



Prepared by Region IX Office of Head Start

CHSA Directors Meeting

October 16, 2017



- ▶ Continuing Resolution through December 8, 2017
- ▶ FY2017 OHS budget was at \$9.168 billion
- ▶ Partial funding for FY2018 operations and T&TA
- ▶ House committee voted a minimal increase to FY2018 Head Start budget

Duration Equations



- ▶ HS CB must provide at least 1,020 hours
 - For programs layering HS funded portion of CB with other funding, expectation is at least or more than 1,020 hours
- ▶ EHS CB must provide at least 1,380 hours by August 1, 2018
- ▶ HS CB must provide 50% of enrollment at 1,020 hours by August 1, 2019
- ▶ **Secretarial determination (HS CB Duration)**
 - 1302.21 (C)(3)(i) - On or before **February 1, 2018**, the Secretary may lower the required percentage described in paragraph (c)(2)(iii) of this section, based on an assessment of the availability of sufficient funding to mitigate a substantial reduction in funded enrollment;

EHS Expansion & EHS-CC Partnerships



- EHS-CCP Program Schedule (Hours of Service) follows Funding Opportunity Announcement (FOA) .
 - Up to 10 hours a day, 5 days per week, 48 weeks a year or more than 1,380 hours.



WHAT

WHAT IS AMS 2.0?

Like the new HSPPS, it's more streamlined, efficient, and focused on programs' use of data, progress, and outcomes.

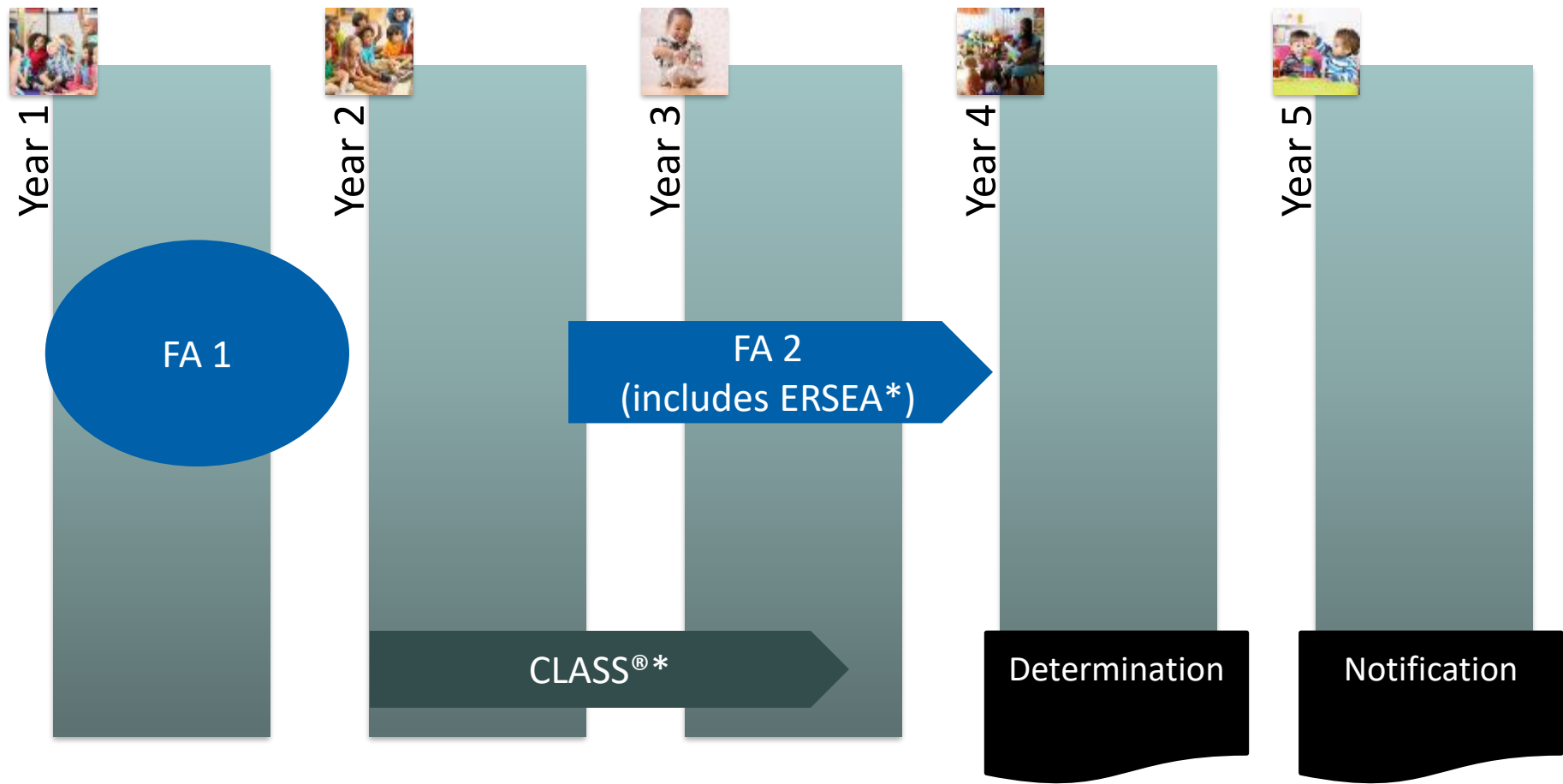
AMS 2.0 consists of three reviews: Classroom Assessment Scoring System® (CLASS®), Focus Area 1, and Focus Area 2.

WHY

WHY WAS AMS 2.0 CREATED?

- To increase alignment with HSPPS
- To reduce the burden monitoring places on grantees, and increase the value of monitoring for all involved

Introducing AMS 2.0: What Reviews are Included in AMS 2.0?



*ERSEA = Eligibility, Recruitment, Selection, Enrollment, and Attendance; CLASS[®] = Classroom Assessment Scoring System[®]



FA 2 is an opportunity for grantees to demonstrate their ability to:



Track and assess their program's performance.



Use data to drive results.



Make adjustments that help promote ongoing continuous improvement.

Why is Full Enrollment So Important?



- ▶ OHS is provided Federal tax dollars and has committed to utilizing those funds to serve children and families via grantee programs.
- ▶ Our mission is to serve the neediest children and families, to promote school readiness, and to help enhance self-sufficiency of low-income families.

Why is Full Enrollment So Important?



- ▶ We don't have sufficient funding to serve all in need, which makes it critical that we direct the funds we do have to the right places, and that we not waste any of the limited resources we do have at our disposal.



What are some of the challenges to meeting and maintaining full enrollment?



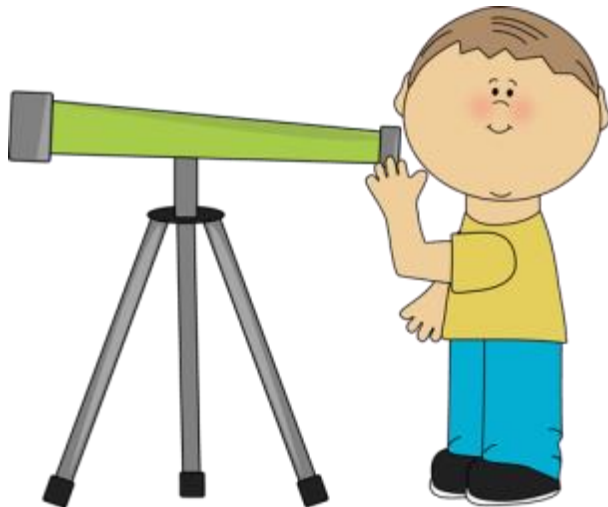
- ▶ Family eligibility
- ▶ Match of program options to family needs
- ▶ Availability of qualified staff and safe environments in order to open classrooms
- ▶ Limited budgets, i.e. bussing

Families have options of where to go and where to enroll their children

How Strong are Our Recruitment Practices?



- ▶ School departments are not, or are not only, enrolling our neediest families
- ▶ Are our recruitment practices as dynamic as they need to be?
- ▶ Are we really finding and serving the neediest families?
- ▶ Are we looking for them if they aren't exactly where they used to be?



Does our Program Design Fit the Community's Needs?



- ▶ Are we offering the right models to meet the needs of families?
- ▶ Are we partnering adequately as a community system to find and serve them all?
- ▶ If the kids and families really aren't there, does the community still need the resources, or would they be better served elsewhere?



* An Important Change in How OHS Assesses Underenrollment



- ▶ Underenrollment is assessed by **program**, not by **grant**.
- ▶ Head Start and Early Head Start are considered separately.
- ▶ Grantees can't address underenrollment in one program by overenrolling in the other.

The OHS Full Enrollment Initiative



- ▶ Regional offices have reviewed data and issued letters, and held meetings with grantees.
- ▶ In collaboration with the Regional Office, grantees develop and implement a plan and timetable to reach full enrollment.
- ▶ Technical assistance is provided on an ongoing basis.
- ▶ The enrollment plan continues for 12 months, then a determination is made by OHS.

Enrollment Reductions are not THE Solution to Underenrollment



- ▶ Conversion or reduction is sometimes appropriate, but isn't a complete plan.
- ▶ Grantees should exhaust other strategies and options before resorting to reductions and conversions that contribute to net slot loss.
- ▶ Even if conversion/reduction requests are approved, the 12 month monitoring of the grantee's enrollment plan continues, and full enrollment must be reached and maintained at new level of funded enrollment.

What Happens if a Grantee Does Not Reach and Maintain Full Enrollment?



- ▶ If full enrollment isn't reached and maintained, OHS can designate a program as “chronically underenrolled.”
- ▶ The grantee's Regional Office will analyze the data, take into consideration the circumstances and any barriers beyond the grantee's control, and make a recommendation to OHS as to whether to designate the program as “chronically underenrolled,” and whether or not to “recapture, withhold, or reduce the base grant for the program.”

What Happens if OHS Determines to “Recapture, Withhold, or Reduce the Base Grant?”



- ▶ Funds are redistributed by the end of the following fiscal year.
- ▶ AIAN funding remains within AIAN region.
- ▶ MSHS funding remains within MSHS region.
- ▶ HS or EHS funding remains within the state where originally funded.



OHS Full Enrollment Initiative - Opportunities



- ▶ Understanding – What have you tried? What haven't you tried? What are the opportunities and barriers?
- ▶ Ongoing Technical Assistance
- ▶ Revisit program vision and strategic plan for the community served



OHS Full Enrollment Initiative – Leveraging Increased Focus on Attendance



- ▶ Grantees report that enhanced focus on promoting attendance is engaging families and supporting ongoing participation in the program.
- ▶ If families stay longer, meaning less enrollment turnover, there is reduced need to continuously replace children transitioning out of enrollment slots.
- ▶ This also provides opportunity to build a better understanding of **why** families leave during the program year.

OHS Full Enrollment Initiative – What All Grantees Need to Do



- ▶ Work with your governing body, Policy Council, community partners, Regional Office, T/TA providers.
- ▶ Use your data.
- ▶ Create a vision for present and future services.
- ▶ Back up the vision with a plan.
- ▶ Back up the plan with action.
- ▶ Ensure ongoing communication.