Community Services of Northeast Texas, Inc.

Head Start

Policy Council Meeting

Tuesday, March 22, 2022 9:00 am

Linden Administrative Kaufman Building Offices

123 Kaufman

Linden, Texas

ZOOM Video/Call

#### **CALL TO ASSEMBLY**

Please rise.

Pledge of Allegiance (US) – I pledge allegiance to the flag of the United States of America and to the Republic for which it stands, one nation, under God, indivisible, with liberty and justice for all.

Pledge of Allegiance (TX) – Honor the Texas flag; I pledge allegiance to thee, Texas, one state under God, one and indivisible.

Community Action Promise - Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to Helping People Help themselves and each other.

**Our CSNT Mission –** CSNT applies all available strategies enabling Northeast Texas families to lead improved, empowered, and self-reliant lives.

Our Head Start Vision – To provide a system of education and encouragement which results in school-readiness for young children and their families.

#### Invocation

- 1. Call Meeting to Order
- 2. Recognize New Policy Council Members
- 3. Establishment of Quorum
- 4. Approval of Agenda
- 5. Approval of Minutes for February 8, 2022
- 6. Presentations
  - A. Policy Council Question
- 7. Reports
  - A. Financial Report
    - 1. Head Start Financial Report March 2022
    - 2. Early Head Start Report March 2022
    - 3. Credit Usage Report March 2022
    - 4. CACFP Financial Report March 2022
  - **B.** Head Start Director Report

1. Head Start Report March 2022

**Bernadette Harris** 

**Shelley Mitchell** 

**Bernadette Harris** 

#### Community Services of Northeast Texas, Inc.

#### **Head Start**

#### **Policy Council Meeting**

Tuesday, March 22, 2022 9:00 am

#### **Linden Administrative Kaufman Building Offices**

123 Kaufman

Linden, Texas

#### **ZOOM Video/Call**

- 2. Early Head Start Report March 2022
- 3. Head Start PIR March 2022
- 4. Early Head Start PIR March 2022
- C. Executive Director Report

Dan Boyd

- 8. Committee Reports
  - A. Appoint Committee Member(s)
  - **B.** Committee Reports
    - 1. Self-Assessment Committee Meeting
- 9. Action Items
  - A. Discuss and/or Approve Self-Assessment Results 2022
  - B. Discuss and/or Approve ERSEA Committee Action Items
    - 1. Head Start Selection Criteria
    - 2. Early Head Start Selection Criteria
    - 3. Head Start Health History Form
    - 4. Early Head Start Health History Form
    - 5. Returning Student Form
    - 6. Medical/Dental Home Form
    - 7. Receipt of Handbook Form
  - C. Discuss and/or Approve Updated Head Start Operating Manuals
    - 1. Education Manual
    - 2. Health Manual
    - 3. Nutrition Manual
- 10. Discussion Items
  - A. Discuss Progress on Head Start Goals
    - 1. Head Start Program Goals 2021-2022
    - 2. Parent, Family and Community Engagement 2021-2022
    - 3. School Readiness Performance Data 2021-2022
  - B. Discuss CLASS Data Winter 2022
  - C. Discuss Assessment Data Winter 2022
    - 1. Circle Assessment Head Start
    - 2. Frog Street Assessment Early Head Start
- 11. Audience Comments
- 12. Executive Session
  - A. Personnel
    - 1. New hires and terminations

Discussion with respect to any matter specifically made confidential by law or regulation. Topics may include, but are not limited to: Approval of new hires, terminations, and employee matters of a confidential nature.

- 13. Required Action from Executive Session
- 14. Adjourn

#### Community Services of Northeast Texas, Inc. Head Start Policy Council Meeting Minutes Tuesday, February 8, 2022 9:00 am Linden Administration Offices 304 East Houston Street Linden, Texas

| PC Attendance           | Campus            | Title          | Sep-21 | Oct-21 | Dec-21     | Jan-22                            |
|-------------------------|-------------------|----------------|--------|--------|------------|-----------------------------------|
| Chairpers               | on - Cecelia Huff |                | X      | X      |            | X                                 |
| Vice Chairpers          | on - Destiny What | tley           | X      |        |            |                                   |
| Secretary               | y - Brittany Lee  |                | X      |        |            |                                   |
| Cecelia Huff            | Bowie County      | Representative | Х      | Х      |            | Х                                 |
| Harmony Roberson        | Atlanta           | Representative | Х      | х      |            | х                                 |
| Whitney Graham          | Atlanta           | Alternate      |        |        |            |                                   |
| LaToya Jones            | Bloomburg         | Representative | Х      | Х      |            | Х                                 |
| Heather Lundy           | Bloomburg         | Alternate      |        |        |            |                                   |
| Brittany Lee            | D/LS              | Representative | Х      |        | _          | <u> </u>                          |
| Meagan Monkhouse        | D/LS              | Alternate      |        |        | NO Meeting | 022                               |
| Payton Wertz            | Hughes Springs    | Representative | Х      |        | lee        | 3/2                               |
| Simone Frazier          | Hughes Springs    | Alternate      |        |        | 2          | 7/0                               |
| Catrice Boyd            | Hughes Springs    | Representative | Х      | Х      | ž          | 0,                                |
|                         | Hughes Springs    | Alternate      |        |        |            | d to                              |
| Robyn Goins(10/26/2021) | Naples            | Representative |        | Х      |            | <del> </del>                      |
| Robyn Goins             | Naples            | Alternate      | Х      |        |            | pe                                |
| Destiney Whatley        | New Boston        | Representative | Х      |        |            | ch                                |
| Dora Doyle              | New Boston        | Alternate      |        |        |            | es                                |
| Shanequa Harris         | Pittsburg         | Representative | Х      | х      |            | Meeting rescheduled to 02/08/2022 |
| Deidra Wilkerson        | Pittsburg         | Alternate      |        |        |            | etir                              |
| Kia Hamilton            | Texarkana         | Representative |        |        |            | Me                                |
| Jessica Martinez        | Texarkana         | Alternate      |        |        |            |                                   |

**Others in attendance: CSNT Staff**: Bernadette Harris, Bridgette Parton, Michelle Morehead, Susan Horner, Charlotte Hall, Shelley Mitchell, Frances Evans and Robbie Hudson.

**1. <u>Call to Order:</u>** The meeting was called to order by Cecelia Huff, Policy Council Chairperson at 9:00 am, February 8, 2022, on the ZOOM Conference.

#### 2. Recognize New Policy Council Members:

None

#### 3. Establishment of Quorum:

Quorum was established with the following Policy Council Members present: Cecelia Huff, Harmony Roberson and Latoya Jones.

#### 4. Approval of Agenda:

Members reviewed the agenda. Latoya Jones moved to accept the agenda. This motion was seconded by Harmony Roberson. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

#### 5. Approval of Minutes from October 26, 2021:

Harmony Roberson moved to accept the minutes of October 26, 2021 meeting as presented. The motion was seconded by Latoya Jones. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

#### 6. Presentations:

#### A. Eligibility Final Rule Training

Bridgette Parton trained the members on the Eligibility Requirements.

#### 7. Reports:

#### A. Financial Report

Shelly Mitchell gave the financial report as presented.

#### **B. Head Start Report**

Bernadette Harris gave the Head Start Report as presented.

#### **C. Executive Directors Report**

Michelle Morehead stated that she and Mr. Boyd attended an Energy Summit last week for the CEAP Program.

#### 8. Committee Reports:

#### A. Appoint Committee Members

#### B. Committee Report

a. Health Services Advisory Committee Report

Susan Horner provided information on items discussed at the Committee Meeting.

#### 9. Action Items:

#### A. Discuss and/or Approve Personnel Policies

- 1. #704 Absenteeism and Job Abandonment
- 2. #706 Return of Property
- 3. #708 Resignation

Bernadette Harris reviewed the Personnel Policies. Harmony Roberson moved to approve the Personnel Policies as presented. Latoya Jones seconded the motion. The motion was put to a vote with a majority of members voting in favor by signaling aye. The motion carried.

#### 10. Discussion Items:

#### A. Discuss CLASS Fall 2021 Data

Robbie Hudson reviewed the CLASS Fall 2021 Data as presented.

#### B. Discuss School Readiness Performance Fall 2021 Data

Frances Evans reviewed the School Readiness Performance Fall 2021 Data as presented.

#### C. Discuss Parent, Family and Community Engagement Goals Fall 2021 Progress

Bridgette Parton reviewed the Parent, Family and Community Engagement Goals Fall 2021 Progress as presented.

#### D. Discuss Head Start Program Goals Fall 2021 Progress

Bridgette Parton reviewed the Head Start Program Goals Fall 2021 Progress as presented.

#### E. Discuss Detailed Monitoring Summary of Results Grantee 06CH011282/03

Bernadette Harris reviewed the Detailed Monitoring Summary of Results Grantee 06CH011282/03 as presented.

#### 11. Audience Comments:

None

#### 12. Executive Session:

Harmony Roberson moved for Policy Council to go into Executive Session at 10:00 am. Latoya Jones seconded the motion.

Discuss new hires, terminations, transfers and employee matters of a confidential nature.

Latoya Jones made a motion to come back into regular session at 10:03 am. Harmony Roberson seconded the motion.

#### 13. Required Action from Executive Session:

A motion was made by Latoya Jones to accept new hires, transfers, and terminations as presented. The motion was seconded by Harmony Roberson. There was no discussion of the matter. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

#### 14. Adjourn:

A motion to adjourn was made by Latoya Jones at 10:04 am. The motion was seconded by Harmony Roberson.

Minutes Submitted by: Bridgette Parton

Minutes approved by:

### **Head Start**

#### Financial Report for the month of March 2022

(February 2022 Expenditures)

| (February 2022 Expend)    | tures)              |              |               |                      | Monthly                               | YTD          |              |
|---------------------------|---------------------|--------------|---------------|----------------------|---------------------------------------|--------------|--------------|
| Funding Source            | Amount Funded       | Expenditures | Total To Date | Balance              | Budget                                | Budget       | (Over)/Under |
| 12 month program endin    |                     | <u> </u>     | <u> </u>      | <u>= ********</u>    | <u>=g.:</u>                           |              |              |
|                           |                     | ¢1.47.006.56 | \$390,504.82  | \$1,699,551.18       | \$174,171.33                          | \$522,514.00 | \$132,009.18 |
| Personnel                 | \$2,090,056.00      | \$147,886.56 | *             |                      | · · · · · · · · · · · · · · · · · · · | \$128,016.00 | \$15,196.34  |
| Fringe Benefits           | \$512,064.00        | \$38,960.67  | \$112,819.66  | \$399,244.34         | \$42,672.00                           | •            | •            |
| Travel (4120)             | \$10,000.00         | \$0.00       | \$0.00        | \$10,000.00          | \$833.33                              | \$2,500.00   | \$2,500.00   |
| Equipment                 | \$35,000.00         | \$0.00       | \$0.00        | \$35,000.00          | \$2,916.67                            | \$8,750.00   | \$8,750.00   |
| Supplies                  | \$174,635.00        | \$20,400.16  | \$22,638.02   | \$151,996.98         | \$14,552.92                           | \$43,658.75  | \$21,020.73  |
| Contractual               | \$276,650.00        | \$0.00       | \$0.00        | \$276,650.00         | \$23,054.17                           | \$69,162.50  | \$69,162.50  |
| Facilities / Construction | \$0.00              | \$0.00       | \$0.00        | \$0.00               | \$0.00                                | \$0.00       | \$0.00       |
| Other (4120)              | \$30,381.00         | \$3,108.93   | \$3,408.93    | \$26,972.07          | \$2,531.75                            | \$7,595.25   | \$4,186.32   |
| Other (4122)              | \$830,469.00        | \$71,403.23  | \$188,920.90  | \$641,548.10         | \$69,205.75                           | \$207,617.25 | \$18,696.35  |
| Total                     | \$3,959,255.00      | \$281,759.55 | \$718,292.33  | \$3,240,962.67       | \$329,937.92                          | \$989,813.75 | \$271,521.42 |
| T&TA                      | \$40,381.00         | \$3,108.93   | \$3,408.93    | \$36,972.07          | \$3,365.08                            | \$10,095.25  | \$6,686.32   |
| Total                     |                     |              |               |                      |                                       |              |              |
| USDA Reimbursements       | through January 20  | 22           |               |                      |                                       |              | \$17,231.38  |
| Estimated USDA Reiml      | -                   |              |               |                      |                                       |              | \$10,355.71  |
|                           |                     | •            |               | Resulting (over)/unc | ler with USDA                         | =            | \$299,108.51 |
| * Total Over/Under withou | at USDA             |              |               |                      | Further Analys                        | zic          |              |
| Total Over/Onder withou   | ii OBDA             |              |               |                      | Number of chil                        |              | 465          |
| Accruals:                 |                     |              |               | \$4.00               | Number of clas                        |              | 26           |
| Actual year end payroll   | accrual \$74,000,00 |              |               | Ψ1.00                | Trainiber of Clas                     | 31 001113    |              |
| Actual year end payton    | acciuai \$74,000.00 |              |               |                      | Monthly                               | YTD          |              |
|                           | Amount Funded       | Expenditures | Total To Date |                      | Budget                                | Budget       | (Over)/Under |
| Per Classroom             | \$152,279.04        | \$10,836.91  | \$27,626.63   |                      | \$12,689.92                           | \$38,069.76  | \$10,443.13  |
| Per Child                 | \$8,514.53          | \$605.93     | \$1,544.71    |                      | \$709.54                              | \$2,128.63   | \$583.92     |
|                           |                     |              |               |                      |                                       |              |              |

| IN-KIND (Non-Federal Share) |              |              |              |
|-----------------------------|--------------|--------------|--------------|
| Needed                      | This month   | Total        | Still need   |
| \$989,814.00                | \$146,855.15 | \$428,778.05 | \$561,035.95 |

### **Head Start C5**

#### Financial Report for the month of March 2022

(February 2022 Expenditures)

| <b>Funding Source</b> | Amount Funded | <b>Expenditures</b> | Total To Date | <b>Balance</b> |
|-----------------------|---------------|---------------------|---------------|----------------|
| program ending 03/31. | /2023         |                     |               |                |
| Supplies              | \$59,327.00   | \$2,816.97          | \$60,590.11   | \$373.59       |
| Other                 | \$78,200.00   | \$9,495.24          | \$58,953.41   | \$17,609.89    |
| Total                 | \$137,527.00  | \$12,312.21         | \$119,543.52  | \$17,983.48    |

### **Head Start C6**

#### Financial Report for the month of March 2022

(February 2022 Expenditures)

| <b>Funding Source</b> | <b>Amount Funded</b> | <b>Expenditures</b> | Total To Date | <b>Balance</b> |
|-----------------------|----------------------|---------------------|---------------|----------------|
| program ending 03/31/ | /2023                |                     |               |                |
| Personnel             | \$254,594.00         | \$0.00              | \$225,856.81  | \$28,737.19    |
| Supplies              | \$111,556.00         | \$0.00              | \$0.00        | \$111,556.00   |
| Other                 | \$180,591.00         | \$0.00              | \$0.00        | \$180,591.00   |
| Total                 | \$546,741.00         | \$0.00              | \$225,856.81  | \$320,884.19   |

# **Early Head Start**

#### Financial Report for the month of March 2022

Needed

\$59,148.00

This month

\$2,165.05

(February 2022 Expenditures)

| Funding Source 12 month program endi | Amount Funded        | Expenditures        | Total To Date | Balance              | Monthly<br><u>Budget</u> | YTD<br><u>Budget</u> | (Over)/Under |
|--------------------------------------|----------------------|---------------------|---------------|----------------------|--------------------------|----------------------|--------------|
| Personnel                            | \$132,084.00         | \$7,553.40          | \$22,286.45   | \$109,797.55         | \$11,007.00              | \$33,021.00          | \$10,734.55  |
| Fringe Benefits                      | \$32,361.00          | \$4,123.34          | \$12,177.47   | \$20,183.53          | \$2,696.75               | \$8,090.25           | (\$4,087.22) |
| Travel (4120)                        | \$2,190.00           | \$0.00              | \$0.00        | \$2,190.00           | \$182.50                 | \$547.50             | \$547.50     |
| Equipment                            | \$0.00               | \$0.00              | \$0.00        | \$0.00               | \$0.00                   | \$0.00               | \$0.00       |
| Supplies                             | \$19,000.00          | \$1,167.84          | \$1,167.84    | \$17,832.16          | \$1,583.33               | \$4,750.00           | \$3,582.16   |
| Contractual                          | \$0.00               | \$0.00              | \$0.00        | \$0.00               | \$0.00                   | \$0.00               | \$0.00       |
| Facilities / Construction            | n \$0.00             | \$0.00              | \$0.00        | \$0.00               | \$0.00                   | \$0.00               | \$0.00       |
| Other (4120)                         | \$3,067.00           | \$1,562.87          | \$1,562.87    | \$1,504.13           | \$255.58                 | \$766.75             | (\$796.12)   |
| Other (4122)                         | \$47,890.00          | \$2,344.76          | \$6,297.27    | \$41,592.73          | \$3,990.83               | \$11,972.50          | \$5,675.23   |
| Total                                | \$236,592.00         | \$16,752.21         | \$43,491.90   | \$193,100.10         | \$19,716.00              | \$59,148.00          | \$15,656.10  |
| Т&ТА                                 | \$5,257.00           | \$1,562.87          | \$1,562.87    | \$3,694.13           | \$438.08                 | \$1,314.25           | (\$248.62)   |
| Total                                |                      |                     |               |                      |                          |                      |              |
| USDA Reimbursements                  | s through January 20 | 22                  |               |                      |                          |                      | \$1,924.99   |
| Estimated USDA Reim                  | bursement for Febru  | ary 2022            |               |                      |                          |                      | \$1,393.40   |
|                                      |                      |                     |               | Resulting (over)/und | er with USDA             | =                    | \$18,974.49  |
| * Total Over/Under witho             | ut USDA              |                     |               |                      | Further Analys           | is                   |              |
|                                      |                      |                     |               |                      | Number of child          | Iren                 | 16           |
| Accruals:                            |                      |                     |               | \$4.00               | Number of class          | rooms                | 2            |
| Actual year end payroll              | accrual \$4,800.00   |                     |               |                      |                          |                      |              |
|                                      |                      |                     |               |                      | Monthly                  | YTD                  |              |
|                                      | Amount Funded        | <b>Expenditures</b> | Total To Date |                      | Budget                   | Budget               | (Over)/Under |
| Per Classroom                        | \$118,296.00         | \$8,376.11          | \$21,745.95   |                      | \$9,858.00               | \$29,574.00          | \$7,828.05   |
| Per Child                            | \$14,787.00          | \$1,047.01          | \$2,718.24    |                      | \$1,232.25               | \$3,696.75           | \$978.51     |
| IN-KIND (Non-Federal                 | Share)               |                     |               |                      |                          |                      |              |

Total

\$6,384.23

Still need

\$52,763.77

## **Early Head Start C5**

#### Financial Report for the month of March 2022

(February 2022 Expenditures)

| <b>Funding Source</b> | Amount Funded | <b>Expenditures</b> | Total To Date | <b>Balance</b> |
|-----------------------|---------------|---------------------|---------------|----------------|
| program ending 03/31. | /2023         |                     |               |                |
| Supplies              | \$2,239.00    | \$0.00              | \$125.64      | \$2,113.36     |
| Other                 | \$5,000.00    | \$383.65            | \$2,504.53    | \$2,495.47     |
| Total                 | \$7,239.00    | \$383.65            | \$2,630.17    | \$4,608.83     |

### **Early Head Start C6**

#### Financial Report for the month of March 2022

(February 2022 Expenditures)

| <b>Funding Source</b> | Amount Funded | <b>Expenditures</b> | Total To Date | <b>Balance</b> |
|-----------------------|---------------|---------------------|---------------|----------------|
| program ending 03/31/ | /2023         |                     |               |                |
| Personnel             | \$12,606.00   | \$0.00              | \$13,555.35   | (\$949.35)     |
| Supplies              | \$6,761.00    | \$0.00              | \$0.00        | \$6,761.00     |
| Other                 | \$9,409.00    | \$0.00              | \$0.00        | \$9,409.00     |
| Total                 | \$28,776.00   | \$0.00              | \$13,555.35   | \$15,220.65    |

| Community   | Services    | of Northeast     | Texas Inc.    |
|-------------|-------------|------------------|---------------|
| Communities | , OC: 41063 | OI INDI LITERAGE | I CAGO, IIIV. |

Credit Usage Report

#### **Board Report - March 2022**

| Sam's | Club |
|-------|------|
|-------|------|

| Purchases for January 2022 thru February 2022 |                    | 77.09   |
|---|--------------------|---------|
| Payment due by                                | Paid on 02/16/2022 | (77.09) |
| Balance                                       |                    | -       |
| American Express                              |                    |         |
| Purchases for                                 |                    | -       |
| Payment due by                                |                    | -       |
| Balance                                       |                    | -       |

#### Line of Credit

| Program                       | CSBG A | CEAP A |   | VSN |
|-------------------------------|--------|--------|---|-----|
| Highest February 2022 Balance | -      |        | - | -   |
| Current balance               | -      |        | - | -   |
| Exp pay off date              |        |        |   |     |

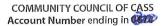
#### In House Line of Credit

| Program                       | CSBG A   | CSBG B    | CEAP A    |   |
|-------------------------------|----------|-----------|-----------|---|
| Highest February 2022 Balance | 6,400.00 | 45,850.00 | -         | - |
| Current balance               | 6,400.00 | -         | 21,150.00 |   |
| Exp pay off date              |          |           | 3/31/2022 |   |

#### U.S. SMALL BUSINESS ADMINISTRATION LOAN

\$150,000







PAGE LORS

Visit us at Sams Club Credit.com/businesscard or Call 1-800-203-5764

#### **Payment Information**

\$

New Balance: Total Minimum Payment Due: Payment Due Date: \$77.09 \$77.09 02/28/2022

\$2,758.42

- 2,758.42

+39.99

+37.10

\$77.09

Payments must be received by 5pm ET on 02/28/2022 if mailed, or by 11:59pm ET on 02/28/2022 for online and phone payments.

MEMBER SERVICE: For Account Information log on to SamsClubCredit.com/businesscard. This account is registered. See your online Administrator to get a User ID & Password. Or call toll-free 1-800-203-5764

To make a payment, please visit us online or mail your payment using the coupon below. Payments are also accepted at your local CheckFreePay\* or MoneyGram locations\*. \* Fees may apply.

#### **Account Summary**

Previous Balance as of 01/09/2022
Payments
Fees Charged
Interest Charges
New Balance as of 02/08/2022

Credit Limit\$5,500Available Credit\$5,422

31 Day Billing Cycle from 01/09/2022 to 02/08/2022

#### **Transaction Detail**

| Date     | Reference #  | Description         |                         | Amount      |
|----------|--|---------------------|-------------------------|-------------|
| Paymer   | nts  |                     |                         | -\$2,758.42 |
| 01/30    | P928000DG01QJD50Z  | PAYMENT - THANK YOU |                         | -\$2,186.06 |
| 01/30    | P928000DG01QN13G0  | PAYMENT - THANK YOU | RECEIVED                | -\$572.36   |
| Total Fe | es Charged This Period   |                     | KEUSINUUU               | \$39.99     |
| 01/28    | and a second | LATE FEE            |                         | \$39.99     |
| Total In | terest Charged This Period   |                     | FEB 1 5 2022            | \$37.10     |
| 02/08    | *INTEREST CHARGE*  | PURCHASES \$37.10   | \(\lambda\) \(\lambda\) | \$37.10     |
|          |  |                     | BY. (TA                 |             |



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Scan & Go has a \$750 pre-tax, pre-instant savings, per transaction limit and there are certain items, e.g. tires, that cannot be purchased using Scan & Go. Go to SamsClub.com/scanandgo or see a Club associate for more details.

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#### **HEAD START and EHS NUTRITION PROGRAM**

March 2022 Financial Report For the month of February 2022

### **CACFP**

|                      | <u> </u> | <u>xpenditures</u> | To | otal To Date |
|----------------------|----------|--------------------|----|--------------|
| Operating Labor      | \$       | 6,655.01           |    | 35,679.92    |
| Administrative Labor |          | 1,299.13           |    | 2,685.70     |
| Food                 |          | 8,753.30           |    | 41,651.83    |
| Supplies & Equipment |          | 365.99             |    | 4,538.14     |
| Purchased Services   |          | -                  |    | 0.00         |
| Financial Costs      |          | -                  |    | 0.00         |
| Media Costs          |          | -                  |    | 0.00         |
| Operating Org Cost   |          | 459.00             |    | 859.00       |
| Other                |          | -                  |    | 0.00         |
| Total                | \$       | 17,532.43          | \$ | 85,414.59    |

<sup>\*\*</sup>Operating Labor includes C5 andC6 money\*\*

**TDHS REVENUE** 

11,749.11 58,977.82 (Income Starts October 2021)

#### **CSNT Head Start Monthly Report**

Program Year 03 2022 06CH011282/03

Report Month

Funded Enrollment HS

Over/Under Enrollment EHS

% with Special Needs

Present/ Absent

\$

f below 85% (Why) -

**Non-Federal Share** 

ADA Funded Enrolled\* (465)

\*Grant should not be above 15%

Meals/Reimbursements

CACFP Reimbursement

**Program Monitoring** 

# Child Files Reviewed

# Parents Interviewed

# of Staff interviewed

# Bus Routes Observed

# Staff Files Reviewed

# Community Contacts

Incomes Verified

# of Findings

# Classrooms Observed

# of service days

# of meals served

HS Total 4%

Enrollment (acutal students)

**Head Start Attendance/Enrollment** 

December

465

-10

6%

86%

89%

399/56

NA

December

December

December

13

3.696

December

152

48

10

12

5

0

0

63

11

138,762 \$

16,125 \$

16,125

8.619 \$

\$

**Head Start** 

428,778 \$

Indirect Cost Pool Expenditures (including % Admin)

63,740 \$

27.588

January

465

-16

8%

80%

85%

379/70

NA

January

January

January

16

3.677

January

46

22

6

12

14

0

0

50

57

21,947 \$

21,947

8,613 \$

\$989.814

2022 Data Month February October November February March April May June July August September 465 -21 9% 80% 86% 377/60 NA NA NA NA NA NA NA NA \$561,036 \$428,778 57% Needed **Grant Total** 41.49% Received \$435,162 February March April Mav June August September October November 143.161 \$ 146.855 ICP 391.886 328,146 **Grant Total** 415.021 Expended 67,530 February March April May June July August September October November 25,668 \$ \$ \$ \$ \$ \$ \$ 25,668 \$ - \$ \$ \$ \$ \$ February March April May June July August September October November 18 4.436 10,356 February March April May June July August September October November 46 22 8 0 17 0 0 43 38

| Annual Self-Assessment Find | nual Self-Assessment Findings |         |          |       | 3/3/2022 | Completed | NA   |      |        |           |         |          |
|-----------------------------|-------------------------------|---------|----------|-------|----------|-----------|------|------|--------|-----------|---------|----------|
|                             | December                      | January | February | March | April    | May       | June | July | August | September | October | November |
| # of findings               | 2                             | 2       | 4        |       |          |           |      |      |        |           |         |          |
| # findings corrected        | 2                             | 2       | 0        |       |          |           |      |      |        |           |         |          |
| # findings remaining        | 0                             | 0       | 4        |       |          |           |      |      |        |           |         |          |

| Annual Detailed Monitoring F | <u>indings</u> |         |          | Week of | 1/24/2022 | Completed | NA   |      |        |           |         |          |
|------------------------------|----------------|---------|----------|---------|-----------|-----------|------|------|--------|-----------|---------|----------|
|                              | December       | January | February | March   | April     | May       | June | July | August | September | October | November |
| # of findings                | 7              | 5       | 5        |         |           |           |      |      |        |           |         |          |
| # findings corrected         | 7              | 0       | 0        |         |           |           |      |      |        |           |         |          |
| # findings remaining         | 0              | 5       | 5        |         |           |           |      |      |        |           |         |          |

**Program Updates** 

Campuses Preparing for Spring Breaks

Classrooms Preparing for Round-ups/Recruitment

**CSNT HS Report** Revised 1/19/22

### **CSNT Early Head Start Monthly Report**

Program Year 03 2022 06CH011282/03

Data Month February

Early Head Start Attendance/Enrollment

| Early House Otal Chittoria and Ori |             |            |            |       |       |     |      |      |        |           |         |          |
|------------------------------------|-------------|------------|------------|-------|-------|-----|------|------|--------|-----------|---------|----------|
| Report Month                       | December    | January    | February   | March | April | May | June | July | August | September | October | November |
| Funded Enrollment EHS              | 16          | 16         | 16         |       |       |     |      |      |        |           |         |          |
| Over/Under Enrollment EHS          | 0           | 0          | -2         |       |       |     |      |      |        |           |         |          |
| % with Special Needs               | 12.50%      | 12.50%     | 12.50%     |       |       |     |      |      |        |           |         |          |
| ADA Funded Enrolled* (16)          | 84%         | 64%        | 73%        |       |       |     |      |      |        |           |         |          |
| Enrollment (acutal students)       | 84%         | 73%        | 83%        |       |       |     |      |      |        |           |         |          |
| Present/ Absent                    | 13/3        | 012/2      | 012/2      |       |       |     |      |      |        |           |         |          |
|                                    |             | COVID/Flu- | COVID/Flu- |       |       |     |      |      |        |           |         |          |
| * If below 85% (Why) -             | COVID Cases | Like Cases | Like Cases |       |       |     |      |      |        |           | 1       |          |

| Non-Federal Share | Early HS | \$59,148 | \$52,764 | \$6,384 | 89%   | Needed | Grant Total | 41.49% | Received | \$435,162 |         |          |
|-------------------|----------|----------|----------|---------|-------|--------|-------------|--------|----------|-----------|---------|----------|
|                   | December | January  | February | March   | April | May    | June        | July   | August   | September | October | November |
| \$ 6.384          | \$ 2165  | \$ 2.054 | \$ 2165  |         |       |        |             |        |          |           |         |          |

| Indir | ect Cost Pool Expenditur | es (includi | ing % | % Ac | dmin) |     | ICP    | \$<br>23,135 | \$ | 19,345 |     | Grant Total | \$<br>415,021 | Expended | \$ | 67,530  |         |          |
|-------|--------------------------|-------------|-------|------|-------|-----|--------|--------------|----|--------|-----|-------------|---------------|----------|----|---------|---------|----------|
| *Gran | t hould not be above 15% | Decembe     | er    | Ja   | nuary | Fel | bruary | March        | А  | pril   | May | June        | July          | August   | Se | ptember | October | November |
|       | EHS Total 0%             | \$          | 942   | \$   | 1,413 | \$  | 1,435  |              |    |        |     |             |               |          |    |         |         |          |
| \$    | 3,790                    | \$ 9        | 942   | \$   | 1,413 | \$  | 1,435  | \$<br>-      |    |        |     |             |               |          |    |         |         |          |

Meals/Reimbursements

|                     | ~     |          |         |          |       |       |     |      |      |        |           |         |          |
|---------------------|-------|----------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|
| \$                  | 3,318 | December | January | February | March | April | May | June | July | August | September | October | November |
| # of service days   |       | 13       | 16      | 18       |       |       |     |      |      |        |           |         |          |
| # of meals served   |       | 481      | 347     | 593      |       |       |     |      |      |        |           |         |          |
| CACFP Reimbursement | t     | \$ 1.113 | \$ 812  | \$ 1.393 |       |       |     |      |      |        |           |         |          |

**Program Monitoring** 

|                           | December | January | February | March | April | Mav    | June  | July | August | September | October | November    |
|---------------------------|----------|---------|----------|-------|-------|--------|-------|------|--------|-----------|---------|-------------|
| # Child Files Reviewed    | 10       | 27      | 16       | maron | 7,4   | ····ay | 00.10 | ou.y | ragaet | Coptomico | 00.000. | 11010111001 |
| # Classrooms Observed     | 12       | 6       | 6        |       |       |        |       |      |        |           |         |             |
| Incomes Verified          | 0        | 0       | 0        |       |       |        |       |      |        |           |         |             |
| # Parents Interviewed     | 0        | 0       | 0        |       |       |        |       |      |        |           |         |             |
| # of Staff interviewed    | 2        | 0       | 0        |       |       |        |       |      |        |           |         |             |
| # Bus Routes Observed     | 0        | 0       | 0        |       |       |        |       |      |        |           |         |             |
| # Staff Files Reviewed    | 0        | 0       | 0        |       |       |        |       |      |        |           |         |             |
| # Community Contacts      | 8        | 3       | 5        |       |       |        |       |      |        |           |         |             |
| # of Findings/# Corrected | 4        | 0       | 0        |       |       |        |       |      |        |           |         |             |

| Annual Self-Assessment Find | <u>ings</u> |         | Date:    | Week of | 3/3/2022 | Completed | NA   |      |        |           |         |          |
|-----------------------------|-------------|---------|----------|---------|----------|-----------|------|------|--------|-----------|---------|----------|
|                             | December    | January | February | March   | April    | May       | June | July | August | September | October | November |
| # of findings               | 2           | 2       | 4        |         |          |           |      |      |        |           |         |          |
| # findings corrected        | 2           | 2       | 0        |         |          |           |      |      |        |           |         |          |
| # findings remaining        | 0           | 0       | 4        |         |          |           |      |      |        |           |         |          |

| Annual Detailed Monitoring F | Annual Detailed Monitoring Findings |         |          |       | 1/24/2022 | Completed | NA   |      |        |           |         |          |
|------------------------------|-------------------------------------|---------|----------|-------|-----------|-----------|------|------|--------|-----------|---------|----------|
|                              | December                            | January | February | March | April     | May       | June | July | August | September | October | November |
| # of findings                | 7                                   | 5       | 5        |       |           |           |      |      |        |           |         |          |
| # findings corrected         | 7                                   | 0       | 0        |       |           |           |      |      |        |           |         |          |
| # findings remaining         | 0                                   | 5       | 5        |       |           |           |      |      |        |           |         |          |

Program Updates

Campuses Preparing for Spring Breaks

Classrooms Preparing for Round-ups/Recruitment

CSNT Early HS Report Revised 1/19/22

| 7/22<br>25 PM   | 1 of 4 |                          |
|---|--------|--------------------------|
| 9803 - HEAD START PIR Snapshot (Grid)   | Total  | Percentage               |
| eport: Head Start PIR Snapshot (Grid)   |        | 1                        |
| PIR: Head Start 2021-2022   |        |                          |
| Section: a. Total Funded Enrollment   |        |                          |
| Number of enrollment slots that the program is funded to serve.   | 465    | 100%                     |
| Section: b. Funded Enrollment by Program Option   |        |                          |
| Center-Based  | 465    | 100%                     |
| Home-Based  | 0      | 0%                       |
| Combination   | 0      | 0%                       |
| Family Child Care   | 0      | 0%                       |
| Locally Designed  | 0      | 0%                       |
| Section: c. Detail - Center-based Funded Enrollment   |        |                          |
| Center-based Part Day (4 days per week)   | 0      | 0% of Center-based Total |
| Center-based Full Day (4 days per week > 6 Hours per Day)   | 0      | 0% of Center-based Total |
| Center-based Part Day (5 days per week)   | 444    | 95.48%                   |
| Center-based Full Day (5 days per week > 6 Hours per Day)   | 0      | 0% of Center-based Total |
| Section: d. Total Cumulative Enrollment   |        |                          |
| Actual number of children served by the program throughout the entire year, inclusive of enrollees who left during the program year and the enrollees who filled those empty places. Due to turnover, more children and families mat receive Head Start services cumulatively throughout the program year(all of whom are reported in the PIR) than indicated by the funded enrollment numbers. | 506    | 100% of participants     |
| Section: e. Participants By Age (Percentage of Cummlative Enrollment)   |        |                          |
| Two Years Old   | 2      | 0.40%                    |
| Three Years Old   | 232    | 45.85%                   |

| Four Years Old   | 272 | 53.75% |
|--|-----|--------|
| Five Years Old and Older   | 0   | 0.00%  |
| Section: f. Homelessness Services (Percentage of Cummlative Enrollment)                        |     |        |
| Total Number of children experiencing homelessness that were served during the enrollment year | 32  | 6.32%  |
| Section: g. Foster Care (Percentage of Cummlative Enrollment)                                  |     |        |
| Total number of enrolled children who were in foster care at any point in the program year     | 16  | 3.16%  |
| Section: h. Prior Enrollment of Children (Percentage of Cummlative Enrollment)                 |     |        |
| Second Year  | 123 | 24.31% |
| Three (or more) Years  | 0   | 0.00%  |
| Section: i. Ethnicity (Percentage of Cummlative Enrollment)                                    | ·   |        |
| Hispanic or Latino Origin  | 69  | 13.64% |
| Non-Hispanic or Non-Latino Origin  | 126 | 24.90% |
| Section: j. Race (Percentage of Cummlative Enrollment)   |     |        |
| American Indian or Alaska Native   | 2   | 0.40%  |
| Asian  | 7   | 1.38%  |
| Black or African American  | 265 | 52.37% |
| Native Hawaiian or Pacific Islander  | 0   | 0.00%  |
| White  | 155 | 30.63% |
| Biracial or Multi-Racial   | 49  | 9.68%  |
| Other Race   | 28  | 5.53%  |
| Unspecified Race   | 0   | 0.00%  |
| Section: k. Language (Percentage of Cummlative Enrollment)                                     |     |        |
| English  | 476 | 94.07% |
| Spanish  | 26  | 5.14%  |
| Central American, South American, or Mexican Languages   | 0   | 0.00%  |
| Caribbean Languages  | 0   | 0.00%  |

| Middle Eastern or South Asian Languages   | 1   | 0.20%   |
|---|-----|---------|
| East Asian  | 3   | 0.59%   |
| Native North American or Alaska Native Languages  | 0   | 0.00%   |
| Pacific Island Languages  | 0   | 0.00%   |
| European or Slavic Languages  | 0   | 0.00%   |
| African Languages   | 0   | 0.00%   |
| Other Languages   | 0   | 0.00%   |
| Unspecified Language  | 0   | 0.00%   |
| Section: I. Health Services (Percentage of Cummlative Enrollment)   |     |         |
| Children With Health Insurance At Start of Enrollment   | 470 | 92.89%  |
| Children With Health Insurance At End of Enrollment   | 311 | 61.46%  |
| Children With A Medical Home At Start of Enrollment   | 455 | 89.92%  |
| Children With A Medical Home At End of Enrollment   | 241 | 47.63%  |
| Children With up-to-date Immunizations or all possible immunizations to date, or exempt at start of enrollment                                      | 460 | 90.91%  |
| Children With up-to-date Immunizations or all possible immunizations to date, or exempt at end of enrollment  | 300 | 59.29%  |
| Children with a dental home at start of enrollment  | 426 | 84.19%  |
| Children with a dental home at end of enrollment  | 233 | 46.05%  |
| Section: m. Disability Services (Percentage of Actual Enrollment)   |     |         |
| Children with an Individualized Education Program (IEP), indicating they were determined eligible to receive special education and related services | 39  | 8.78%   |
| Section: n. Family Services (Percentage of Total Families)  |     |         |
| Total Number of Families  | 478 | 100.00% |
| Families Who Received at Least One Family Service   | 426 | 89.12%  |
| Section: o. Specific Services (Percentage of Total Families)  |     |         |
| Emergency or Crisis Intervention  | 49  | 10.25%  |
| Housing Assistance  | 6   | 1.26%   |
|   |     | !       |

| Asset building services (Financial Education)  | 76  | 15.90% |
|--|-----|--------|
| Mental Health Services   | 15  | 3.14%  |
| Substance Abuse Prevention   | 5   | 1.05%  |
| Substance Abuse Treatment  | 3   | 0.63%  |
| English as a Second Language (ESL) Training  | 7   | 1.46%  |
| Assistance enrolling in Education or Job Training  | 46  | 9.62%  |
| Research-Based Parenting Curriculum  | 273 | 57.11% |
| Involvement in their child's screening and assessment results and their child's progress | 294 | 61.51% |
| Supporting transitions between prorgrams (i.e., EHS to HS, HS to Kindergarten)           | 323 | 67.57% |
| Education on preventative medical and oral health  | 388 | 81.17% |
| Education on health and developmental consequences of tobacco product use                | 166 | 34.73% |
| Education on Nutrition   | 414 | 86.61% |
| Education on postpartum care (e.g. breastfeeding support)                                | 4   | 0.84%  |
| Education on relationship/marriage   | 4   | 0.84%  |
| Assistance to Families of Incarcerated Individuals                                       | 6   | 1.26%  |
|  |     |        |

| 9803 - EARLY HEAD START PIR   | 1     | 1 of 4                   |  |
|---|-------|--------------------------|--|
| Snapshot (Grid)   | Total | Percentage               |  |
|   |       |                          |  |
| eport: Head Start PIR Snapshot (Grid)   |       |                          |  |
| PIR: Head Start 2021-2022   |       |                          |  |
| Section: a. Total Funded Enrollment   |       |                          |  |
| Number of enrollment slots that the program is funded to serve.   | 16    | 100%                     |  |
| Section: b. Funded Enrollment by Program Option   |       |                          |  |
| Center-Based  | 16    | 100%                     |  |
| Home-Based  | 0     | 0%                       |  |
| Combination   | 0     | 0%                       |  |
| Family Child Care   | 0     | 0%                       |  |
| Locally Designed  | 0     | 0%                       |  |
| Section: c. Detail - Center-based Funded Enrollment   |       |                          |  |
| Center-based Part Day (4 days per week)   | 0     | 0% of Center-based Total |  |
| Center-based Full Day (4 days per week > 6 Hours per Day)   | 0     | 0% of Center-based Total |  |
| Center-based Part Day (5 days per week)   | 16    | 100.00%                  |  |
| Center-based Full Day (5 days per week > 6 Hours per Day)   | 0     | 0% of Center-based Total |  |
| Section: d. Total Cumulative Enrollment   |       |                          |  |
| Actual number of children served by the program throughout the entire year, inclusive of enrollees who left during the program year and the enrollees who filled those empty places. Due to turnover, more children and families mat receive Head Start services cumulatively throughout the program year(all of whom are reported in the PIR) than indicated by the funded enrollment numbers. | 17    | 100% of participants     |  |
| Section: e. Participants By Age (Percentage of Cummlative Enrollment)   |       |                          |  |
| Under One Year  | 0     | 0.00%                    |  |

| One Year Old   | 7  | 41.18% |
|--|----|--------|
| Two Years Old  | 10 | 58.82% |
| Three Years Old  | 0  | 0.00%  |
| Section: f. Homelessness Services (Percentage of Cummlative Enrollment)                        |    |        |
| Total Number of children experiencing homelessness that were served during the enrollment year | 2  | 11.76% |
| Section: g. Foster Care (Percentage of Cummlative Enrollment)                                  |    |        |
| Total number of enrolled children who were in foster care at any point in the program year     | 2  | 11.76% |
| Section: h. Prior Enrollment of Children (Percentage of Cummlative Enrollment)                 |    |        |
| Second Year  | 11 | 64.71% |
| Three (or more) Years  | 0  | 0.00%  |
| Section: i. Ethnicity (Percentage of Cummlative Enrollment)                                    |    |        |
| Hispanic or Latino Origin  | 2  | 11.76% |
| Non-Hispanic or Non-Latino Origin  | 15 | 88.24% |
| Section: j. Race (Percentage of Cummlative Enrollment)   |    |        |
| American Indian or Alaska Native   | 1  | 5.88%  |
| Asian  | 0  | 0.00%  |
| Black or African American  | 13 | 76.47% |
| Native Hawaiian or Pacific Islander  | 0  | 0.00%  |
| White  | 1  | 5.88%  |
| Biracial or Multi-Racial   | 1  | 5.88%  |
| Other Race   | 1  | 5.88%  |
| Unspecified Race   | 0  | 0.00%  |
| Section: k. Language (Percentage of Cummlative Enrollment)                                     |    |        |
| English  | 16 | 94.12% |
| Spanish  | 1  | 5.88%  |

| Central American, South American, or Mexican Languages   | 0  | 0.00%   |
|--|----|---------|
| Caribbean Languages  | 0  | 0.00%   |
| Middle Eastern or South Asian Languages  | 0  | 0.00%   |
| East Asian   | 0  | 0.00%   |
| Native North American or Alaska Native Languages   | 0  | 0.00%   |
| Pacific Island Languages   | 0  | 0.00%   |
| European or Slavic Languages   | 0  | 0.00%   |
| African Languages  | 0  | 0.00%   |
| Other Languages  | 0  | 0.00%   |
| Unspecified Language   | 0  | 0.00%   |
| Section: I. Health Services (Percentage of Cummlative Enrollment)  |    |         |
| Children With Health Insurance At Start of Enrollment  | 17 | 100.00% |
| Children With Health Insurance At End of Enrollment  | 13 | 76.47%  |
| Children With A Medical Home At Start of Enrollment  | 17 | 100.00% |
| Children With A Medical Home At End of Enrollment  | 11 | 64.71%  |
| Children With up-to-date Immunizations or all possible immunizations to date, or exempt at start of enrollment                                       | 17 | 100.00% |
| Children With up-to-date Immunizations or all possible immunizations to date, or exempt at end of enrollment   | 1  | 5.88%   |
| Children with a dental home at start of enrollment   | 15 | 88.24%  |
| Children with a dental home at end of enrollment   | 9  | 52.94%  |
| Section: m. Disability Services (Percentage of Actual Enrollment)  |    |         |
| Children with an Individualized Education Program (IFSP), indicating they were determined eligible to receive special education and related services | 2  | 12.50%  |
| Section: n. Family Services (Percentage of Total Families)   |    |         |
| Total Number of Families   | 15 | 100.00% |
| Families Who Received at Least One Family Service  | 13 | 86.67%  |

### Section: o. Specific Services (Percentage of Total Families)

| Emergency or Crisis Intervention   | 0  | 0.00%  |
|--|----|--------|
| Housing Assistance   | 0  | 0.00%  |
| Asset building services (Financial Education)  | 0  | 0.00%  |
| Mental Health Services   | 0  | 0.00%  |
| Substance Abuse Prevention   | 0  | 0.00%  |
| Substance Abuse Treatment  | 0  | 0.00%  |
| English as a Second Language (ESL) Training  | 0  | 0.00%  |
| Assistance enrolling in Education or Job Training  | 0  | 0.00%  |
| Research-Based Parenting Curriculum  | 6  | 40.00% |
| Involvement in their child's screening and assessment results and their child's progress | 5  | 33.33% |
| Supporting transitions between prorgrams (i.e., EHS to HS, HS to Kindergarten)           | 0  | 0.00%  |
| Education on preventative medical and oral health  | 13 | 86.67% |
| Education on health and developmental consequences of tobacco product use                | 0  | 0.00%  |
| Education on Nutrition   | 12 | 80.00% |
| Education on postpartum care (e.g. breastfeeding support)                                | 0  | 0.00%  |
| Education on relationship/marriage   | 0  | 0.00%  |
| Assistance to Families of Incarcerated Individuals                                       | 0  | 0.00%  |



### 2022 Self-Assessment Report - DRAFT

Date: 2-23-2022

#### **Section 1. Introduction**

#### **Program description**

Head Start and Early Head Start are two of several programs offered through Community Services of Northeast Texas, Inc. (CSNT). CSNT, a community action agency, has been providing Head Start services to eligible children in Northeast Texas since the 1960s. CNST started providing Early Head Start services to eligible children in January of 2021. Total program funded enrollment for FY22-PY03 is 465 three-to-four-year-old Head Start children and 16 twelve-to-thirty-six-month Early Head Start children. There are eight Head Start locations within the four county service area of Bowie, Camp, Cass, and Morris Counties and one early Head location in Cass County only. Actual enrollment for PY03 is an average of 437 Head Start children and 14 Early Head Start children. The Office of Head Start (OHS) is allowing Program flexibility with enrollment due to the COVID-19 Pandemic. During the PY01 grant year (before the pandemic and the conversion of some HS slots to EHS) Head Start served an average of 526 children. CSNT Head Start can serve more children than the funded enrollment due to partnerships with local education agencies. CSNT utilizes resources within the community to assist parents of enrolled children.

CSNT Head Start Program has (3) broad goals for Grant #06CH011282 five-year grant project period.

- Goal 1: Strengthen comprehensive health services for Head Start children and their families.
- Goal 2: Provide comprehensive school readiness.
- **Goal 3: Increase parent involvement in the Head Start Program.**

#### **Context for Self-Assessment**

- 1. The Self-Assessment Team Leaders receive training on implementation of the Self-Assessment. They are trained on how to utilize the program data to check for systemic issues, document innovations and list any recommendations. The data used during the Self-Assessment is comprised of previous monitoring summaries, assessment data, and Program Information Reports. The Team Leaders are instructed on how to facilitate their teams through the data analyzation process for their assigned content areas.
- 2. The Self-Assessment Teams analyze data from the On-Going Monitoring System including Detailed Monitoring summaries.
  - a. Detailed Monitoring is implemented as part of the On-Going Monitoring System to add a layer of monitoring that includes the creation of up to (4) teams made-up of Administrative, management, and Campus staff as well as parents, policy council and governing board members, and community partners, where applicable. These teams monitor the program for areas of strength, weaknesses, and non-compliances. They also provide recommendations as part of their reports. Each team completes an on-site visit, reviews documentation, and completes interviews. A summary of the Detailed Monitoring findings becomes a part of the Self-Assessment Team data packets.
  - 3. Self-Assessment Teams analyze progress made on program goals/objectives as well as strengths and weaknesses of program systems. There are (4) teams with up to five members on each team. Team Leaders are program staff with experience in the areas being surveyed. Program data is collected throughout the grant project period and is examined by members of each team. The Team documents systemic strengths along with any weaknesses. They also make recommendations concerning systemic issues and document any areas of innovation within the program.
  - 4. Information from monitoring summaries is provided to the Self-Assessment Teams including Self-Assessment Summary Reports for each area of the program and progress reports on program goals/objects. The Self-Assessment Teams analyze the program data along with child assessment data, CLASS data, and any other relevant data to develop conclusions for each area of the program. Their findings are presented to the Self-Assessment Committee for approval.
  - 5. After the Self-Assessment Committee approves a final Self-Assessment Report, it is presented to the Policy Council and Governing Board for approval. Input from the Governing Board and the Policy Council occur when members of the Governing Board and Policy Council serve as members of a Self-Assessment Team and as part of the Committee.
  - 6. Upon approval by the governing bodies, the program begins developing strategies on how to implement any changes into the program. Recommendations on any changes to the program goals/objectives are discussed during the Strategic Planning Committee Meeting. These changes become part of the program goals/objectives at that time.

| SA Teams        |          | Questions to Consider  |
|-----------------|----------|--|
| Team One:       | 1.       | Does the Board & PC have the required composition and  |
| Program         |          | representation?  |
| Governance/     | 2.       |  |
| Program         |          | required?  |
| Management &    | 3.       | , 9  |
| QI/             |          | including a standard of conduct?   |
| Financial and   |          | Does the program meet the background check requirements?   |
| Administrative  | 5.       | , 9  |
| Requirements/   |          | development, health & wellness, and safety?  |
| Human           | 6.       | Does the program meet the requirements for management  |
| Resources       |          | systems?   |
|                 | 7.       | Is the program meeting financial and administrative  |
|                 |          | requirements?  |
| Team Two:       | 1.       | , 9  |
| Comprehensive   | _        | health?  |
| Health          | 2.       | Does the program meet the requirements for up-to-date child  |
| Services/       | _        | health status?   |
| Safety          |          | Does the program implement safety practices?   |
| Team Three:     | 1.       |  |
| Early Childhood | 2.       | 1 0 1  |
| Education &     | 3.       | 1 0  |
| Development/    | 4.       | , 6  |
| CLASS/          | _        | strengths for children?  |
| Additional      | 5.       | Do classrooms have a variety of age-appropriate materials that   |
| Disability      | 6        | are changed on a regular basis?  |
| Services        | 6.       | Does the program recognize parents' roles in their child's education?  |
|                 | 7        |  |
|                 |          | Have CLASS scores for the Program improved?  |
|                 | 8.       | Does the program meet the requirements for additional services for children with disabilities?                       |
| Team Four:      | 1        |  |
| Family &        | 1.       | Does the program have a Community Assessment that meets the requirements and is it updated at least every (4) years? |
| Community       | າ        | Does the program have an approved selection criterion that   |
| Engagement –    | ۷.       | meets the requirements of the HSPPS?   |
| ERSEA/          | ર        | Are integrated parent and family engagement strategies   |
| Transition/     | ٥.       | implemented into all systems and program services?   |
| Program         | 4        | Did the program reach 10% of its funded enrollment as children   |
| Structure       |          | with disabilities by the end of the program year?  |
|                 | 5.       | Does the program implement a research-based parent   |
|                 | <u> </u> | curriculum?  |
|                 | 6.       | Does the program implement a transition process for children   |
|                 |          | coming into and out of Head Start as required?   |
|                 |          |  |

### Section 2. Methodology

| Date             | Action                                   | Purpose  |
|------------------|--|--|
| 10/18/2021       | Detailed OGM Leadership<br>Meeting       | <ul> <li>Update 2022 Detailed         Monitoring Process</li> <li>Create 2022 Self-         Assessment         Implementation Plan</li> </ul>  |
| 11/8/2021        | Detailed Monitoring Training Sessions    | <ul> <li>Training – Detailed         Monitoring         Orientation and Team         Training</li> <li>Each Team Member is         trained on         confidentiality</li> </ul>                   |
| 1/24/2022        | Detailed OGM Meeting                     | <ul> <li>Discuss Detailed OGM         Results</li> <li>Approve Detailed         OGM Summary</li> </ul>   |
| 2/15/2022        | Self-Assessment Team Leader<br>Meeting   | <ul> <li>Training – Team</li> <li>Leaders are trained</li> <li>on the SA Process</li> </ul>  |
| 2/23/2022        | Self-Assessment Committee<br>Meeting     | <ul> <li>Training on SA         Process     </li> <li>Each Team Analyzes         Data from Their Area     </li> <li>Each Team Gives a         Short Synopsis of         Their Area     </li> </ul> |
| 3/3/2022         | Self-Assessment Committee<br>Meeting     | Approve 2022 SA     Program Report   |
| Before 5/31/2022 | Final Step in Self-Assessment<br>Process | <ul> <li>Policy Council and         Governing Board         approval of SA Report</li> <li>Submit to Regional         Office with Grant</li> </ul>   |

#### Section 3. Key In-Sights

#### **Strengths**

- ✓ Technology plays an instrumental role in keeping CSNT Head Start and Early Head Start operating effectively and efficiently. CSNT utilizes technology to hold virtual Policy Council meetings and to provide educational instruction, when needed. Technology is used to gather and analyze large amounts of program data. Program data is tracked and monitored for accuracy on a regular, on-going basis. On-going Monitoring results are tracked and analyzed electronically. Electronic management systems track and create reports that assist staff and governing bodies in making informed and knowledgeable decisions based on accurate information.
- ✓ CSNT Head Start/Early Head Start provided Protective Personal Equipment (PPE) to all sites along with sanitation devices to keep children and staff healthy. Health and safety are key to CSNT families and employees. Wellness is promoted throughout the program including adding health supplies as part of transition bags that children receive as they transition into and out of the Program. With CARES Act Funding, families were provided bags that contained PPE along with toothbrushes and other health and wellness supplies. The Agency also created a Mental Wellness Committee to address Mental Wellness implementation within the Program/Agency.
- ✓ CSNT Head Start/Early Head Start implements a research-based early childhood curriculum that meets or exceeds the Head Start Early Learning Outcomes Framework and the Texas Pre-K Guidelines. Head Start and Early Head Start services are provided in partnership with local public school districts throughout the four-county service area. In each partnership classroom, Head Start Standards and State Guidelines are followed creating high quality services for each child and family. The Teachstone Platform is also being implemented to assist classroom staff with CLASS implementation.
- ✓ All CSNT staff receive systematic, on-going training on a regular basis. Staff are encouraged and assisted in gaining the required education and/or certifications for their jobs. All staff receive professional development that enables them to carry out their job duties more efficiently.
  Currently, CSNT Lead Teachers meet or exceed the Head Start Performance Standards qualifications.
  Management staff are instrumental in providing college-level, certified, classroom-based training to CSNT staff.

- ✓ All CSNT children receive standardized and structured assessments three times per year. These assessments provide ongoing, individualized data that aligns with the Head Start Early Learning Outcomes Framework and the Texas Pre-Kindergarten Guidelines. Teachers create reports from these assessments that indicate a child's progress in each of the areas designated by Head Start/Early Head Start. The teachers as well as parents and other staff utilize these reports.
- ✓ Currently, CSNT has 465 Head Start slots and 16 Early Head Start slots. The Early Head Start Program is being implemented at the Hughes Springs Head Start Campus. The CSNT Community Assessment indicated a need for Early Head Start services in the service area and CSNT is looking for opportunities to provide more Early Head Start slots. CSNT is also seeking ways to expand Head Start services within and outside the service area.

#### **Systemic Issues**

- ✓ Create procedures that expedite the hiring process. (45 CFR §1302.91(a))
- ✓ Implement methods to reach 10% disability funded enrollment by the middle to end of school year.

  (45 CFR §1302.14(b))
- ✓ Create an inventory system that provides accurate and up-to-date inventory records. (45 CFR 75 §75.320(d)(2))
- ✓ Implement a process to prompt Health related follow-ups. (45 CFR §1302.47(b)(i-ii)

#### **Innovations**

- ✓ CSNT Head Start implements a Family Service Credentialing program. The Family Service Administrator is a certified Family Service Credential Trainer. CSNT Family Service Workers can attend classes that lead to a Family Service Credential.
- ✓ CSNT Head Start/Early Head Start utilizes technology to maintain quality throughout the Head Start/Early Head Start Program. The program implements Child Plus to track and monitor data, Ready Rosie to assist parents, Frog Street On-line Curriculum for students, web-based assessments and screeners, and ZOOM to keep staff, parents, and governing bodies connected on a regular basis.
- ✓ CSNT Head Start utilizes Mental Health Advocates within the service area to assist CSNT staff in obtaining disability services for eligible children. The Mental Health Advocates assist Campus staff with completing the necessary paperwork to obtain vital services for students. They provide communication and documentation between the HS/EHS Program and the service provider for each child and family that require disability or mental health services.

#### **Progress in Meeting Program Goals and Objectives (Winter 2022)**

|  | Goals  | Objective(s)/Outcome(s)   |
|--|--|---|
| GOAL ONE: Strengthen comprehensive health services for Head Start children and their families. |  | 85% of parents will obtain health requirements.   |
| Completion Rate  | 71% HS<br>76% EHS  |   |
| GOAL TWO: Provide cor  | nprehensive school readiness.  | 66% of children will name upper and lowercase letter                                    |
| Completion Rate  | 52%  |   |
| GOAL TWO: Provide cor  | nprehensive school readiness.  | 81% of children will sequence count to 50   |
| Completion Rate  | 34%  |   |
| GOAL TWO: Provide cor  | nprehensive school readiness.  | .5% Increase in CLASS Emotional Support   |
| Completion Rate  | ES .90 Increase<br>CO .55 Increase<br>IS .75 Increase                      | 5% Increase in CLASS Classroom Organization .2% Increase in CLASS Instructional Support |
| GOAL TWO (EHS): Provide comprehensive school readiness.  |  | 6 Emotional & Behavior Score 6 Engaged Learning Score 6 Responsive Caregiving Score     |
| Completion Rate  | 5.25 Emotional & Behavior 2.92 Engaged Learning 4.38 Responsive Caregiving |   |
| GOAL TWO (EHS): Provide comprehensive school readiness.  |  | 45% of EHS children will demonstrate interactions with their peers.                     |
| Completion Rate  | 89%  |   |
| GOAL THREE: Increase parent involvement in the Head Start Program.                             |  | 45% of parents will be involved in their child's education.                             |
| Completion Rate  | 68%  |   |

#### **Recommendations**

These recommendations encompass the categories of progress on goals and objectives, systemic issues, and/or innovations.

- Develop a classroom IT equipment training process for classroom staff that includes the process for reporting classroom IT issues
- Train classroom staff on the Dial-4 referral process including re-screening procedures
- Increase the utilization of Facebook including training Family Service Coordinator on the use of Social Media in the Head Start/Early Head Start Program
- Find ways to strengthen the Early Head Start Transition process

| Governing Board Approval: ( | ) |
|-----------------------------|---|
| Policy Council Approval: (  | ) |

#### **Community Services Of Northeast Tex**

**Eligibility Configuration** 

#### Selection Criteria 2022-2023

#### Applies to:

Community Services Of Northeast Tex - Head Start 2022-2023

#### Automatically assign points based on Income

| 200 |
|-----|
| 200 |
| 200 |
| 200 |
|     |
| 85  |
| 75  |
| 65  |
| 15  |
| 10  |
|     |
|     |

#### Automatically assign points based on Class Age

| 0 - 35 mo  | 0  |
|------------|----|
| 36 - 41 mo | 65 |
| 42 - 47 mo | 75 |
| 48 - 53 mo | 85 |
| 54 - 59 mo | 95 |
|            |    |

Participant is not eligible if less than 36 months old on the school-year cut-off date or at the time of enrollment.

Participant is not eligible if 60 months old or older on the school-year cut-off date.

#### Other Eligibility Criteria

Attending and/or attended Early Head Start or ECI

95 Yes

SNAPS, Medicaid/CHIPS, CCMS, WIC

80 Yes

#### Parental Status

95 Guardian

90 One Parent/Dad

85 One Parent/Mom

80 Grandparent raising grandchild

75 Two Parent

#### Disability

100 Diagnosed Disabilty with IEP

85 Suspected Disability with explanation

0 No Diagnosed Disability

Child with sibling enrolled in the program

70 Yes

Open case with CPS

40 Yes

Over income with a Disability

100 Yes

4 Year old with a diability with an IEP

20 Yes

3 Year old with a disability with an IEP

25 Yes

Homeless, Foster, Kinship or Public Assistance

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# **Community Services Of Northeast Tex Eligibility Configuration**

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#### Selection Criteria 2022-2023

#### Other Eligibility Criteria

ESL

100 Yes

Active Military

100 Yes

Former Foster Child

100 Yes

Three Year old in Naples/New Boston/Pittsburg

40

Parent Under the Age of 23

40 Yes

Parent Currently Incarcerated

40 Yes

Parent works for ISD

#### **Community Services Of Northeast Tex**

**Eligibility Configuration** 

#### EHS Selection Criteria 2022-2023

#### Applies to:

Community Services Of Northeast Tex - Head Start 2022-2023
Community Services Of Northeast Tex - Head Start 2021-2022
Community Services Of Northeast Tex - Early Head Start 2021-2022
Community Services Of Northeast Tex - Early Head Start 2022-2023

#### Automatically assign points based on Income

| Foster            | 200 |
|-------------------|-----|
| Homeless          | 200 |
| Public Assistance | 200 |
|                   |     |
| 0 - 50%           | 85  |
| 51 - 75%          | 75  |
| 76 - 100%         | 65  |
| 101 - 130%        | 15  |
| 131 - 150%        | 10  |
|                   |     |
| 151 - 400%        | 5   |

#### Automatically assign points based on Class Age

| 0 - 11 mo  | 75 |
|------------|----|
| 12 - 23 mo | 85 |
| 24 - 36 mo | 95 |

Participant is not eligible if 36 months old or older on the school-year cut-off date.

#### Other Eligibility Criteria

#### SNAPS Medicaid/CHIPS, CCMS, WIC

80 Yes

#### Parental Status

95 Guardian

90 One Parent/Dad

85 One Parent/Mom

80 Grandparent raising grandchild

75 Two Parent

#### Disability

Diagnosed Disability with IEP/IFSPSuspected Disability with explanation

0 No Diagnosed Disability

Child with sibling enrolled in the Head Start program

70 Yes

Open case with CPS

40 Yes

Over income with a Disability

100 Yes

Homeless, Foster, or Public Assistance

100 Yes

ESL

100 Yes

Active Military

100 Yes

Former Foster Child

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# **Community Services Of Northeast Tex Eligibility Configuration**

Page 2 of 2 MVanHooser

EHS Selection Criteria 2022-2023

Other Eligibility Criteria

Teen Parent

40 Yes

Parent Currently Incarcerated



# **Head Start** "Building partnerships, changing lives"



### HEAD START ENROLLMENT HEALTH HISTORY FORM

| Child's Name:   |   |
|---|---|
| Medication Is your child currently taking any medication? □Yes If yes, what medication and when does the child reco |   |
| *if your child receives medication at school, medication  | on administration forms need to be completed by doctor                              |
| Medical   |   |
| Is your child current with well-child exams? □Yes □   | No Date of Last Exam:   |
| Is your child being treated by a physician for any of   |   |
| ☐ Anemia/Sickle Cell  | ☐ Vision Problems(glasses/difficulty  |
| □ Asthma  | seeing/headaches)   |
| ☐ Diabetes  | ☐ Hearing Problems (difficulty  |
| □ Seizures  | hearing/tubes/earaches  |
| ☐ Cardiac Disorders   | ☐ High Lead Levels  |
| Please specify:   |   |
| Does your child have any of the following allergies the   |   |
| ☐ Insect Stings/Bites   | ☐ Poison Ivy/Oak  |
| ☐ Medication:   |   |
| •   | CTION PLAN will need to be completed by doctor                                      |
| Does your child have any of the following problems?   |   |
| ☐ Seasonal Allergies:   | ☐ Painful urination   |
| ☐ Eczema, hives, other skin problems  | ☐ Wears diapers/training pants  |
| ☐ Bed wetting   | ☐ Frequent indigestion  |
| ☐ Daytime wetting   | ☐ Frequent stomachaches   |
| ☐ Frequent diarrhea   | ☐ Frequent vomiting   |
| ☐ Frequent urination  | □ Other:  |
| ☐ Frequent constipation   | 0   |
| Does your child have any of the following conditions  |   |
| ☐ Bites when angry/frustrated   | ☐ Hyperactivity   |
| ☐ Bone/joint/muscle disease   | ☐ Frequent fevers   |
| ☐ Fainting spells   | ☐ Trouble sleeping  |
| □ Bone/joint/muscle injury  | ☐ Lack of energy  |
| Is your child seeing a medical specialist for ANY rea   | son? ⊔ Yes ⊔ No   |
| If yes, specify: Would you like to set up a meeting with the Health (   | Coordinator to discuss your shild's health issues?                                  |
| ☐ Yes ☐ NoDental  | Coordinator to discuss your child's health issues:                                  |
|   | $\mathbf{P} \cap \mathbf{V}_{\mathbf{G}_{\mathbf{G}}} \cap \mathbf{N}_{\mathbf{G}}$ |
| Is your child in pain right now because of their teeth  | ii les lino   |
| Disability/Mental Health  |   |
| Does your child have any of the following disabilities  | s?  |
| ☐ Autism  | ☐ Orthopedic Impairment   |
| ☐ Emotional/Behavior  |   |
| ☐ Hearing Deafness  | ☐ Multiple Disabilities   |
| ☐ Vision Blindness  | ☐ Speech/Language   |
| ☐ Learning Disability   | ☐ Traumatic Brain Injury  |

| Is your child currently seeing a counselor or therap If yes, who?  | pist?   Yes   No                                    |
|--|---|
| Did your child receive services from Early Childho   | ood Intervention (ECI)? □ Yes □ No                  |
| * speech/language, phy   | ysical/occupational therapy                         |
| If yes, which agency?  | IFSP in place? □ Yes □ No                           |
| Nutrition  |   |
| Nutrition  |   |
| Is your family currently involved with WIC?  | □ Yes □ No  |
| Do you have concerns about your child's eating   | □ Yes □ No  |
| patterns? (picky eater, over/under eating, other)  | If yes, specify                                     |
| Does your child take a vitamin or mineral  | □ Yes □ No  |
| supplement that contains iron and/or fluoride?   | If yes, specify                                     |
| Were the supplements prescribed?   | □ Yes □ No  |
| Are there foods not eaten for medical, religious,  | □ Yes □ No  |
| cultural, or personal reasons?   | If yes, specify                                     |
| Is your child on a special diet?   | □ Yes □ No  |
|  | If yes, specify                                     |
| Has your child's appetite changed in the past  | □ Yes □ No  |
| month?   | If yes, specify                                     |
| Does your child have trouble chewing or  | □ Yes □ No  |
| swallowing?  | If yes, specify                                     |
| Do you have any concerns about what your child   | □ Yes □ No  |
| eats or your child's weight?   | Please list concerns:                               |
| , ,  |   |
| Does your child have a food allergy documented by  | ☐ Yes ☐ No  |
| a physician?   |   |
| Does your child need nutritional treatment?  |   |
| ,  | List the treatment you feel your child needs        |
|  |   |
| Is your child receiving nutritional treatment?   |   |
|  | List the treatment your child is receiving          |
|  | , <u> </u>  |
|  |   |
| Special Concerns   |   |
| List any additional concerns   |   |
|  |   |
|  |   |
|  |   |
|  |   |
| Parent/Guardian Signature  | Date  |
|  |   |
| Staff Signature  | Date  |
| I wanifu that I have navioused this booth hist   | um and have taken any needed estions recording this |
| •  | im and have taken any needed actions regarding this |
| Teacher Signature  | <br>Date  |
| Parent/Guardian Signature  Staff Signature  I verify that I have reviewed this health history for child. | rm and have taken any needed actions regarding      |

Revised: 1/20/2022



### **Head Start** "Building partnerships, changing lives"



#### EARLY HEAD START ENROLLMENT HEALTH HISTORY FORM

| Child's Name:   | Date of Birth:  |
|---|---|
| D' al   |   |
| Birth   |   |
| Delivery Method: □Vaginal □C-S  |   |
| Birth Weight:   | Length:   |
| Gestation Age:weeks   | □Unknown  |
| Birth Facility:   |   |
| Describe any complications assoc  | ciated with this delivery (Pre-term labor, fetal distress, etc.)  |
| Did the baby have any problems a  | at birth?   |
| Describe any observable defects.  | and the state of the second of the transfer of the state |
|   | roblems during this pregnancy (High Blood Pressure, Diabetes, etc.)   |
| Medication Is your child currently taking a If yes, what medication and who | ny medication? □Yes □No<br>en does the child receive the medication?  |
| *if your child receives medicatio   | n at school, medication administration forms need to be completed by doctor   |
| Medical   |   |
|   | child exams? □Yes □No Date of Last Exam:  |
|   | physician for any of the following conditions?  |
| ☐ Anemia/Sickle Cell  | ☐ Vision Problems(glasses/difficulty  |
| □ Asthma  | seeing/headaches)   |
| □ Diabetes  | ☐ Hearing Problems (difficulty  |
| □ Seizures  | hearing/tubes/earaches  |
| ☐ Cardiac Disorders   | ☐ High Lead Levels  |
|   |   |
| Does your child have any of the   | following allergies?  |
| ☐ Insect Stings/Bites   |   |
| ☐ Medication:   |   |
| ☐ Poison Ivy/Oak  |   |
| Does your child require an EPI *If your child has an aller                  | -PEN? ☐ Yes ☐ No<br>gy, an ALLERGY ACTION PLAN will need to be completed by doctor  |
|   | pull ups? □ Diapers □ Pull Ups □ Potty Trained  |
| Preferred Brand:Size:   |   |
| DILC  |   |

| Does your child have any of the following condition                           | s?   |
|---|--|
| ☐ Bone/joint/muscle disease   | ☐ Frequent fevers                                  |
| ☐ Fainting spells   | ☐ Trouble sleeping                                 |
| ☐ Bone/joint/muscle injury  | ☐ Lack of energy                                   |
| ☐ Hyperactivity   |  |
| Is your child seeing a medical specialist for ANY re If yes, specify:         | ason?   Yes No                                     |
| Would you like to set up a meeting with the Health $\square$ Yes $\square$ No | Coordinator to discuss your child's health issues? |
| Dental  |  |
| Is your child in pain right now because of their teet                         | h? □ Yes □ No                                      |
| is your cline in pain right now because or their teet                         | 100 0100   |
| Nutrition   |  |
| Is your family currently involved with WIC?                                   | ☐ Yes ☐ No Where?                                  |
| What does your child drink from?  | □ Regular Cup □ Sippy Cup □ Bottle                 |
| What milk does your child drink?  | ☐ Breast ☐ Whole Milk ☐ 2% ☐ 1%                    |
|   | ☐ Lactose Free ☐ Other:                            |
| Is your child documented as lactose intolerant per physician?                 | □ Yes □ No   |
| Does your child take a vitamin or mineral                                     | □ Yes □ No   |
| supplement that contains iron and/or fluoride?                                | If yes, specify                                    |
| Were the supplements prescribed?  | □ Yes □ No   |
| Are there foods not eaten for medical, religious,                             | □ Yes □ No   |
| cultural, or personal reasons?  | If yes, specify                                    |
| Is your child on a special diet?  | □ Yes □ No   |
|   | If yes, specify                                    |
| Has your child's appetite changed in the past                                 | $\square$ Yes $\square$ No                         |
| month?  | If yes, specify                                    |
| Does your child have trouble chewing or swallowing?                           | □ Yes □ No   |
| Do you have any concerns about what your child                                | $\square$ Yes $\square$ No                         |
| eats or your child's weight?  | Please list concerns:                              |
|   |  |
| Does your child have a food allergy documented by                             | ☐ Yes ☐ No   |
| a physician?  | If yes, specify                                    |
| Does your child need nutritional treatment?                                   | □ Yes □ No   |
|   | List the treatment you feel your child needs       |
| Is your child receiving nutritional treatment?                                | ☐ Yes ☐ No   |
| 15 your chind receiving nutritional treatment:                                | List the treatment your child is receiving         |
|   | List the treatment your child is receiving         |

| Disability/Mental Health  |  |
|---|--|
| Does your child have any of the following disabilities?                       |  |
| □ Autism  | ☐ Orthopedic Impairment                      |
| ☐ Emotional/Behavior  | $\square$ IDD                                |
| ☐ Hearing Impairment  | ☐ Multiple Disabilities                      |
| ☐ Vision Impairment   | □ Speech/Language                            |
| ☐ Learning Disability   | ☐ Traumatic Brain Injury                     |
| Did your child receive services from Early Childhood Inte                     |  |
| * speech/language, physical/o   |  |
| If yes, which agency?   | IFSP in place? □ Yes □ No                    |
| <b>Does your child have any sleeping problems?</b> $\square$ Yes $\square$ No | *** 1 0                                      |
| What time does your child go to bed?  | _ Wake up?                                   |
| <b>Does your child take a nap?</b> Yes   No                                   |  |
| <b>Does your child sleep through the night?</b> □ Yes □ No                    |  |
| <b>Does your child have frequent nightmares?</b> Yes   No                     |  |
| Has your child been in daycare or go to a babysitter? □ Yo                    | es 🗆 No                                      |
| <b>Does your child play well with others?</b> $\square$ Yes $\square$ No      |  |
| Special Concerns  |  |
| List any additional concerns  |  |
|   |  |
|   |  |
|   |  |
|   |  |
| Parent/Guardian Signature   | Date   |
| Staff Signature   | <br>Date                                     |
| · · · · · · · · · · · · · · · · · ·   |  |
| I verify that I have reviewed this health history form and                    | have taken any needed actions regarding this |
| child.  | nave taken any needed detrons regarding this |
| Ciniu.  |  |
| TD 1 C!   |  |
| Teacher Signature   | Date   |







#### **Returning Student Update Form**

| Child's Name:   |  |
|---|--|
| Current Address:  |  |
| Parent/Guardian Contact Number:   |  |
| My child may be released to the following people:                                   |  |
| Name:   | Relationship:                            |
| Phone Number:   | <u> </u>                                 |
| Name:   | Relationship:                            |
| Phone Number:   |  |
| Name:   | Relationship:                            |
| Phone Number:   |  |
| Has your child had any major illnesses or injuries i                                | in the past twelve months?               |
|   |  |
| Allergy: Does your child have any new allergies diagnosed but If yes, what allergy: | oy a doctor in the past year: □ Yes □ No |
| Does this allergy require an Epi Pen? □Yes □No                                      |  |
| Parent Signature:   | Date:                                    |
| Staff Signature:  | Date:                                    |

Revised: 1/20/2022



#### **Head Start**

"Building partnerships, changing lives"



### **Child Health Form Medical / Dental Home**

| Chile | a's Name:            |                  | <del> </del> |                   |
|-------|----------------------|------------------|--------------|-------------------|
| Insu  | rance Type:          |                  |              |                   |
|       |                      | CHIPS            |              |                   |
|       | ]                    | Medicaid         |              |                   |
|       | ]                    | Private:         |              |                   |
|       |                      | Other:           |              |                   |
|       |                      | No Coverage      |              |                   |
| Dolid | y Number             |                  |              |                   |
|       |                      | Yes              |              |                   |
| Dem   | .ai iliciuded        | 1 es             | NO           |                   |
| Curr  | ent Medical Provi    | der:             |              |                   |
|       | None at this         |                  |              |                   |
|       |                      |                  |              |                   |
| Curr  | ent Dental Provide   | er:              |              |                   |
|       | Phone:               |                  |              |                   |
|       | None at this         | stime            |              |                   |
|       |                      |                  |              |                   |
| Hosp  | pital to use in case | of an emergency: |              |                   |
|       |                      |                  |              |                   |
|       | G1 1 G 11 1          |                  |              |                   |
|       | Chronic Condition    | ons              | Diagnoses    | _                 |
|       |                      |                  | Date         | (Office Use Only) |

| Chronic Conditions | Diagnoses | Plan Completed              |
|--------------------|-----------|-----------------------------|
|                    | Date      | (Office Use Only)           |
| Autism             |           | IEP – Yes/No                |
| ADHD               |           | Physical Form – Yes/No      |
| Hearing Problems   |           | Audiologist Report – Yes/No |
| Vision Problems    |           | Optometrist Report – Yes/No |
| Seizures           |           | SAP – Yes/No                |
| Diabetes           |           | DAP – Yes/No                |
| High Lead Levels   |           | Treatment Plan – Yes/No     |

Revised: 1/20/2022

| <b>Life Threatening Allergies (EPI pen)</b> | Allergy AP – Yes/No |
|---|---------------------|
| Asthma                                      | AAP – Yes/No        |

Revised: 1/20/2022



### Head Start "Building partnerships, changing lives"



#### **Receipt of Handbook**

I have received a copy of the Head Start Operating Manual which includes: Parent Handbook, USDA Parent Resource Guide, Volunteer Handbook, and Resource Directory for 2022-2023. You are encouraged to read and understand this manual as there will be information that you may need during the school year. The handbook includes:

| Discipline and guidance                  | Procedures for release of children              |
|--|---|
| Suspension and expulsion                 | Illness and exclusion criteria                  |
| Emergency plans                          | Procedures for dispensing medicines             |
| Procedures for conducting health checks  | Immunization requirements                       |
| Safe sleep                               | Meals and food service practices                |
| Procedures for parents to discuss        | Procedures to visit the center without securing |
| concerns with the director               | prior approval                                  |
| Procedures for parents to participate in | Procedures for parents to contact Child Care    |
| operation activities.                    | Licensing, DFPS, Child Abuse Hotline, and DFPS  |
|  | website.  |
| Class Schedules                          |   |

Available on the website is the: Resource Directory, Campus Menus, Volunteer Application, Immunization Chart, USDA Parent Letter, WIC information, Building for the Future flyer, and School Calendars.

| I will access the parent handbook at <u>www.csntexas.org</u> . |           |
|--|-----------|
| I would like a paper copy of the                               | handbook. |
| Signature of parent  | Date      |
| Staff Signature (for receipt of their Handbook)                | <br>Date  |

Please sign and date this page, remove it, and return it to your Family Service Worker.

Updated: 1/19/2022

| Students Name: |  |
|----------------|--|
|                |  |

Updated: 1/19/2022

#### **Justification**

### Head Start/Early Head Start Standard Operating Manual Update #06CH011282/03

| Date       | Description              |
|------------|--------------------------|
| 03/23/2022 | Operating Manual Updates |

#### **Education**

Developmental Screening (Speed DIAL-4 & Ages And Stages) updated rescreen process, CLASS (Classroom Assessment Scoring System) – added 10-minute observation at the beginning of the year

PBC – provided structured definition of how staff are coached and what is used to coach them

#### Health

Title changes, the first aid supply list, the health notification procedure

#### **Nutrition**

Added CACFP National Disqualified List, CACFP 504 Coordinator sections and Signed Vendor Contracts

### CSNT Head Start 2021-2022 Program Goals Progress Report

| families         |                   | •                      | Ith Services for enr |                   |           |
|------------------|-------------------|------------------------|----------------------|-------------------|-----------|
| Year Three Ob    | ojective One Outo | <b>ome:</b> 85% of par | ents will obtain (El | PDST) health req  | uirements |
| for their childs | ren               |                        |                      |                   |           |
| Fall             | HS 71%            | Winter                 | HS 71%               | Spring            |           |
| Progress         | EHS 92%           | Progress               | EHS 76%              | Progress          |           |
| Program Goal     | 1 Challenges: Pa  | rents understand       | ing the importance   | of getting this o | lone      |

| Program Goal 2: Provide Comprehensive School Readiness  |                 |                    |                    |                    |             |  |
|---|-----------------|--------------------|--------------------|--------------------|-------------|--|
| Year Three O  | bjective One Ou | tcome: 66% of Head | d Start children v | vill name upper an | d lowercase |  |
| letters   |                 |                    |                    |                    |             |  |
| Fall  |                 | Winter             |                    | Spring             |             |  |
| Progress  | 32%             | Progress           | 52%                | Progress           |             |  |
|   |                 |                    |                    |                    |             |  |
| Program Goal 2 Challenges: Teachers individualizing according to the data in the child assessment |                 |                    |                    |                    |             |  |
| system  |                 |                    |                    |                    |             |  |

| Program Goal 2: Provide Comprehensive School Readiness |                |                       |                   |                            |          |  |
|--|----------------|-----------------------|-------------------|----------------------------|----------|--|
| Year Three Ol  | bjective Two O | utcome: 81% of chi    | ldren will seque  | nce count to 50            |          |  |
| Fall Winter Spring Progress 34% Progress               |                |                       |                   |                            |          |  |
| Program Goal system                                    | 2 Challenges:  | Teachers individuali: | zing according to | o the data in the child as | sessment |  |

| Program Go   | oal 2: Provide Comp  | rehensive Scho     | ol Readiness.  |                    |                                  |  |
|--|--|--------------------|--|--------------------|----------------------------------|--|
| <b>Year Three Objective Three Outcome:</b> <u>Head Start</u> 5 increase in CLASS Emotional Support (ES) and Classroom Organization (CO) and .2 increase in Instructional Support (IS) <u>Early Head Start</u> – Emotional & Behavior score of 6 and Engaged Learning score of 6 and Responsive Caregiving score of 6 |  |                    |  |                    |                                  |  |
| Fall<br>Progress   | ES .19 decrease<br>CO .35 decrease<br>IS .75 decrease<br>EB .10 decrease<br>EL .22 decrease<br>RC .56 decrease | Winter<br>Progress | ES .90 increase<br>CO .55 increase<br>IS .75 increase<br>EB .90 increase<br>EL .17 decrease<br>RC .75 increase | Spring<br>Progress | ES<br>CO<br>IS<br>EB<br>EL<br>RC |  |

| Program Goal 2: Provide Comprehensive School Readiness  |   |        |     |        |  |  |  |
|---|---|--------|-----|--------|--|--|--|
| Year Three  | Year Three Objective Four Outcome: 45% of Early Head Start children will demonstrate interactions |        |     |        |  |  |  |
| with their p  | with their peers  |        |     |        |  |  |  |
| Fall  | 77%   | Winter | 89% | Spring |  |  |  |
| Progress  | Progress Progress Progress  |        |     |        |  |  |  |
| Program Goal 2 Challenges: Teachers individualizing according to the data in the child assessment |   |        |     |        |  |  |  |
| system  |   |        |     |        |  |  |  |

| Program Goal 3: Increase Parent Involvement in the Head Start Program                             |   |                   |  |  |  |  |  |
|---|---|-------------------|--|--|--|--|--|
| Year Three Objective One Outcome: 45% of parents will be involved in their child's education      |   |                   |  |  |  |  |  |
| Fall  | 40% Winter 68% Spring                   |                   |  |  |  |  |  |
| Progress  |   | Progress Progress |  |  |  |  |  |
| Program Goal 3 Challenges: Parent's ability to participate in activities due to other commitments |   |                   |  |  |  |  |  |
| such as wor   | such as work or family responsibilities |                   |  |  |  |  |  |

### Parent, Family, and Community Engagement Framework School Readiness Goals 2021-2022

**1. Goal:** Parents will ensure that all children are healthy.

Objective: 87% of all students will complete health requirements. 71% HS 76% EHS

#### **Action Steps:**

- 1. 87% compliance of all EPTSD physical requirements. -82.5% HS 85.5% EHS
- 2. 92% Compliance on initial physicals. 88% HS 100% EHS
- 3. 87% Compliance on all six month dentals. 46% HS 50% EHS
- 4. 85% compliance on lead and hemoglobin. 69% HS 71% EHS
- 2. Goal: Parents will increase family engagement skills.

Objective: 80% of Parents will participate in Family Engagement Activities. 61%

#### **Action Steps:**

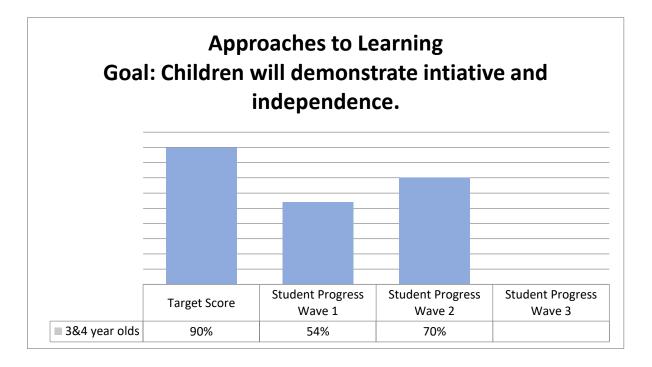
- 1. 40% Parent Meeting Attendance -21%
- 2. 75% participation in Literacy Program/Walk Across Texas. na
- **3.** 100% of parents needing a GED will receive information/resources to complete GED program. **100**%
- **4.** 80% Ready Rosie Parent Participation **62%**
- **3. Goal:** Parents will be prepared for transition into Kindergarten.

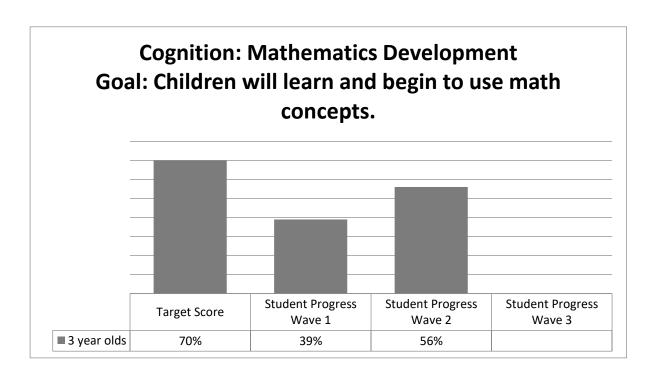
**Objective:** 80% of parents will complete activities that will ensure their child is ready to transition to ISD campus. **94.5**%

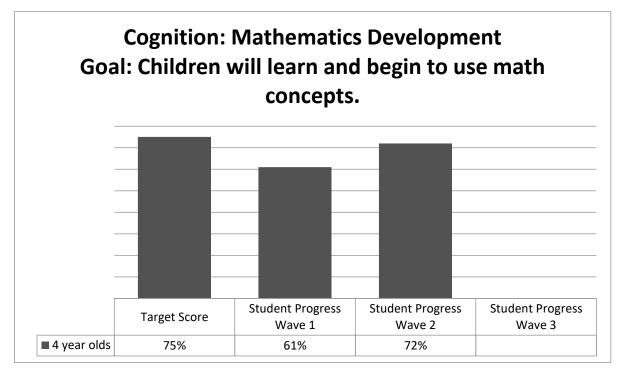
#### **Action Steps:**

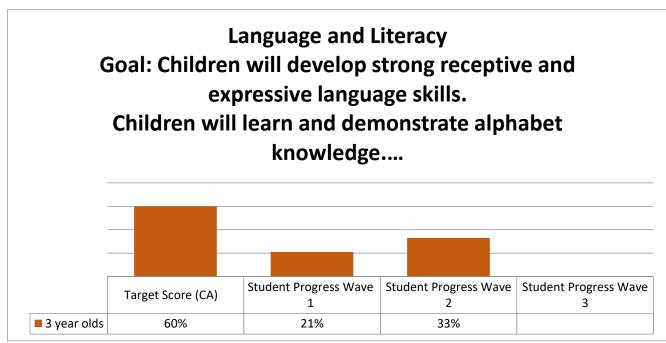
- 85% parent participation in Home Visits and Parent Teacher Conferences. 92%
- 2. 80% completion of home activities. 97%
- 3. 40% participation at the end of the year transition parent meeting. **Na**

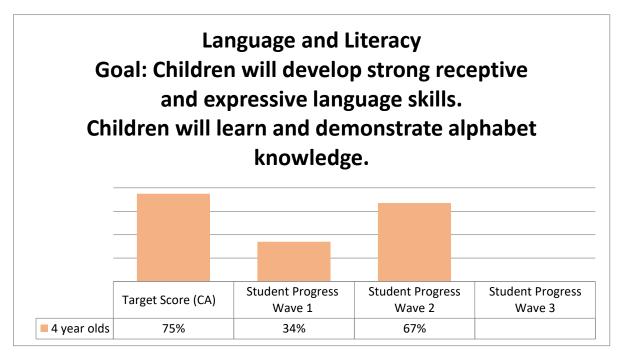
Updated: 2/28/2022

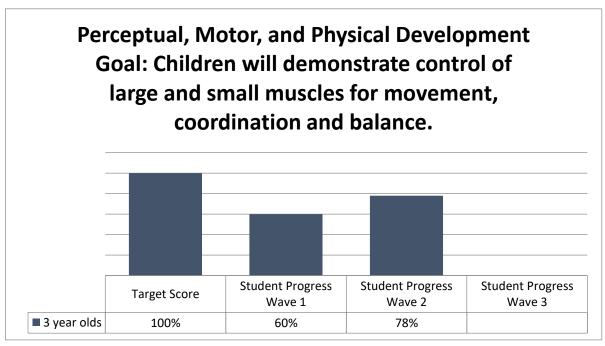


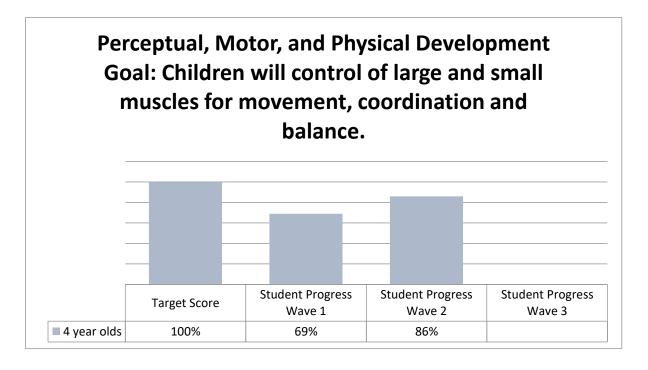


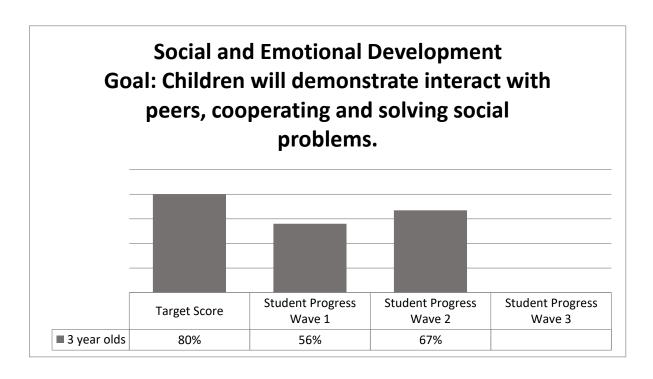


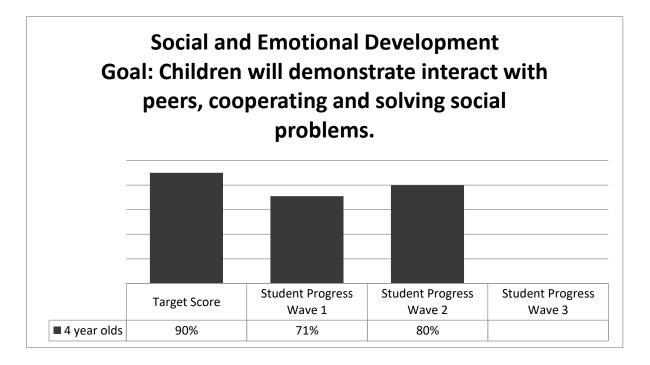


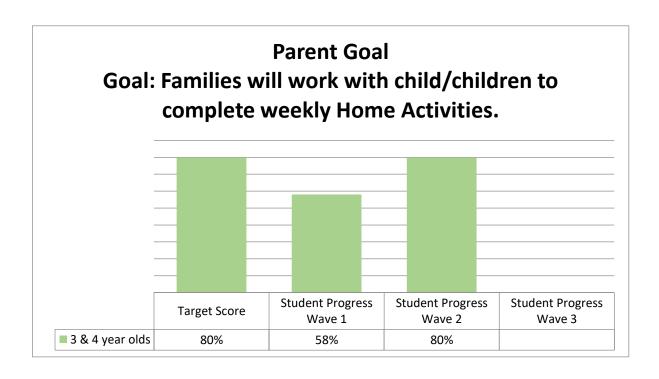


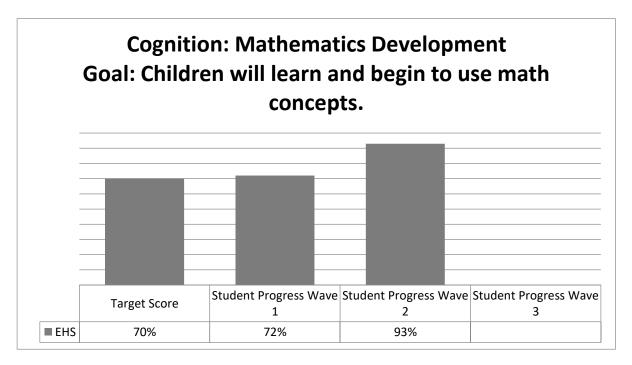


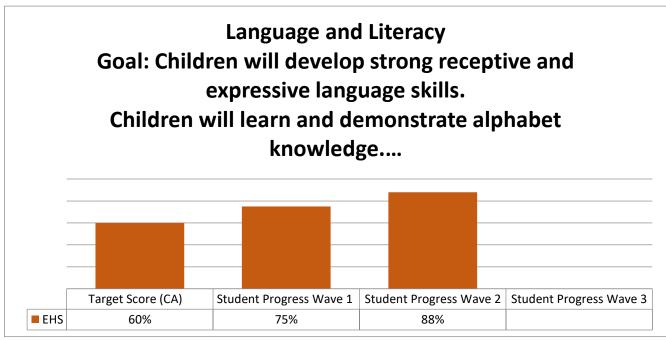


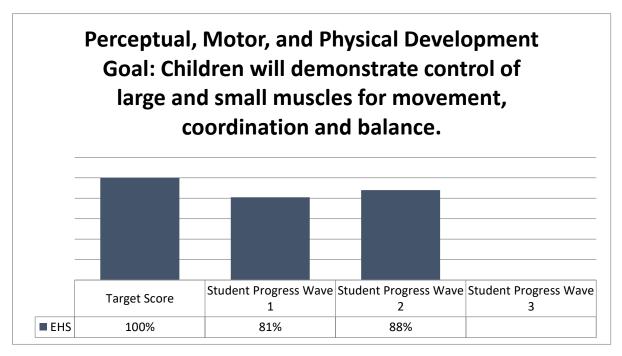


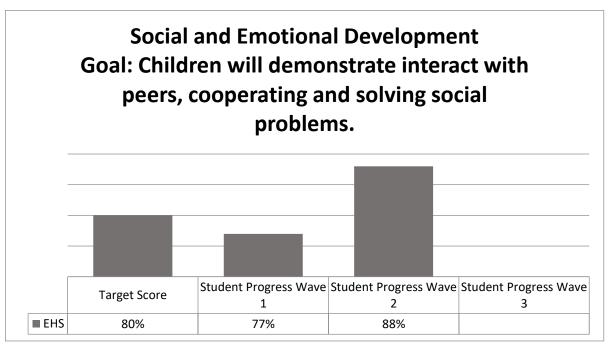


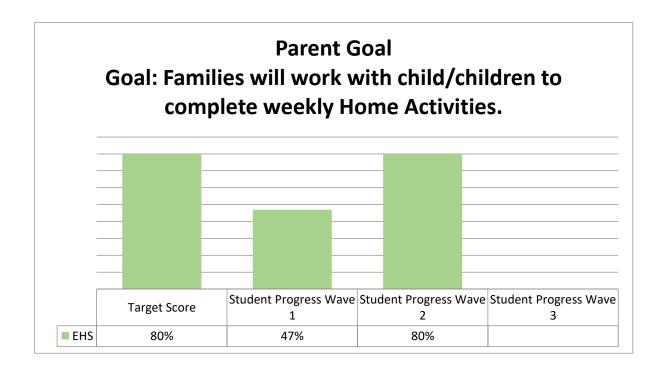




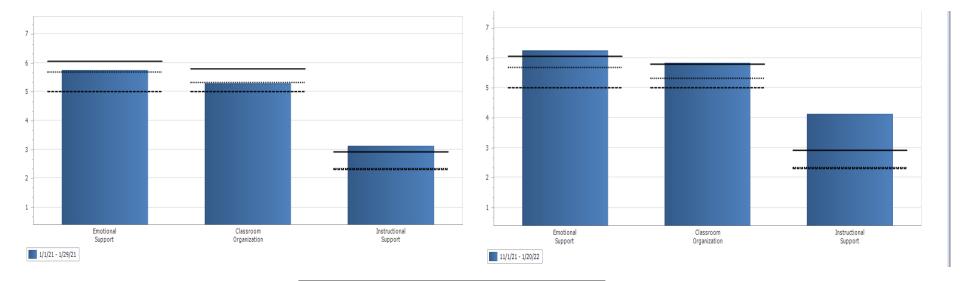








#### 2022 Winter CLASS Detailed Monitoring



| 2021             | ES   | co   | IS   |
|------------------|------|------|------|
| 1/1/21-1/31/2021 | 5.73 | 5.28 | 3.11 |

| 2020 Lowest 10% Nationally |
|----------------------------|
| Re-Competition Level       |
| 2020 National Average      |

| 2022               | ES   | СО   | IS   |
|--------------------|------|------|------|
| 1/1/2022-1/20/2022 | 6.23 | 5.83 | 4.10 |

| 2020 National OHS CLASS Average Domain Scores |        |      |      |  |  |  |
|---|--------|------|------|--|--|--|
| Domain Lowest 10% Median (50%) Highest 109    |        |      |      |  |  |  |
| Emotional<br>Support                          | 5.6750 | 6.05 | 6.32 |  |  |  |
| Classroom<br>Organization                     | 5.3175 | 5.80 | 6.17 |  |  |  |
| Instructional<br>Support                      | 2.3889 | 2.94 | 3.52 |  |  |  |

2 Teachers Assistants were observed during the 2022 Winter Detailed Monitoring

**Emotional Support Quality Thresholds** 

Winter 2021—5.73 Winter 2022—6.23 Classroom Organization Quality Thresholds

Winter 2021-5.28 Winter 2022-5.83 Instructional Support Quality Thresholds

Winter 2021-3.11 Winter 2022-4.10

### Community Services of Northeast Texas, Inc. Head Start CIRCLE Assessment – Wave 2 2021-2022



This data reflects demographic information on the students who participated in this assessment session.

| otal Students Participating:  |              |              | 429       |     |
|-------------------------------|--------------|--------------|-----------|-----|
|                               |              | Students Ag  | e         |     |
| Three Year Old: 41% Four Year |              |              | Old: 59%  |     |
|                               |              | Gender       |           |     |
| Male: 44%                     |              | Female:      |           | 56% |
|                               |              | Race         |           |     |
| White:                        | Black/Africa | n American:  | Two or mo | re: |
| 30%                           | 53           | 3%           | 9%        |     |
|                               | Other:       | Not Spe      | ecified:  |     |
|                               | 8%           | 09           | %         |     |
| L                             |              | Language*    |           |     |
| English:                      | Spa          | anish        | Unknow    | n:  |
| 95%                           | 5            | 5%           | 0%        |     |
|                               |              | Disabilities | 1         |     |

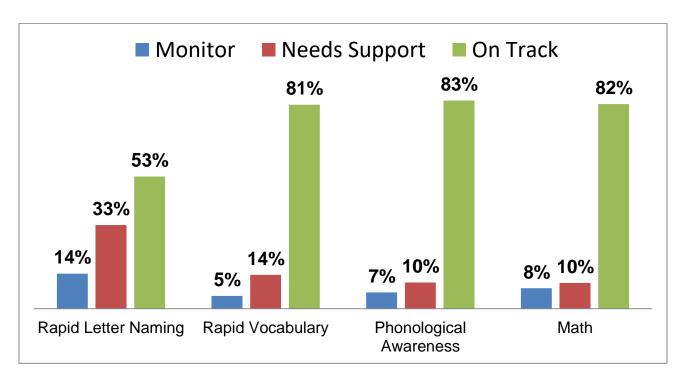
No:

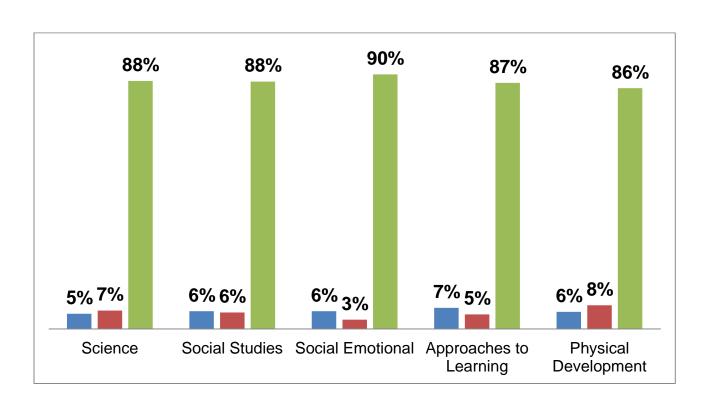
93%

Yes:

**7**%

# CSNT Head Start CIRCLE Assessment 2021-2022 Wave 2 Program Report



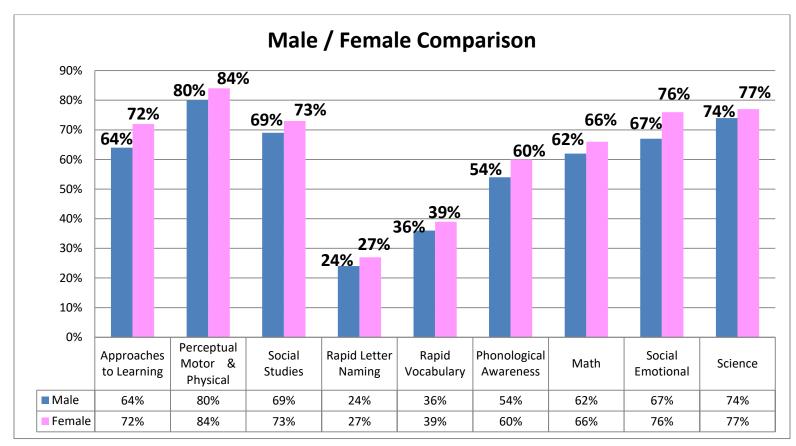


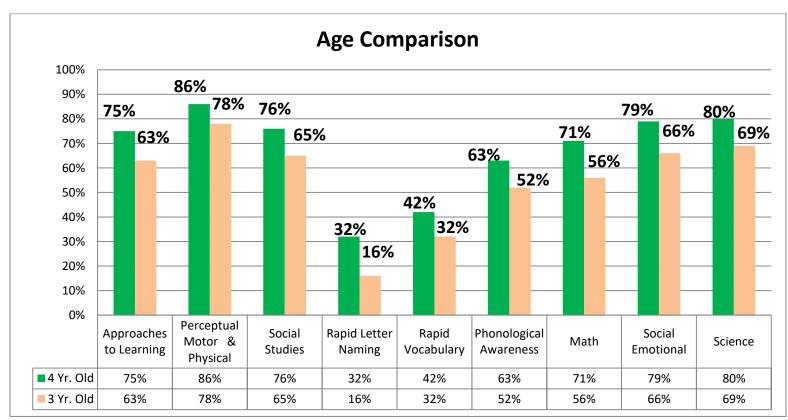
## CSNT Head Start – CIRCLE Assessment On-Track Comparison Data 2021-2022

|                        | Wave 1 | Wave 2 |
|------------------------|--------|--------|
| Rapid Letter Naming    | 32%    | 53%    |
| Rapid Vocabulary       | 65%    | 81%    |
| Phonological Awareness | 83%    | 83%    |
| Math                   | 81%    | 82%    |
| Science                | 88%    | 88%    |
| Social Studies         | 92%    | 88%    |
| Social Emotional       | 97%    | 90%    |
| Approaches to Learning | 91%    | 87%    |
| Physical Development   | 88%    | 86%    |
| Total Students Tested  | 418    | 429    |

<sup>\*</sup>Wave 2 data may indicate an anomaly in database system.

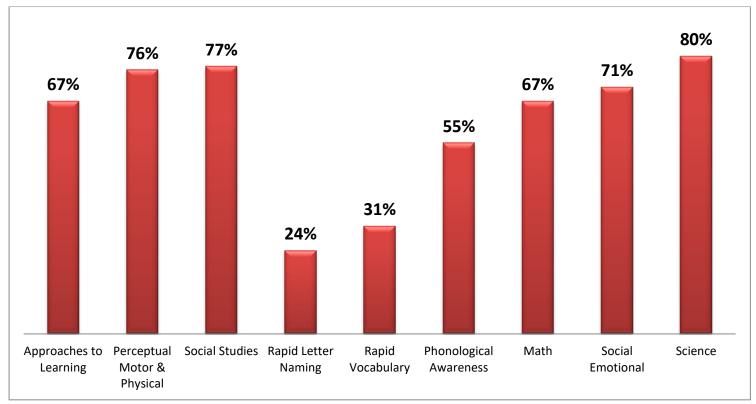
## **CSNT Head Start – CIRCLE Assessment**Wave 2 Comparison Data 2021-2022

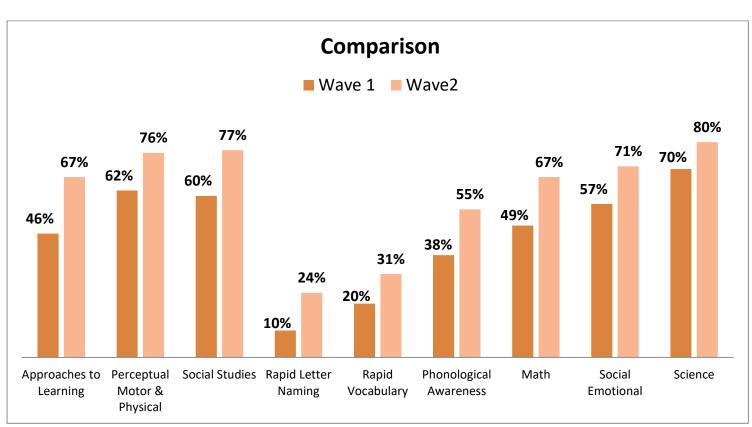




#### **CSNT Head Start – CIRCLE Assessment**

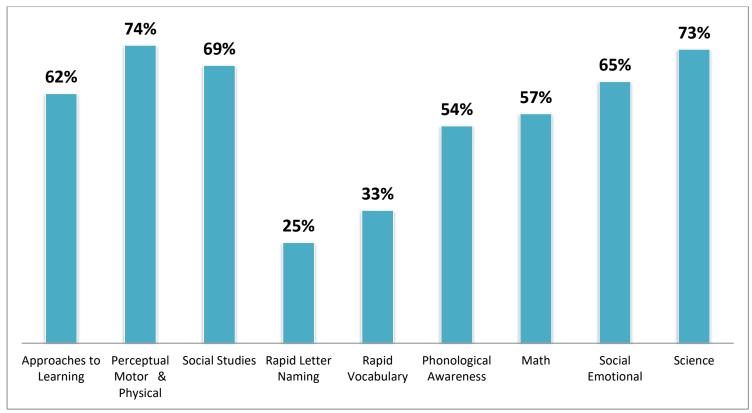
Wave 2 Dual Language learners 2021-2022

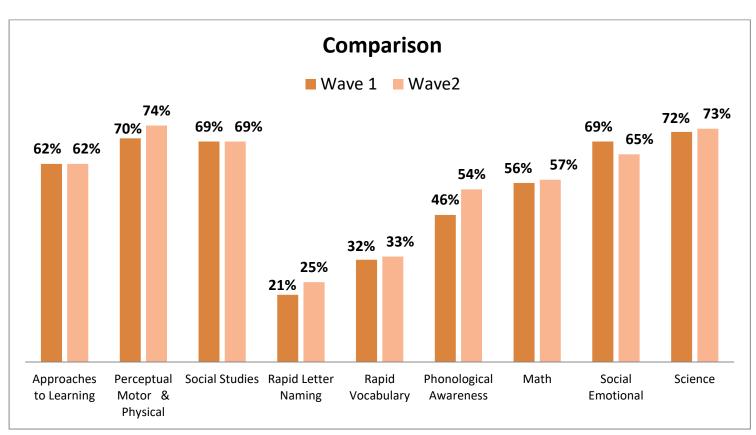




#### **CSNT Head Start – CIRCLE Assessment**

Wave 2 Disability 2021-2022





## CSNT Head Start - CIRCLE Assessment Wave 2 Race Comparison Data 2021-2022

|                              | White | Black / African<br>American | Other | 2 or More<br>Races |
|------------------------------|-------|-----------------------------|-------|--------------------|
| Approaches to Learning       | 71%   | 64%                         | 75%   | 65%                |
| Perceptual<br>Motor/Physical | 84%   | 78%                         | 86%   | 81%                |
| Social Studies               | 67%   | 69%                         | 78%   | 66%                |
| Rapid Letter Naming          | 25%   | 25%                         | 24%   | 29%                |
| Rapid Vocabulary             | 38%   | 38%                         | 35%   | 36%                |
| Phonological Awareness       | 59%   | 58%                         | 55%   | 55%                |
| Math                         | 67%   | 64%                         | 71%   | 63%                |
| Social Emotional             | 75%   | 70%                         | 79%   | 71%                |
| Science                      | 79%   | 74%                         | 79%   | 72%                |
| <b>Total Students Tested</b> | 128   | 229                         | 34    | 38                 |

Percentage represents total number of correct responses for each domain.

#### Community Services of Northeast Texas, Inc.

Yes:

**13%** 

#### Early Head Start Frog Street Wave 2 2021-2022



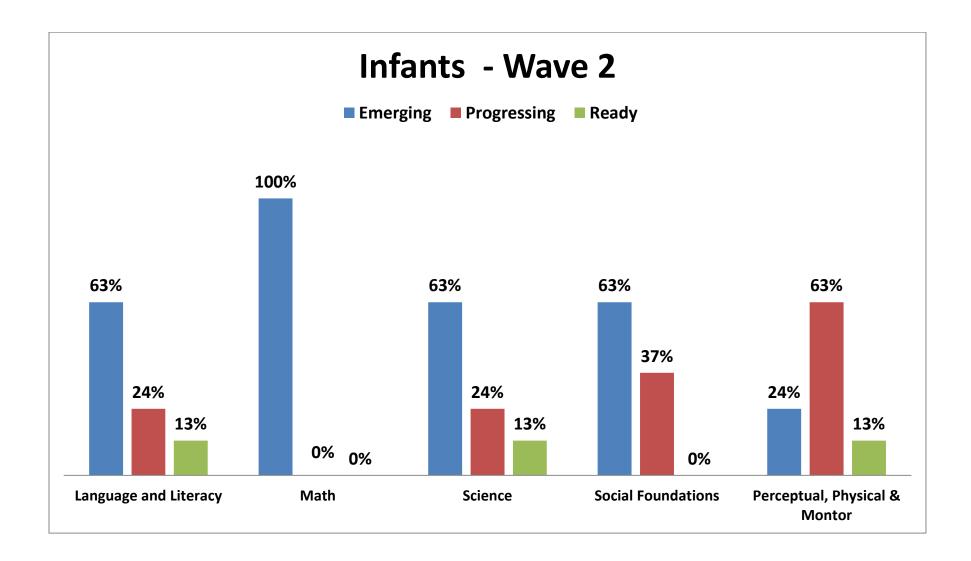
This data reflects demographic information on the students who participated in this assessment session.

| otal Students Participating: |              | 8 - Infar    |             |  |
|------------------------------|--------------|--------------|-------------|--|
|                              |              | Students Ag  | e           |  |
| 12 to 18 Months:             | 25%          | 19 to 24 N   | lonths: 75% |  |
|                              |              | Gender       |             |  |
| Male:                        | 38%          | Female:      | 6           |  |
| _                            |              | Race         |             |  |
| White:                       | Black/Africa | n American:  | Two or mor  |  |
| 13%                          | 74           | 74%          |             |  |
|                              | Other:       | Not Sp       | ecified:    |  |
|                              | 0%           |              | 0%          |  |
|                              |              | Language     |             |  |
| English:                     | lish: Span   |              | Unknown     |  |
| 100%                         | C            | )%           | 0%          |  |
|                              | 1            | Disabilities |             |  |

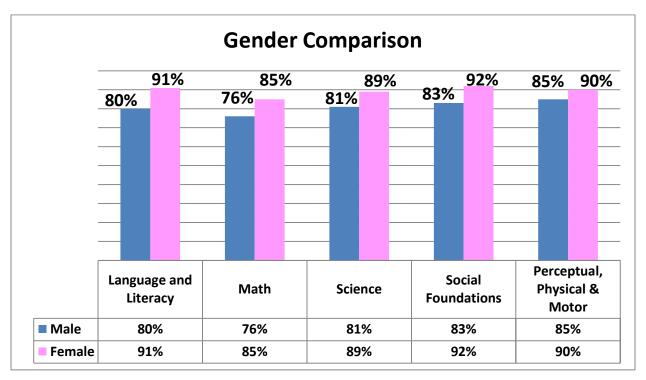
No:

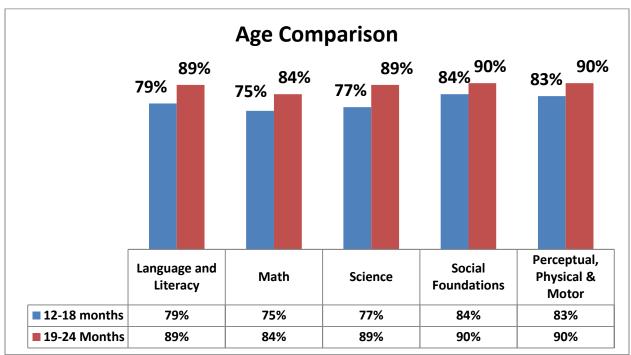
**87%** 

#### CSNT Early Head Start 2021-2022 - Frog Street AIM



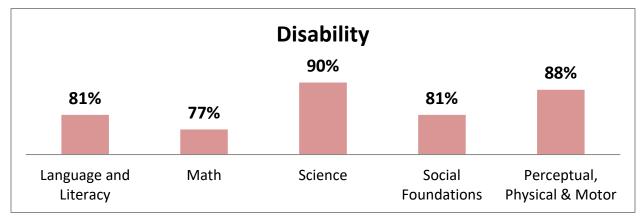
### CSNT Early Head Start – Frog Street AIM – Wave 2 Comparison Data 2021-2022 – Infants

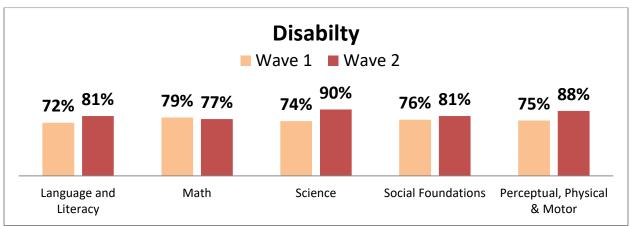




<sup>\*</sup>Age Comparison for 19-24 months has one student with IFSP.

## CSNT Early Head Start - Frog Street AIM Wave 2 Comparison Data 2021-2021 – Infants





\*No Dual Language Learners Data for Infants.

| Race                           | White | Black/<br>African<br>American | Other | 2 or More<br>Races |
|--------------------------------|-------|-------------------------------|-------|--------------------|
| Language and Literacy          | 94%   | 84%                           | 0%    | 97%                |
| Mathematics                    | 85%   | 80%                           | 0%    | 89%                |
| Science                        | 95%   | 82%                           | 0%    | 100%               |
| Social Foundations             | 97%   | 86%                           | 0%    | 95%                |
| Perceptual, Physical & Motor   | 93%   | 86%                           | 0%    | 95%                |
| <b>Total Students Observed</b> | 1     | 6                             | 0     | 1                  |

#### Community Services of Northeast Texas, Inc.

Yes:

33%

#### Early Head Start Frog Street Wave 2 2021-2022



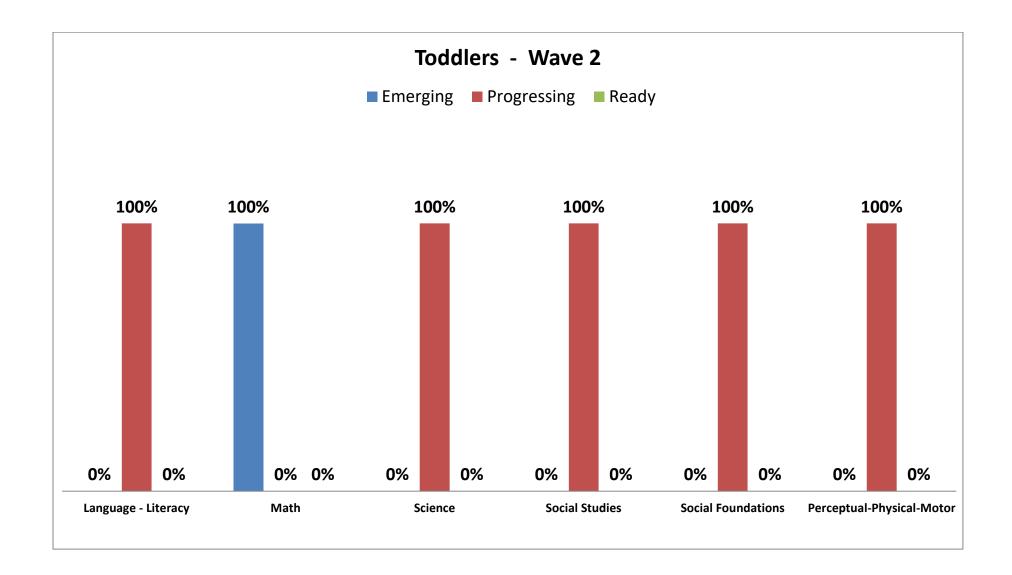
This data reflects demographic information on the students who participated in this assessment session.

| Total Students Participating: |               |              | 3– Toddlers  |  |
|-------------------------------|---------------|--------------|--------------|--|
|                               |               | Students Age | 2            |  |
| 25 to 30 Months:              | 100%          | 31 to 36 M   | onths: 0%    |  |
|                               |               | Gender       |              |  |
| Male:                         | 33%           | Female:      | 67%          |  |
|                               |               | Race         |              |  |
| White:                        | Black/Africa  | n American:  | Two or more: |  |
| 0%                            | 67            | <b>2%</b>    | 0%           |  |
|                               | Other:        | Not Spe      | ecified:     |  |
| 33%                           |               | 09           | 6            |  |
|                               |               | Language     |              |  |
| English:                      | English: Spar |              | Unknown:     |  |
| 100%                          | 0             | %            | 0%           |  |
|                               |               | Disabilities |              |  |

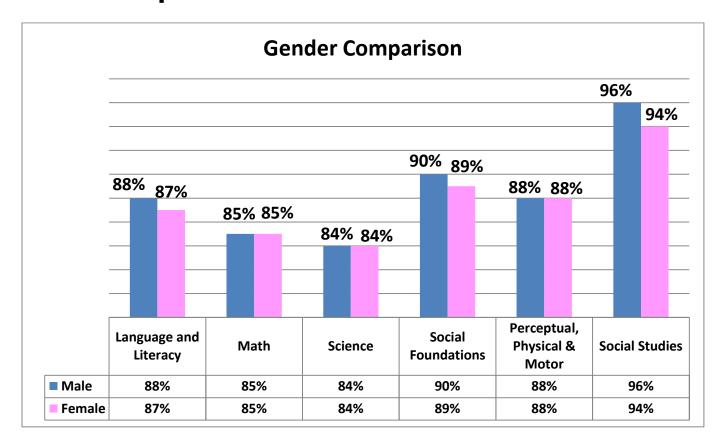
No:

**67%** 

#### CSNT Early Head Start 2021-2022 - Frog Street AIM

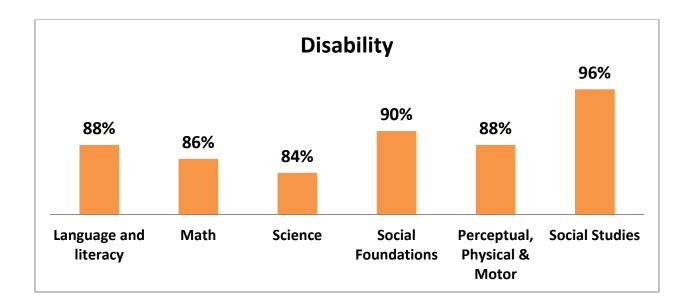


## CSNT Early Head Start – Frog Street AIM – Wave 2 Comparison Data 2021-2022 – Toddlers



| Race                           | White | Black/<br>African<br>American | Other | 2 or More<br>Races |
|--------------------------------|-------|-------------------------------|-------|--------------------|
| Language and Literacy          | 0%    | 87%                           | 88%   | 0%                 |
| Mathematics                    | 0%    | 84%                           | 86%   | 0%                 |
| Science                        | 0%    | 84%                           | 84%   | 0%                 |
| Social Foundations             | 0%    | 89%                           | 90%   | 0%                 |
| Perceptual, Physical &         |       |                               |       |                    |
| Motor                          | 0%    | 88%                           | 88%   | 0%                 |
| Social Studies                 | 0%    | 94%                           | 96%   | 0%                 |
| <b>Total Students Observed</b> | 0     | 2                             | 1     | 0                  |

## CSNT Early Head Start – Frog Street AIM – Wave 2 Comparison Data 2021-2022 – Toddlers



<sup>\*</sup>No Age Comparison Data for Toddlers - all three students fall in the same age group.

<sup>\*</sup>No Dual Language Learners Data for Toddlers

#### Community Services of Northeast Texas, Inc.

#### Early Head Start Frog Street Wave 2 2021-2022



This data reflects demographic information on the students who participated in this assessment session.

| Total Students Participating: |                              |              | 5 Pre-School Entry |       |  |  |
|-------------------------------|------------------------------|--------------|--------------------|-------|--|--|
|                               |                              | Students Ag  | e                  |       |  |  |
| 25 to 30 Months               | : 0%                         | 31 to 36 N   | onths: 10          | 00%   |  |  |
|                               |                              | Gender       |                    |       |  |  |
| Male: 100%                    |                              | Female:      |                    | 0%    |  |  |
|                               |                              | Race         |                    |       |  |  |
| White:                        | ite: Black/African American: |              | Two or more:       |       |  |  |
| 0%                            | 8                            | 80%          | 0%                 |       |  |  |
|                               | Other:                       | Not Sp       | ecified:           |       |  |  |
| 20%                           |                              | 0            |                    |       |  |  |
|                               |                              | Language     |                    | J     |  |  |
| English:                      | Sp                           | anish        | Unkr               | nown: |  |  |
| 100%                          | 100% 0%                      |              | 0                  | %     |  |  |
|                               |                              | Disabilities |                    |       |  |  |

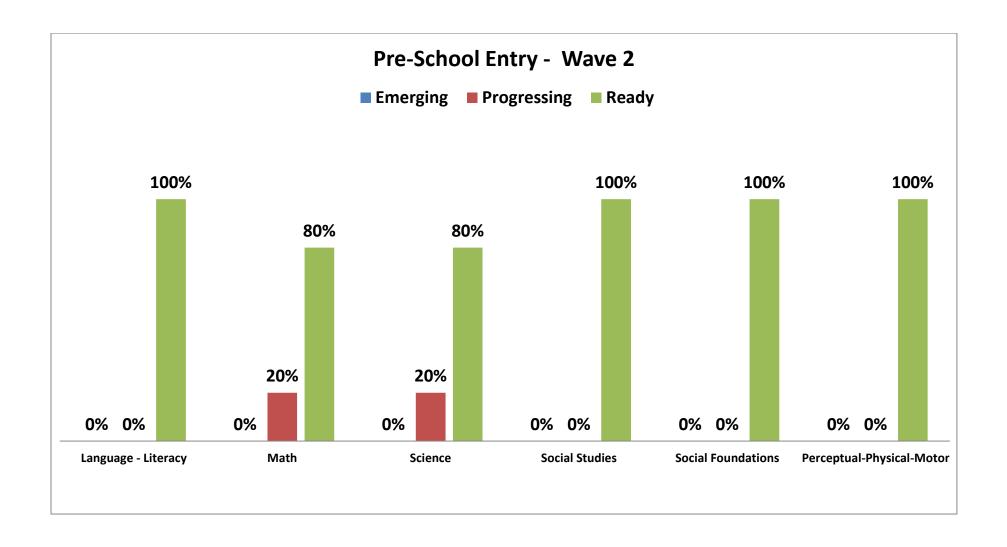
No:

100%

0%

Yes:

#### CSNT Early Head Start 2021-2022 - Frog Street AIM



## CSNT Early Head Start – Frog Street AIM – Wave 2 Comparison Data 2021-2022 – Pre-School Entry

| Race                           | White | Black/<br>African<br>American | Other | 2 or More<br>Races |
|--------------------------------|-------|-------------------------------|-------|--------------------|
| Language and Literacy          | 0%    | 91%                           | 91%   | 0%                 |
| Mathematics                    | 0%    | 88%                           | 91%   | 0%                 |
| Science                        | 0%    | 91%                           | 93%   | 0%                 |
| Social Foundations             | 0%    | 91%                           | 92%   | 0%                 |
| Perceptual, Physical & Motor   | 0%    | 86%                           | 87%   | 0%                 |
| Social Studies                 | 0%    | 91%                           | 90%   | 0%                 |
| <b>Total Students Observed</b> | 0     | 4                             | 1     | 0                  |

No Gender Comparison Data for Pre-School Entry – all five students are male.

No Age Comparison Date – all five students fall in same age group.

No Dual Language Learners Data for Pre-School Entry student.