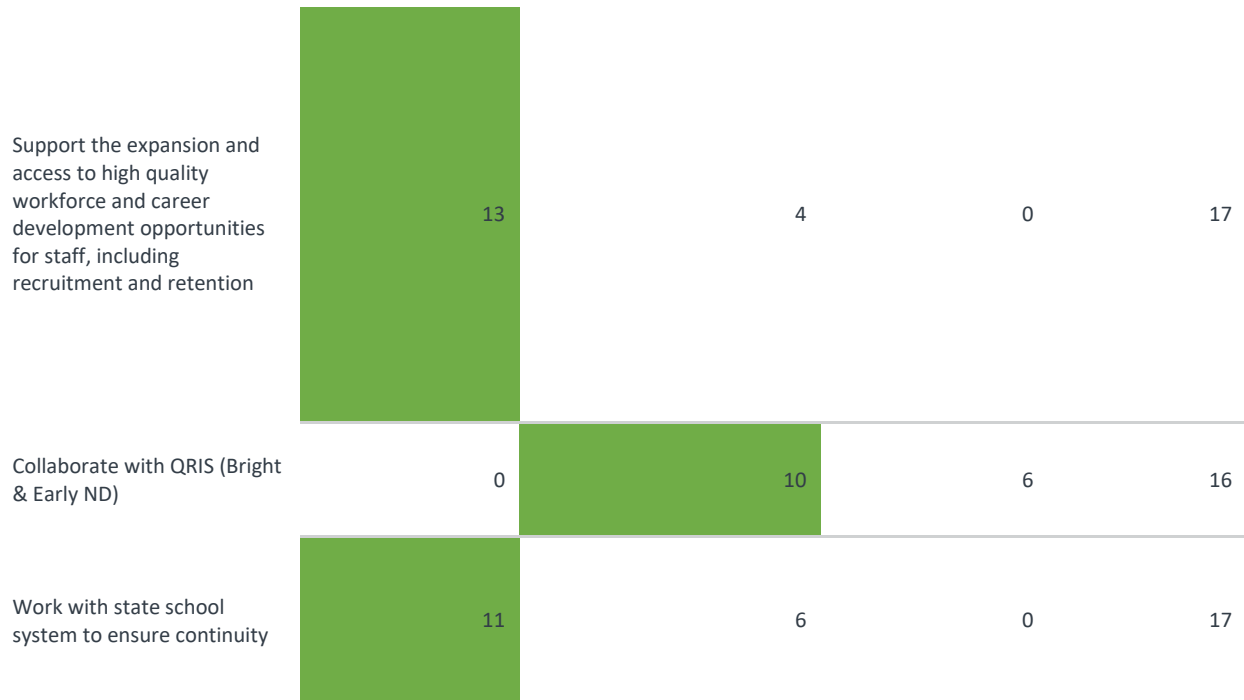| Service						
3-5 Year Old Mental Health Services	9	7	4	0	0	20
Mental Health Counseling Services	7	9	3	0	0	19
Homelessness Services	4	8	5	2	0	19
Transitional Housing	2	7	4	5	0	18
Family Resource Centers	9	5	5	0	0	19
Parenting Classes	10	6	4	0	0	20
SNAP	5	8	5	3	0	21
Healthy North Kids (CHIP)	4	7	6	2	2	21
WIC	11	5	3	2	0	21
TANF	6	4	6	3	1	20
CACFP (Child and Adult Care Food Program	16	4	1	0	1	22
Food Pantries	7	9	5	1	0	22
Local Health Department	12	6	2	1	0	21
Additional Home Visiting (i.e. MECHV)	2	2	5	5	6	20
Community Health Centers	8	8	4	0	0	20
Pediatric Practices/Clinics	11	7	2	0	0	20
Dental Home Providers	12	6	2	1	1	22
Child Protective Services	12	7	2	0	0	21
Military Family Liaisons	4	5	3	5	2	19
Domestic Violence Agency	8	7	2	2	0	19

Respondents were also asked to list specific collaborations that need to be strengthened in the next year, 13 offered one or more answers. Answers are presented here in general categories:

- Mental Health Organizations and services (4)
- Child Care (3)
- CACFP (1)
- Foster Care (2)
- Child Protective Services (2)
- Housing (3)
- LEA (6)
- Community Health (4)
- Part B (5)
- Family Supports (7)
- TANF (2)
- WIC (2)

Program Impacts of Federal Priorities

Respondents were asked to rate the impact that each of the five federal priorities had on their program. Seventeen respondents rated at least one priority. The highest frequency answers are highlighted in green. Please indicate the level of impact each of these priorities has on your EHS/HS program.

	MAJOR IMPACT	MODERATE IMPACT	LIMITED IMPACT	TOTAL
Partner with state child care systems, emphasizing EHS/CC Partnerships	6	3	7	16
Work with state efforts to collect data regarding early childhood education programs and child outcomes	6	8	2	16

Support the expansion and access to high quality workforce and career development opportunities for staff, including recruitment and retention	13	4	0	17
Collaborate with QRIS (Bright & Early ND)	0	10	6	16
Work with state school system to ensure continuity	11	6	0	17

Expansion and access to high quality workforce and career development and collaboration with state school system all have major impact on programs. Collaboration with QRIS and state data collection both appear to have moderate impact.

The majority of respondents thought partnerships between EHS/HS programs and the child care system were of limited impact. Since there is only one program involved in the partnership grants at this time and the priority is written to emphasize the partnerships it would appear that most respondents would see this as limited impact.

HSCO-Program Partnerships Role for Federal Priorities

Survey respondents were asked what kind of role each would like the HSCO to play in collaboration with the individual programs, ranging from as-needed communication to ongoing extensive collaboration on projects.

Please choose the role that best characterizes the level of partnership you would like to have between your program and the State Collaboration Office on the following five HSCO priorities in the next year.

Answered: 15 Skipped: 18

	Information shared from HSCO office on an "as needed" basis	Regular communication between my program and HSCO Office	Work on specific projects or objectives within this property	Ongoing collaboration and work	Total
Partner with state child care systems, emphasizing EHS/CC Partnerships	5	4	5	1	15
Work with state efforts to collect data regarding early childhood education programs and child outcomes	3	4	6	2	15
Support the expansion and access to high quality workforce an dcareer development opportunities for staff, including recruitment and retension	2	5	5	3	15
Collaborate with QRIS (Bright & Early ND)	5	5	1	3	14
Work with state school system to ensure continuity	2	5	2	6	15

Factors that may be driving the respondent's answers on the types of partnerships between the HSCO and the individual programs may include differences in resources, experience, or program level assessment of the most effective use of its resources. The results tend to suggest that there is an even split on the types of partnerships between HSCO and the individual programs should.

Professional Development

Professional development was identified by most respondents as a high impact priority. Initial training, ongoing training, and workforce development were all areas that were identified as important. The top three professional development options chosen were: assistance in connecting to training for new employees or those in new positions, further support from the T/TA providers to meet degree requirements, and assistance in understanding and navigating the state-wide PD system.

Professional Development: Of the following choices, what do you think are the most important areas to focus on in the next year? (Please choose up to three choices)

Answered: 18   Skipped: 15
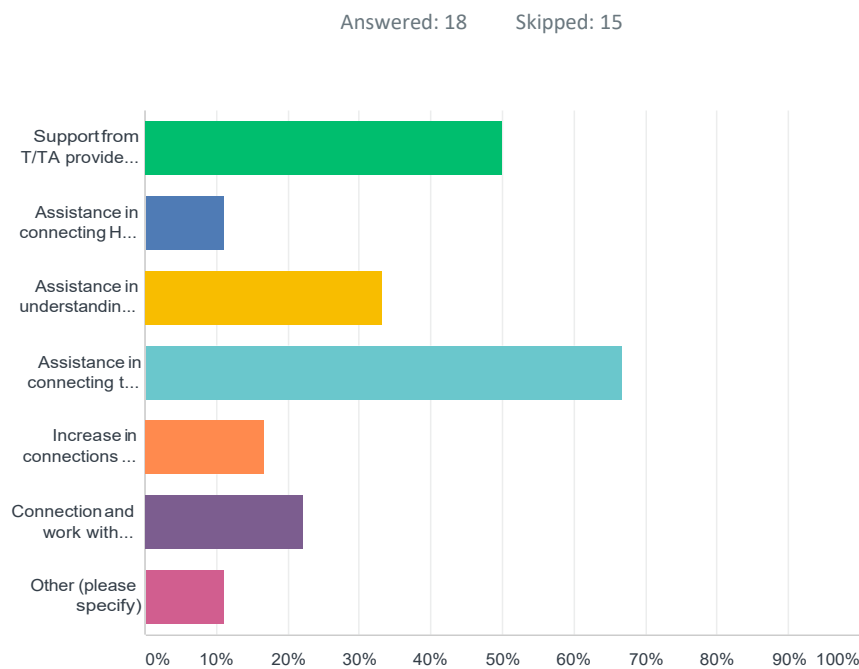
Answer choices	Responses	
Support from T/TTA provider to work with Head Start grantees to meet Head Start degree requirements for teachers, assistant teachers, education managers, and other staff as described in section 648(a)(2)(A).	50.00%	9
Assistance in connection Head Start agencies with higher education agencies that provide distance learning programs.	11.11%	2
Assistance in understanding and navigating the state-wide professional development system.	33.33%	6
Assistance in connecting to training opportunities to train new employees and employees taking on new roles within Head Start agencies.	66.67%	12
Increase in connection to training and coaching with Bright & Early ND.	16.67%	3
Connection and work with career counselors and higher education institutions to increase the number of Head Start teachers, assistant teachers, and education managers who meet the Head Start required specifications.	22.22%	4
Other (please specify)	11.11%	2

Coaching

An additional open-ended question was added to the survey this year about coaching. How can the state system support your EHS/HS programmatic coaching model? Below are the responses:

- Continued training and update resources to support the process
- Additional time and staff is needed
- Training in continuous quality improvement
- Coaching staff regularly and early do frequent check-ins with new staff
- Limited time for high impact coaching within the school district calendar
- More funding for training

Specific Professional Development Training

Respondents were invited to identify specific types of trainings and areas of greatest need. Eleven responded with specific ideas in multiple areas. The responses were de-identified and categorized. The most frequently requested types of training (in order of number of times listed are):

- Trauma Informed decisions (5)
- Positive behavior strategies (3)
- Orientation for new employees (1)
- How to use data (1)
- Training without a fee (1)
- Coaching and mentoring (1)
- CLASS (1)
- Curriculum implementation (1)
- Leadership (1)
- Legal role of Part C (1)
- Health (1)

- Family engagement (1)
- How to identify special needs and assist families (1)
- Teaching ELL students (1)
- ERSEA (1)

Though the HSCO does not provide direct T/TA, it collaborates with trainers across the state and region, and consistently communicates needs to ensure partners who provide training have accurate information about what HS programs are looking for in professional development. This year's survey indicates that directors are looking for basic level training as well as more advanced training for staff. More advanced training needs for staff indicate that is an area for more information gathering about staff professional development needs and an opportunity for further work with the Early Childhood Higher Education Consortium.

Overall, professional development in all its facets appears to be one of the highest priority areas for programs across the state. Without significant, ongoing workforce development and high quality, targeted training, program directors do not think that ongoing, high quality early childhood education is possible.

Early Head Start and Head Start Collaboration with the Child Care System

Early Head Start and Head Start programs identified significant areas for focus in how the child care system and EHS/HS programs align. The areas identified are, increased collaboration between Head Start agencies and state child care licensing to improve quality, full-working day and full-calendar year services; and increase collaboration between the Office of Early Learning, Child Care Aware, Bright & Early ND, Growing Futures, and HS/EHS to promote quality early education programs. Collaboration is an area of important ongoing work. The need for ongoing alignment and inclusion increased as a result of the new Early Learning Standards and state system changes.

Child Care and EHS/HS: Of the following choices, what are the most important areas to focus on in the next year? (Please choose up to three choices)

Answered: 16   Skipped: 17
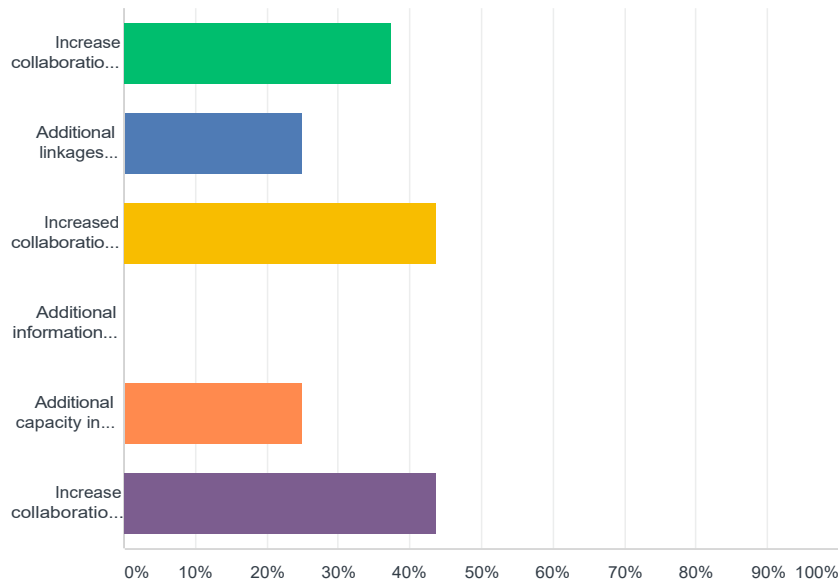
Answer choices	Responses	
Increase collaboration between state education agencies and state child care licensing agencies to improve the standards of quality and reduce regulatory barriers facing early childhood programs	37.50%	6
Additional linkages between Head Start, local Child Care Aware, Bright & Early ND, Growing Futures, and the Early Childhood Services Administration.	25.00%	4
Increased collaboration between Head Start agencies and local child care programs to ensure that quality, full-working day and full-calendar year services are available to children and families who need them.	43.75%	7
Additional information about child care quality improvements and licensing initiatives	0.00%	0
Additional capacity in child care programs for quality infant-toddler care through linkages with Head Start professional development	25.00%	4
Increase collaboration between the Office of Early Learning and Child Care Aware system, Bright & Early ND, Growing Futures, and HS/EHS to promote quality early education programs.	43.75%	7

Areas of focus for Early Head Start and Child Care Alignment

Eligibility requirement differences between EHS and childcare assistance and the child care assistance application process were the primary areas to focus on so that EHS/CC Partnerships can be aligned to serve EHS families. These two areas proved problematic in obtaining child care subsidy for families.

Early Head Start and Child Care Systems: Please answer this question if you currently have an Early Head Start Child Care Partnership program or plan to have one in place by 2020. What would be the most important areas to focus on so that EHS/CC Partnerships can be aligned to serve EHS families? (Please choose up to three choices)

Answered: 5   Skipped: 28
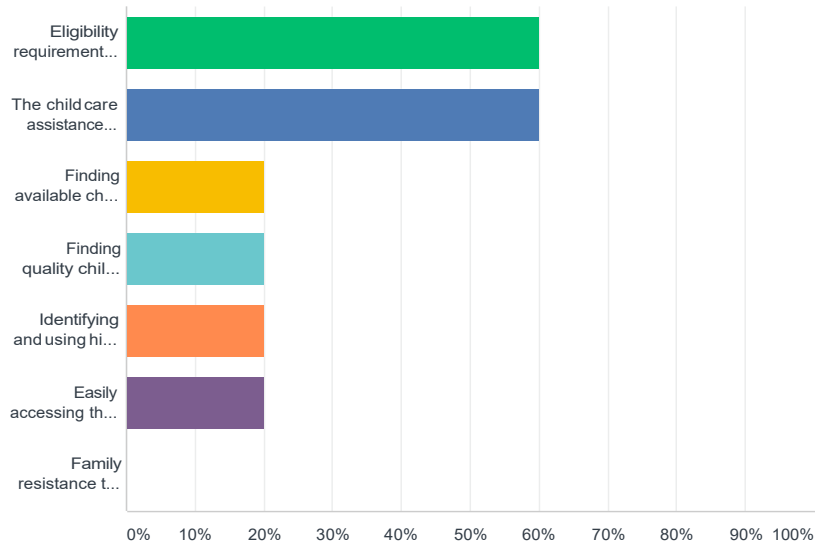
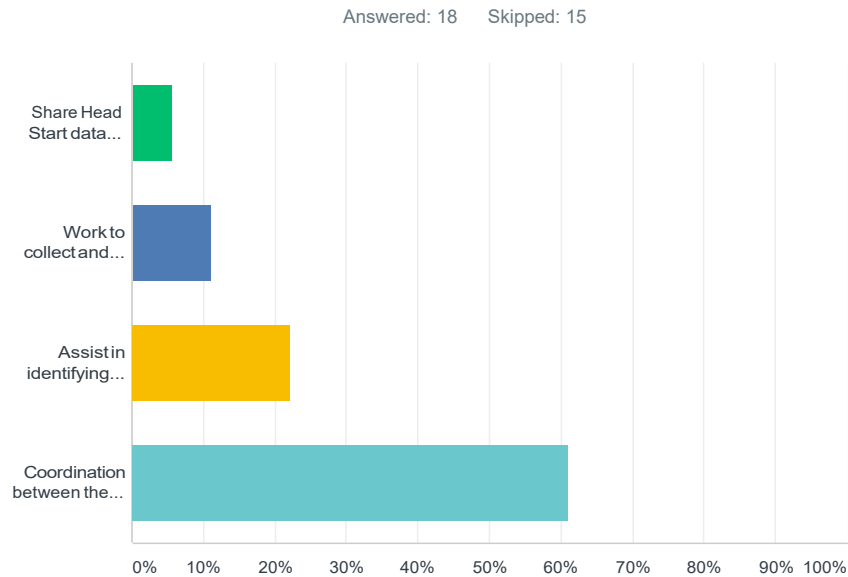| Answer choices	Responses	
Eligibility requirement differences between EHS and child care assistance requirements.	60.00%	3
The child care assistance application process.	60.00%	3
Finding available child care services that will work with the EHS and family work schedule.	20.00%	1
Finding quality child care that will work with the EHS and family work schedule.	20.00%	1
Identifying and using high quality child care services in tandem with EHS.	20.00%	1
Easily accessing the Child Care Aware system.	20.00%	1
Family resistance to using child care assistance.	0.00%	0

Data Collection System

Data collection, particularly of longitudinal data, came up frequently on the survey and in discussion with directors as important. Coordination between Head Start data and the PK-12 system was strongly identified as the most important area to address in terms of data in the next year. Professional development on effective data collection and interpretation on sharing relevant early childhood data with programs were also selected.

Improving Ability to Collect Data

Respondents were asked to identify which practices and tools would be most useful to them in data collection and integration.

Data Collection Efforts: Work with state efforts to collect data regarding ECE program and child outcomes. Which one of these would be most helpful to focus on in the next year?

Answered: 18   Skipped: 15

Answer choices	Responses	
Share Head Start data statewide with programs and partners to further Head Start mission	5.56%	1
Work to collect and share other relevant early childhood data with Head Start programs	11.11%	2
Assist in identifying training opportunities on effective data collection and interpretation	22.22%	4
Coordination between the Head Start data system(s) and Pk-12 systems that include the assignment of unique state identifiers (STARS) that remain with students throughout their Pk-12 public education so that Head Start participants can be included in state data collection efforts, longitudinal studies, and tracking systems to demonstrate long-term educational outcomes.	61.11%	11

Barriers to Collecting Data in EHS/HS Programs

Respondents were asked to identify the biggest barriers to effective sharing and use of data. Barriers of lack of time to enter and track data were the highest identified. Difficulties in interpreting and using data for programmatic assessment and lack of ability to track longitudinally were the next highest responses. These barriers are both a staff training issue as well as system barriers of data and access.

Data Collection: What are the biggest barriers to sharing and using data about ECE in the next year? (Please choose up to three choices or check the "no problems" option)

Answered: 17   Skipped: 16
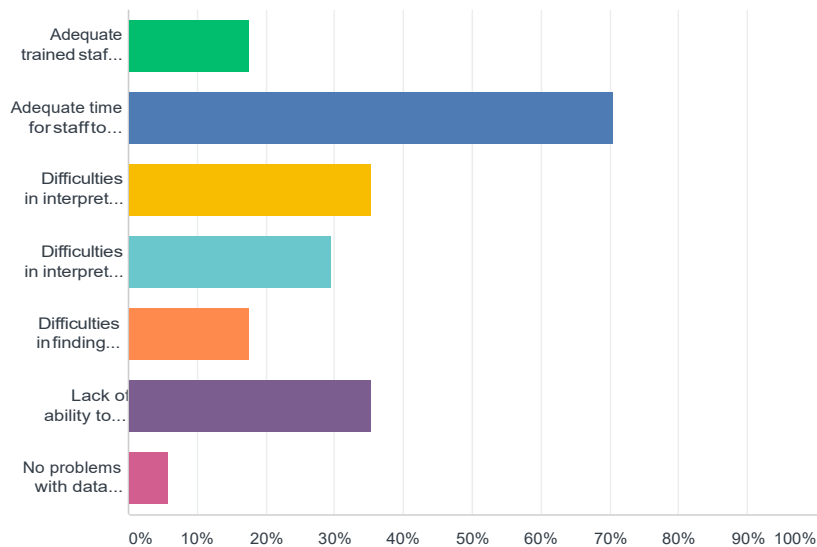
Answer choices	Responses	
Adequate trained staff to track and enter data	17.65%	3
Adequate time for staff to track and enter data	70.59%	12
Difficulties in interpreting and using data for programmatic assessment	35.29%	6
Difficulties in interpreting and using data for instructional assessment and interventions	29.41%	5
Difficulties finding clear and relevant data on ECE and other factors that affect EHS/HS children	17.65%	3
Lack of ability to track and use longitudinal data on long-term outcomes	35.29%	6
No problems with data collection	5.88%	1

The HSCO cannot directly address the first and third priorities. System work on streamlining data collections, encouraging professional development and coaching opportunities, and continuing the work with DPI around integration of HS programs into the states longitudinal data system (SLDS) system will help individual programs and Head Start in North Dakota.

Useful Data

Data is not useful unless users can find and interpret the data correctly and apply the data to help identify and address areas of needed program and practice change. Lack of ability to track and use longitudinal data on long-term outcomes are important barriers noted by respondents. Respondents identified types of data most useful to them:

• Tracking Head Start children data through third grade (5)

- Was the child ready for kindergarten when they entered(2)
- Graduation rate of Head Start children (1)
- Child outcomes data (2)
- Well child, Immunization, and dental (1)

Collaboration with Bright & Early ND (QRIS)

The Bright & Early program is the QRIS program in North Dakota. The highest priorities in the questions about collaboration with QRIS was equally selected included reducing the duplication of training that Head Start program staff already receive from other sources and implementing an alternative pathway. The second most selected category was facilitate communication between Head Start and the Bright & Early ND.

Collaboration with QRIS: In North Dakota, Bright & Early ND is the QRIS (Quality Rating Improvement System). What are the most important areas to focus on in the next year? (Please choose up to three choices)

Answered: 14   Skipped: 19
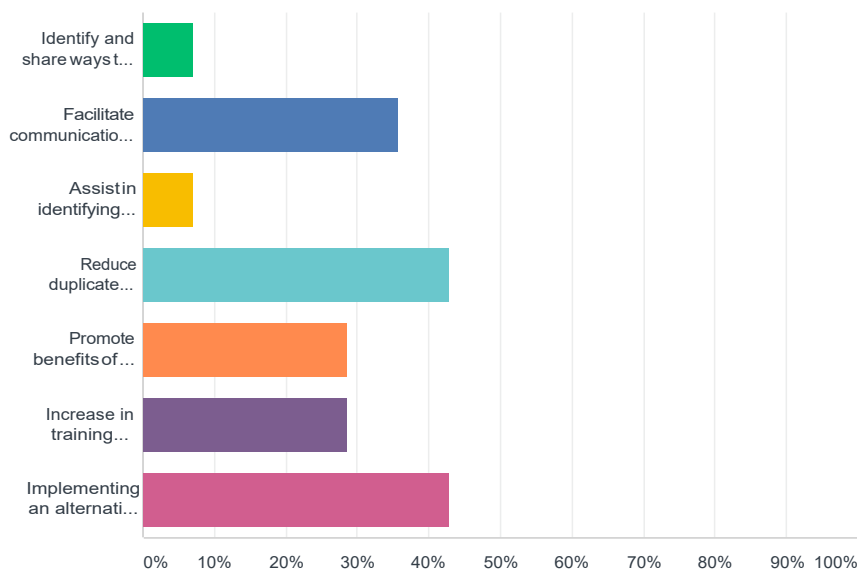
Answer choices	Responses	
Identify and share ways to increase the level of EHS/HS participants in the Bright & Early ND program	7.14%	1
Facilitate communication between Head Start and Bright & Early ND	35.71%	5
Assist in identifying ways to limit impact of EHS/HS staff turnover on Bright & Early ND Quality levels	7.14%	1
Reduce duplicate training requirements for HS/EHS staff in the Bright & Early Program	42.86%	6
Promote benefits of how QRIS supports and aligns with Head Start Performance Standards	28.57%	4
Increase in training available on assessment, outcomes and connection between QRIS requirements and Developmentally Appropriate Practices (DAP)	28.57%	4
Implementing an alternative pathway to Bright & Early ND	42.86%	6

Factors that are most important for HS programs to fully Use the STARS to Quality program:

Respondents were asked to identify areas that were most important to fully use the Bright & Early ND program in the next year. The major areas identified were accessing trainings at a time and a place convenient for staff along with resources needed for Bright & Early participation (time, program investments etc.). The next highest was communication about Bright & Early.

Bright & Early ND: What factors are the most important for your program to fully use the Bright & Early ND program? (Please choose up to three choices)

Answered: 13   Skipped: 20
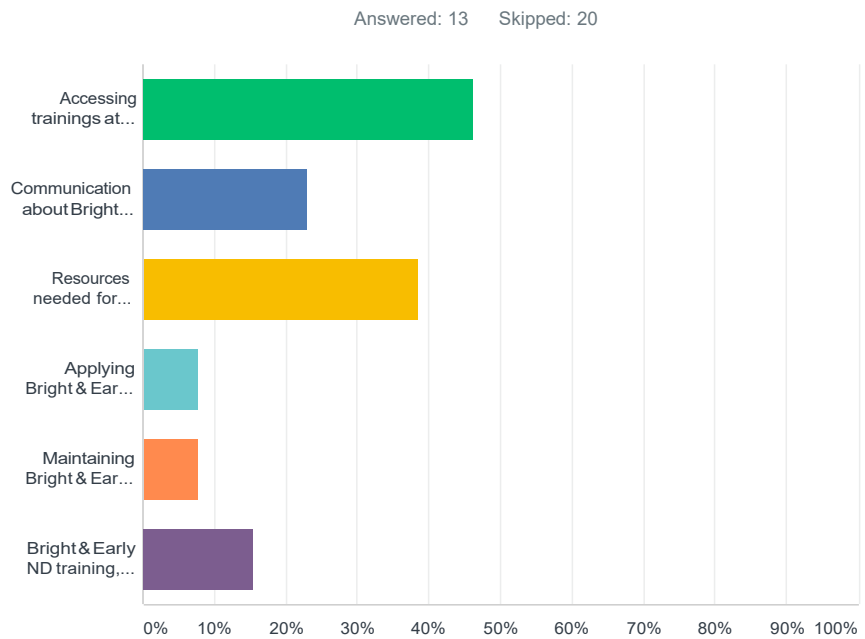
Answer choices	Responses	
Assessing trainings at time and places convenient for Staff	46.15%	6
Communication about Bright & Early ND program	23.08%	3
Resources needed for Bright & Early ND Participation (time, program investments, changes within own programs, etc)	38.46%	5
Applying Bright & Early ND practices and percept to EHS/HS programs	7.69%	1
Maintaining Bright & Early ND levels with departure of staff	7.69%	1
Bright & Early ND training, coaching, and support	15.38%	2

There were two open ended questions included in the survey about Bright & Early ND in the coming grant year. Below are those responses:

What has been the biggest benefit to your program or staff due to participating in Bright & Early ND?

(8 responses)

- Not currently Participating (2)
- Access to entry level training
- Unknow
- Difficult partnership-Growing Futures is hard to navigate
- NA (3)

What has been the biggest benefit to your program or staff due to participating in Bright & Early ND?
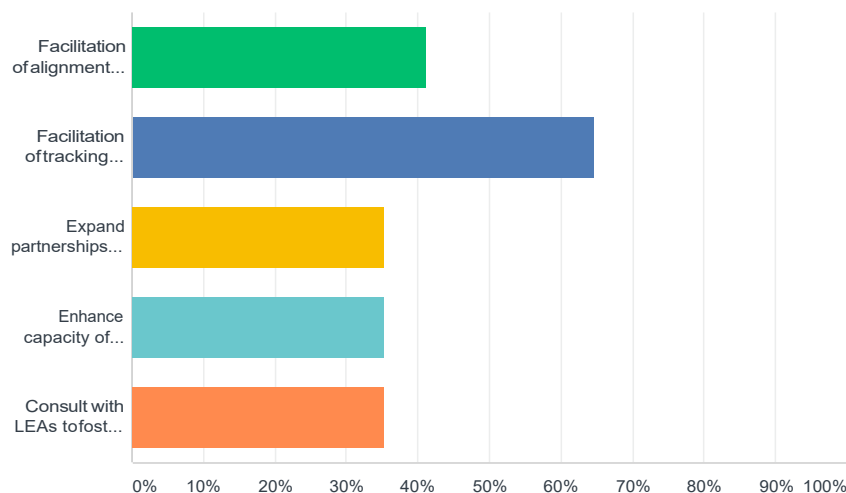
(8 responses)

- Time to set up with Head Start program
- Lack of appropriate staff
- Growing Futures
- Training options are limited
- Unsure
- NA (3)

School Transitions

For school transitions the highest priority for programs is facilitation of tracking of HS students as they enter and progress through K-12. The second priority that was identified by programs is facilitation of alignment by Early Learning Outcomes Framework (ELOF) with ND Kindergarten Standards & Curricula.

School Transitions: Of the following choices, what would you like to see improve in the next year? (Please select three choices)

Answered: 17   Skipped: 16

Answer choices	Responses	
Facilitation of alignment by Early Learning Outcomes Framework (ELOF) with ND Kindergarten Standards & Curricula	41.18%	7
Facilitation of tracking EHS/HS student outcomes as they enter and progress through public school.	64.71%	11
Expand partnerships with local education agencies, including pre-kindergarten and transition-to-kindergarten programs	35.29%	6
Enhance capacity of Head Start agencies to provide services to dual language learners and their families, and to promote and support appropriate curricula for children with limited English	35.29%	6
Consult with LEAs to foster understanding of Head Start comprehensive services, to align curricula and assessments, and to promote partnerships between Head Start and local educational agencies	35.29%	6

State and Regional Priority Impacts

Health services had the highest number of responses for high and moderate impact. Workforce priorities were similar with having a high impact and a close second response in moderate impact. Enrollment had a more mixed response of high impact, moderate impact and limited impact. However, important information to consider is the fact that few communities are experiencing enrollment issues.

Survey respondents were asked to identify the impact of state and regional priority areas on their programs. This question focused on vulnerable populations and specific service areas.

Regional HSCO Priorities: Please indicate the level of impact addressing each of these priorities has on your EHS/HS program and the families and children you serve.				
Answer Options	**High Impact**	**Moderate Impact**	**Limited Impact**	**Response Count**
Health Services	8	8	0	16
Workforce	7	5	3	15
Enrollment	6	5	4	15

HSCO-Program Partnerships Role for State and Regional Priorities

Survey respondents were asked what kind of role they would like the HSCO to play in collaboration with the individual programs, ranging from "as-needed" communication to ongoing, extensive collaboration on projects. Respondents are quite clear in the level of participation for each priority. Most want regular communication, and a few are interested in work on specific projects. Regular communication was the most frequently identified partnership role for all regional priorities.

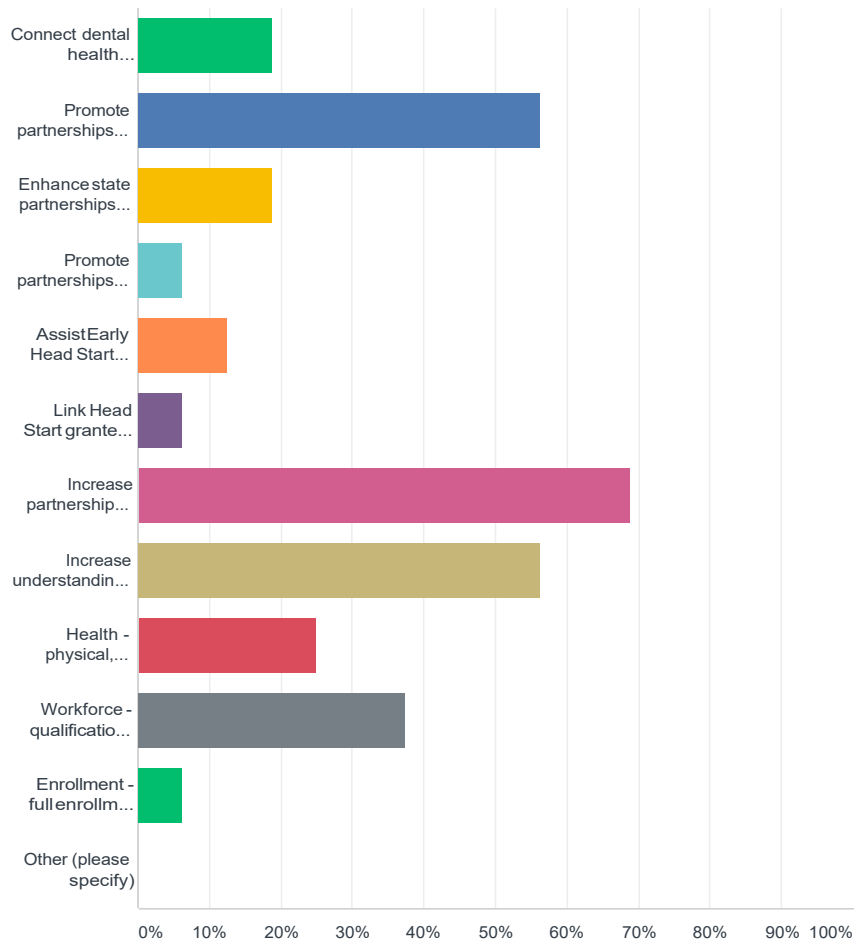| HSCO Priorities: Please choose the role that best characterizesthe level of partnership you would like to have between your program and the State Collaboration Office on the following three HSCO Regional Priorities in the next year.					
Answer Options	**Information shared from HSCO office on an "as needed" basis**	**Regular communication between my program and HSCO office**	**Work on specific project or objectives within this priority**	**Ongoing collaboration and work**	**Total**
Health Services	3	7	4	3	17
Workforce	1	7	5	3	16
Enrollment	1	9	3	3	16

Mental and Physical Health Services

Both mental and physical health is essential for proper development. Respondents were asked to identify the three issues within this domain that were highest priority for the next year. Increased partnerships with state mental health initiatives for low income children was identified as a top priority, followed by increasing understanding of Adverse Childhood Experiences (ACEs) and ongoing, periodic screening services.

Health Services: Of the following physical, mental, and oral health factors, what do you think is most important to improve in the next year? (Please choose up to three choices)
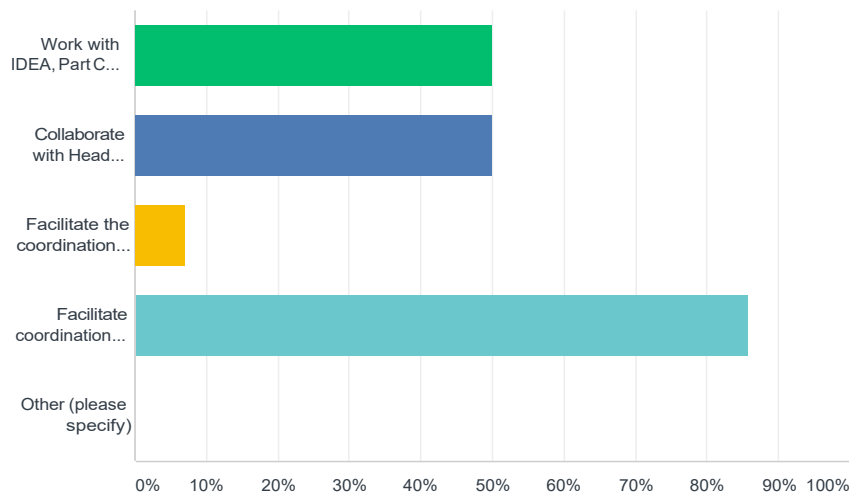
Answered: 16   Skipped: 17

Answer choices	Response percentage	Response Count
Connect dental health providers to programs so all Head Start children have a dental home	18.75%	3
Promote partnerships to ensure all eligible children receive the full range of Early Periodic Screening, Diagnosis, and Treatment (EPSDT), services through Federally Qualified Health Centers (FQHCs), community clinics, and private providers, and that all necessary follow-up is completed for physical, mental, and oral health	56.25%	9
Enhance state partnerships to ensure all children are enrolled in health insurance	18.75%	3
Promote partnerships to support the unique needs of Early Head Start grantees through linkages with community services such as Women, Infants, and Children (WIC), La Leche League, Public Health Nursing, and others	6.25%	1
Assist Early Head Start agencies that serve pregnant women to identify community resources that provide prenatal and post- partum education and care, including mental health services	12.50%	2
Link Head Start grantees with state and regional representatives of the Environmental Protection Agency (EPA) to promote joint initiatives to protect children from environmental hazards such as secondhand, third hand smoke, asthma triggers, pests, and pesticides	6.25%	1
Increase partnership with state mental health initiatives to ensure that low income children receive comprehensive mental health services.	68.75%	11
Increase understanding of early childhood trauma, toxic stress, Adverse Childhood Experiences (ACEs), and how Head Start programs can better educate staff and parents on this topic	56.25%	9
Health - physical, mental, dental (HS Act 642B(a)(4)(B)(i), access/follow up, obesity, opioids, mindfulness, and supporting Safe Foundations, Healthy Futures Campaign by brining resources from the State to Programs and sharing resources with State partners	25.00%	4
Workforce - qualification, turnover, retention, training, professional development, higher education, data.	37.50%	6
Enrollment - full enrollment initiative - supporting programs with State partners data on eligible children and underserved populations to assist grantees with the ongoing outreach to the community. (Reference for full enrollment initiative for grantees ACF-PI-HS-18-04)	6.25%	1
Other (please specify)	0.00%	0

Services to Children with Disabilities

Facilitate coordination between Head Start and Early Head Start grantees, local Education Agencies (LEAs), Part C/Early Identification for approaches that promote the timely referral, evaluation, and transition of children from Head Start into elementary school in accordance with federal, state were the top areas for focus in the next year.

Services to Children with Disabilities: Of the following choices, what do you think are the most important areas to focus on in the next year? (Please choose up to three choices)

Answered: 14   Skipped: 19

Answer choices	Response percentage	Response Count
Work with IDEA, Part C and Part B, to promote policies and practices that support the effective inclusion of Head Start and Early Head Start children with disabilities	50.00%	7
Collaborate with Head Start, Early Head Start, Part C, Part B, and other partners on statewide interagency activities, agreements, training, and MOUs addressing the needs of families with children who have special needs	50.00%	7
Facilitate the coordination and participation of local Head Start personnel in the state's child identification efforts (Child Find) and other early identification activities.	7.14%	1
Facilitate coordination between Head Start and Early Head Start grantees, local Education Agencies (LEAs), and PartC/Early Identification for approaches that promote the timely referral, evaluation, and transition of children from Head Start into elementary school in accordance with federal, state, and local requirements.	85.71%	12
Other (please specify)	0.00%	0

Services to Children Experiencing Homelessness

HSCO in the next year could be the most helpful by focusing on promoting partnerships that support Head Start programs in addressing barriers to servicing children and families that are experiencing homelessness. The HSCO can assist programs in using the T/TA network to coordinate the needs of Head Start agencies and the community to strengthen practices for serving children and families experiencing homelessness. Another focus area could be on assisting in enabling partnerships with state level entities including HUD and state homeless directors and as well as enhancing coordination between Head Start agencies, state and local McKinney-Vento coordinators or directors.

Services to children who are experiencing homelessness: Of the following choices, what do you think are the most important areas to focus on in the next year? (Please choose up to three choices)

Answered: 15   Skipped: 18
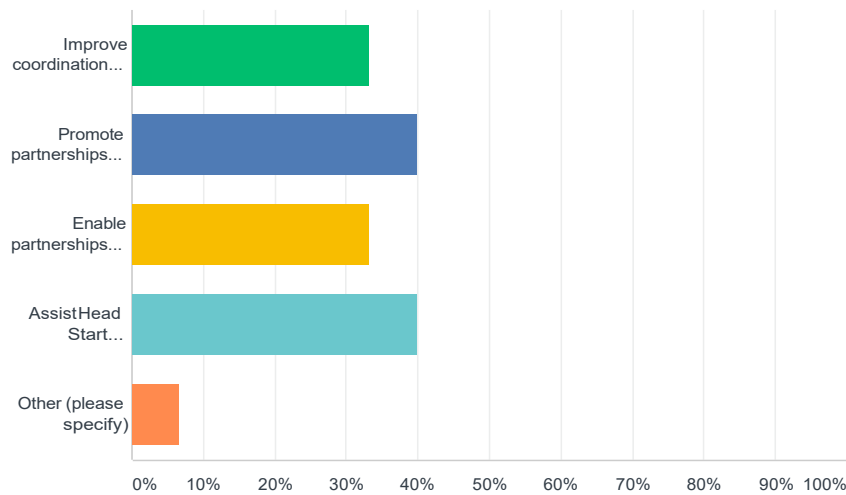
Answer choices	Response percentage	Response Count
Improve coordination between Head Start agencies and state and local McKinney-Vento coordinators or directors.	33.33%	5
Promote partnerships that support Head Start agencies in addressing barriers to serving children and families experiencing homelessness.	40.00%	6
Enable partnerships between Head Start agencies, Housing and Urban Development (HUD) continuum of Care networks, and state homeless education directors.	33.33%	5
Assist Head Start state-based T/TA providers to coordinate the needs of Head Start agencies and the community to strengthen practices for serving children and families experiencing homelessness	40.00%	6
Other (please specify)	6.67%	1

Family and Community Partnerships

Respondents identified assist Head Start agencies in developing public and private partnerships to increase and coordinate resources for Head Start and other early childhood programs as a top priority. Promotion of the Parent, Family, and Community Engagement Framework and increase state and community partner's awareness of the EHS/HS model and the benefits these programs provide also were considered of importance.

Family and Community Partnerships: Of the following choices, what do you think are the most important areas to focus on in the next year? (Please check up to three choices)

Answered: 16   Skipped: 17
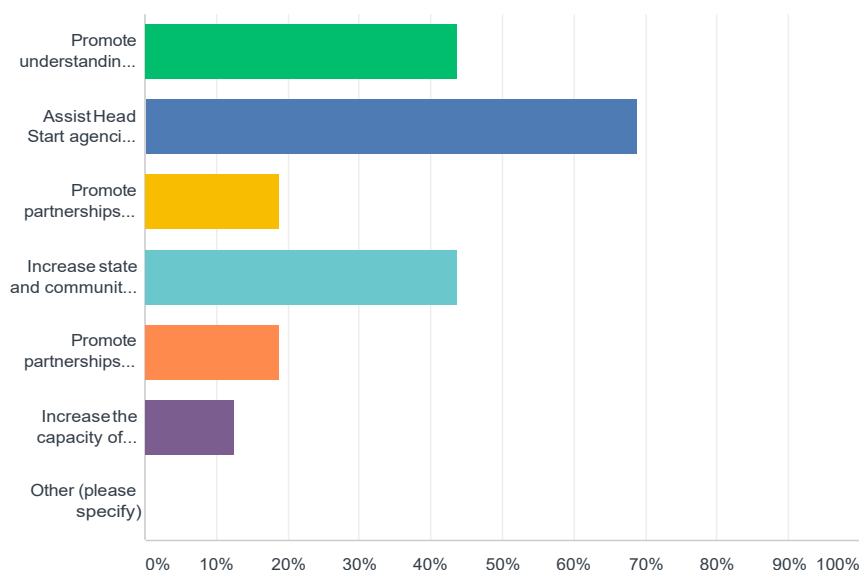
Answer choices	Response percentage	Response Count
Promote understanding of the Parent, Family and Community Engagement Framework among Head Start grantees and other early child care partners.	43.75%	7
Assist Head Start agencies in developing public and private partnerships to increase and coordinate resources for Head Start and other early childhood programs.	68.75%	11
Promote partnerships between Head Start agencies and local early childhood coalitions	18.75%	3
Increase state and community partner's awareness of the EHS/HS model and the benefits these programs provide.	43.75%	7
Promote partnerships between Head Start agencies, community partners, and other organizations to improve support for military families.	18.75%	3
Increase the capacity of Head Start grantees to collaborate with local museums, public and school libraries, and other resources to provide learning experiences for Head Start children.	12.50%	2
Other (please specify)	0.00%	0

Early Head Start and Head Start Program Enrollment

A majority of respondents listed lack of capacity to serve applicants either eligible or over income as their most important factors impacting enrollment.

EHS/HS Enrollment: Please choose the most important factor that affects enrollment in your EHS/HS programs. (Choose the mostimportant option. Please use comments to identify other priorities or factors that affect enrollment.)

Answered: 16   Skipped: 17
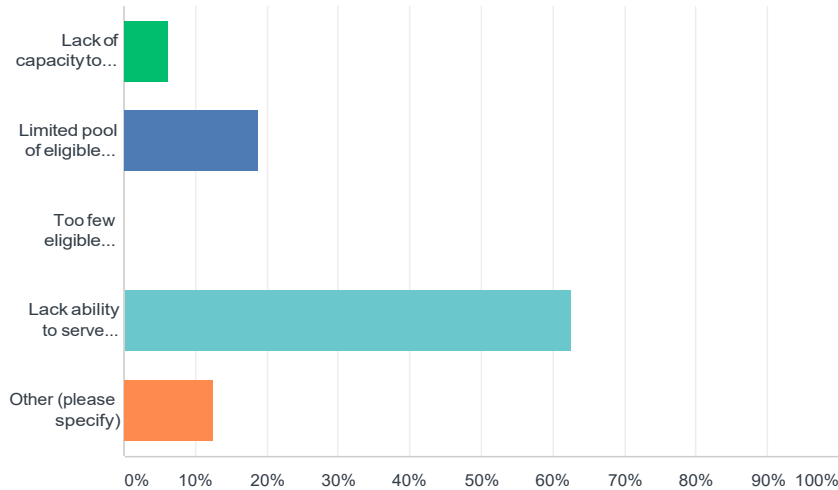
Answer choices	Response percentage	Response Count
Lack of capacity to serve eligible applicants	6.25%	1
Limited pool of eligible families and children in service area	18.75%	3
Too few eligible families apply	0.00%	0
Lack ability to serve families who are ineligible (primarily 130-200% of FPL), but could really use EHS/HS services	62.50%	10
Other (please specify)	12.50%	2

At the end of the survey there was an open-ended question about HSCO support in the coming grant year. Below are those responses:

Please identify one or more things that the HSCO could address in the next year to support the work your program does in your community? (10 responses)

- More funding
- Alternative funding options-partnerships with LEA
- Access to the State Background checks system
- Turnaround time for Background checks
- Collecting and sharing data back and forth with K-12 system
- Staffing-recruitment and retention
- Increase promotion of Head Start success on a statewide level
- Education for all communities around Head Start services and success

- More advertising of Head Start program
- More collaboration
- Work with grantees to ensure they are run on a similar model

Conclusion:

Within each section the HSCO has highlighted the areas which are the highest ranked and or highest need. These sections provide a picture of programmatic needs for the state. Through the different tables and graphs a picture of the needs of EHS/HS programs in North Dakota emerges.

Certainly, ongoing professional development around early childhood mental health issues including ACEs, behavioral management and parent engagement are strong needs. These needs were mentioned in multiple responses throughout the survey. Systems alignment work decreased duplication of training seems to also be a strong theme throughout when looking at the Early Childhood system including Bright & Early ND and Licensing. A very strong need that was a pattern was increased partnerships to access high quality workforce and career development opportunities. Lastly, coordinating with the larger Pk-12 system was a strong theme being mentioned in data and areas for HSCO to address in the next year.

The HSCO uses the needs assessment update to revise the HSCO grant goals and workplan in conjunction with the NDHSA and stakeholders. A big thank you goes to all the Directors and staff who complete the needs assessment survey. Input form the NDHSA and stakeholders is critical to understanding programmatic needs within the state system.