SD HEAD START COLLABORATION OFFICE NEEDS ASSESSMENT SURVEY RESULTS 2022
**PURPOSE OF THE SD HEAD START COLLABORATION OFFICE**

SD Head Start Collaboration Office

- Assist Head Start Grantees in enhancing school readiness including promoting alignment of child outcomes, birth to Kindergarten.
- Enable Head Start Grantees to better access Professional Development opportunities in South Dakota.
- Build partnerships with local and statewide stakeholders to better meet the needs of low-income children, birth to school entry, and their families.
- Promote better linkages between Head Start Grantees and other child and family agencies.
- Establish collaborative relationships and partnerships with agencies that provide services to children and families of low income in health, mental health, disabilities, child welfare and family services.

SD Head Start Grantees  
SD Local and Statewide Stakeholders
Region VIII SD Head Start Grantees

- Directors/Assistant Directors
- Site Manager
- Education Managers
- Coaches
- Transition Specialists
- Disabilities Managers/Specialists
- Mental Health /Behavioral Health Specialists
- Family Services Specialists/Workers
- Health & Safety Specialists
- Nutrition Specialists
- Education Staff: Teachers, Teacher Assistants, Home Visitors

GRANTEE SURVEY DISTRIBUTION
**Head Start Act**
Sec. 642B(a)(4)(A)  
Head Start Collaboration shall conduct an assessment that address the needs of the Head Start agencies in the State with respect to collaboration, coordination and alignment of services, and school readiness alignment.

**Maximize Partnerships**
SD Head Start Collaboration Office knows that partnerships and connections are a shared process. Encompassing services for children and their families can have positive affects on school readiness and life success.

**Why Conduct a Needs Assessment?**
- Expand collaboration between grantees and other early childhood agencies.
- Develop longitudinal data reports using the DOE data systems.
- Support access to professional development and high-quality workforce.
- Collaborate with agencies utilizing a quality rating improvement system.
- Ensure transition continuity from Head Start to kindergarten.
- Raise awareness about substance misuse in Head Start programs.

**Meet Federal Regulations**

**Effectively Oversee Progress Toward Goals**

**Use Data for Continuous Improvement**
Obtain input from grantees and stakeholders to assist in identifying strengths and needs of collaboration efforts. Acquire new connections between grantees and stakeholders to better serve pregnant women and children enrolled in the program and their families.
DESCRIPTION OF SURVEYS

**Grantee Survey**
- 300 total surveys distributed
- 2 separate surveys: (list on page 5)
  - Program/Management Staff: 13 Q’s
  - Education Staff: 11 Q’s
- 161 total surveys returned for a 54% return-rate (64 Program, 97 Education)
- Focus on collaboration between grantee and collaboration office and grantee and stakeholders
- Focus on meeting the needs of grantee including professional development

**Stakeholder Survey**
- 101 surveys distributed
- 10 Q’s
- 73 surveys returned for a 72% return-rate
- Focus on collaboration between stakeholder and collaboration office and stakeholder and grantee
- Focus on services provided including professional development opportunities
- Focus on data sharing
Head Start programs prepare America’s most vulnerable young children to succeed in school and in life beyond school. Focusing on the whole child, programs deliver services to pregnant women to children birth to age 5 AND their families in education & child development, health, mental health, nutrition, family well-being, family engagement & partnerships, community partnerships, services for children with disabilities, and transition services.

All Grantees follow Head Start Performance Standards that are for each “component area”. For example, the Director will work more with policies and program governance, Health & Safety Specialist’s duties will focus on health status and care and oral practices, Family Service Specialists focus on family and community partnerships, etc.

Since most program staff will include those who do not necessarily work directly with children, they will have connections to other agencies within their community and/or statewide in order to help meet the needs of the child and their families. Education staff, however, work directly with children either in a classroom setting or during home visits and may not have as much collaboration. Based on this, the survey asked questions about their level of familiarity instead of their collaboration levels to local or statewide agencies.

Description of Services
Grantee Survey Results

What position best describes you?

3-5 yr. old Classroom Teacher – 52%
3-5 yr. old Classroom Assistant – 13%
Birth-3 yr. old Classroom Teacher – 9%
Birth-3 yr. old Classroom Assistant – 0%
3-5 yr. old Home Visitor – 9%
Prenatal- 3 yr. old Home Visitor – 13%

Coach (for teaching staff) – 6%
Transition – 3%
Other (many shared titles) – 2%

Director or Assistant Director – 17%
Site Manager – 14%

Education Manager – 20%
Disabilities Mgr./Spec. – 17%
Family Services Spec./Worker – 34%

Health & Safety Mgr./Spec. – 14%
Nutrition Mgr./Spec. – 5%
Mental Health Mgr./Spec. – 8%
*Percentage is the return rate from each program.

<table>
<thead>
<tr>
<th>Program</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICAP</td>
<td>21%</td>
</tr>
<tr>
<td>YFS</td>
<td>17%</td>
</tr>
<tr>
<td>SFHS</td>
<td>15%</td>
</tr>
</tbody>
</table>

What program do you provide services at?

<table>
<thead>
<tr>
<th>Program</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>USD</td>
<td>13%</td>
</tr>
<tr>
<td>NESD</td>
<td>10%</td>
</tr>
</tbody>
</table>

*Results are total of both grantee surveys. (program staff and education staff)

<table>
<thead>
<tr>
<th>Program</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCDC</td>
<td>10%</td>
</tr>
<tr>
<td>SCCD</td>
<td>10%</td>
</tr>
<tr>
<td>Badlands</td>
<td>6%</td>
</tr>
</tbody>
</table>
Overall, program staff has high to moderate collaboration with DSS. This coincides with the Family Service Worker having the highest response from the survey. FSW, work with families in reaching their goals or getting their needs met. Many services Head Start parents utilize are located within DSS. In some programs, the teachers and/or home visitors are responsible for working with the families when reaching their goals. Results show that a high percentage are familiar with services at DSS. 9% of education staff stated their program specialists work with the families regarding these needs.
DOE consists of Offices/Divisions that Head Starts can collaborate with. As mentioned on page 8 of this document, program specialists will work closely with agencies related to their area of expertise. Disabilities Specialists and Education Managers will have a higher collaboration with Part C and Part B. Family Service Specialists will have more collaboration around McKinney-Vento and the Nutrition Specialist will be most involved with Child and Adult Nutrition. 39% of program staff felt this collaboration was not applicable to their position.

Education staff were asked about Special Education at DOE and WIC, newborn screening and prenatal services at DOH. Although the results show a high percentage of familiarity, when broken down by Early Head Start (prenatal to age 3), 100% responded they were familiar with both DOH and DOE services.
As evident in the graph, a high percentage of staff responding to the survey believed these services were not applicable to their position. When broken down by position of program staff that work closely with SDWIC, the results are very different. Nutrition Specialists (33% of responses) work with WIC offices to collect data on child’s health and family needs. Health and Safety Specialists work with Immunization Programs (86%), WIC (71%), Newborn Screening (43%), and Prenatal Services (14%). In 2021, Head Starts worked with DOH in obtaining COVID-19 home tests for their families. 43% of Health and Safety Specialists had high collaboration. Rankings show the need for more connections with prenatal and newborn services. 50% of program indicated these programs were not applicable to their positions.
When families want to pursue their education and/or careers, they work with staff such as Family Services Workers (FSW) who connect them to local agencies that can provide these services. This graph displays a high percentage of “Low to No Collaboration” averaging 32% of the responses. The chart also illustrates the high percentage of staff who said it was not applicable to their position. Since FSW are those that will work with families most, when breaking down the data, FSW continued to show a high percentage of “Low to No Collaboration” at an average of 55%. These results show that there is opportunity to build on collaboration between Head Start staff and DLR when working with families and their needs focusing on jobs and education.
The Head Start PFCE is about building relationships with families that support well-being, strong relationships between parents and their children, and ongoing learning and development for both parents and children. Question 8 (program) and question 5 (education) were linked to each of the 7 goals of the framework.

- **Family Well-being:** Parents and families are safe, healthy, and have increased financial security.
- **Positive Parent-child Relationships:** Beginning with transitions to parenthood, parents and families develop warm relationships that nurture their child’s learning and development.
- **Families as Lifelong Educators:** Parents and families observe, guide, promote and participate in the everyday learning of their children at home, school, and in their communities.
- **Families as Learners:** Parents and families advance their own learning interests through education, training, and other experiences that support their parenting, careers, and life goals.
- **Family Engagement in Transitions:** Parents and families support and advocate for their child’s learning and development as they transition to new learning environments, including EHS to HS, EHS/HS to other early learning environments, and HS to Kindergarten through Elementary School.
- **Family Connections to Peers and Community:** Parents and families form connections with peers and mentors in formal or informal social networks that are supportive and/or educational and that enhance social well-being and community life.
- **Family as Advocates and Leaders:** Families participate in leadership development, decision-making, program policy development, or community and state organizing activities to improve children’s development and learning experiences.
(Q.8) What level of collaboration or connection do you have with the following programs/websites to better serve the children and families in your Head Start/EHS program?

Possible answers

- **High/Moderate**: have contacted as needed, make referrals, or utilize resources
- **Low/No contact**: never heard of this program
- **I would like to learn more about this program**
- **Not applicable to my position**

Program Staff

- Financial Literacy – 25%
- Disabilities Services – 30% (tied)
- Incarceration of a Loved One Services – 35%
- Substance Misuse Prevention/Treatment – 31%
- Mental Health Services – 47%
- Other Health Programs – 31%
- Housing Programs – 28%
- Parenting Education – 41%
- Helpline 211 – 47%
- Transitions – 33%
- Medical & Dental Providers – 46%
- Nutrition Services – 44%
- Domestic/Violence Shelters – 36%
- Child Development – 46%
- Libraries/Museums – 30%
- Disabilities – 30% (tied)

An average of 20 staff did not feel this collaboration was applicable to their position.
(Q.5) What level of familiarity do you have with your local programs/website to better serve children and families in your Head Start/EHS program?

I know about these local programs but had NO connection

Know about programs and had SOME connection

I do not know about these local programs (5 highest percentages)

Highest request for learning more about “this” local program at 21%
### Program Staff

**Q.7** What level of collaboration do YOU have with your local school district?

<table>
<thead>
<tr>
<th>Kindergarten Transitions</th>
<th>Special Education</th>
<th>Shared Educational Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>69% High to Moderate collaboration</td>
<td>56% High to Moderate collaboration</td>
<td>42% High to Moderate collaboration</td>
</tr>
<tr>
<td>17% Low Level to No collaboration</td>
<td>21% Low Level to No collaboration</td>
<td>31% Low Level to No collaboration</td>
</tr>
<tr>
<td>3% would like more collaboration</td>
<td>3% would like more collaboration</td>
<td>19% would like more collaboration</td>
</tr>
<tr>
<td>14% not applicable to my position</td>
<td>24% not applicable to my position</td>
<td>17% not applicable to my position</td>
</tr>
</tbody>
</table>

### Transitions, Special Education, and Shared Educational Activities

**Q.6** Do you *participate* in the following educational activities?

<table>
<thead>
<tr>
<th>Kindergarten Transitions</th>
<th>Attend IFSP or IEP meetings</th>
<th>EHS to Head Start Transitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>70%</td>
<td>83%</td>
<td>64%</td>
</tr>
</tbody>
</table>

When broken down by education staff working with 5-year-olds: 83%

When broken down by education staff working with 3-year-olds aging out of EHS: 73%
In the 2021 Needs Assessment, staff were asked what trainings they would **attend** if offered. These were the 5 highest percentages as a result.

### TOP 5 TRAININGS ATTENDED WITHIN LAST NEEDS ASSESSMENT

- **Child and/or Family Trauma (69%)**
- **Early Childhood Topics (64%)**
- **Presentations at networking (46%)**
- **Effective Transitions (33%)**
- **Mental Health: self, children, families (67%)**

Head Start grantees attended several trainings in the past year and as evident by the numbers, **three** of these topics were those that had been addressed in last year’s needs assessment. Head Start provides comprehensive services to children and their families. By attending high-quality and intensive trainings in topics related to services Head Start provides, this can improve child and family outcomes and have lifelong effects.

- **Substance Misuse** – 27%
- Utilizing SDELG, SDStepAhead, Crosswalk – 27%
- Shared PD with districts – 24%
- Understanding IFSP/IEP – 19%

**OTHER TRAININGS:**
- Leadership
- Child Nutrition
- Family Engagement
Professional Development Training Opportunities

(SDECE) SD Early Childhood Enrichment: Early childhood development, health and safety, and quality practices.

(SDSFEC) SD Statewide Family Engagement Center: Family Engagement, literacy, child development, special education topics, trauma, and more.

SD Parent Connection: Special education topics, health, behavior, and more.

(ECLKC) Early Childhood Learning Knowledge Center: Prenatal to age 5 early childhood topics related to Head Start.

(NAEYC) National Association for the Education of the Young Child: Research-based early childhood content aligned with NAEYC standards.

Other: Included national conferences, networking, nutrition, special education and working on a degree.

Q. Did you participate in any of the following PD opportunities?
In 2021, the SD Head Start Collaboration Office created an interactive document that included information and links of Early Childhood Professional Development opportunities in South Dakota. This was shared with Grantees and was designed for Head Start staff to utilize when searching for classes, webinars, trainings, and/or degrees in the Early Childhood field.

- **Online Degrees**
- **Face-2-Face Options**
- **SD Early Childhood Education Centers**
- **SD Professional Development Options**
- **National Professional Development Options**
- **Education, Leadership, Working with Children with Disabilities, Family Services, Health and Mental Health Topics**
Q. Did you utilize the Professional Development Interactive Document?

As a result of the high percentage of staff who stated they did not know what this document was, the SDHSCO sent it to staff requesting a copy. Once a copy was obtained, most staff replied they didn’t realize that was the name of the document and they had previously received a copy.
Q. To my knowledge, the Head Start Collaboration Director has helped myself or my program in:

- Improve consistency of effective transition efforts: 48%
- Increase connection with Early Childhood entities: 49%
- Increase awareness of statewide agencies: 39%
- Increase partnerships with programs on substance misuse: 44%
- Have knowledge of professional development opportunities in SD: 60%
- Participate in statewide quality rating system: 23%
- Work with state to collect longitudinal enrolled child data: 39%
- Unaware: 52%
- 4% 71%
- 6% 49%
- 3% 56%
- 4% 48%
- 2% 57%
- 4% 38%
Q. WHAT WOULD YOU LIKE TO SEE THE SD HEAD START COLLABORATION OFFICE DIRECTOR DO MORE OF TO INCREASE YOUR COLLABORATION WITH OTHER AGENCIES?

Other comments:
• I am not sure who the Collaboration Director is…Unaware of your support…learn more about housing
• I’m just learning…You’re doing a great job already…Thank you for your help with working with CANS
Each year, the Needs Assessment survey provides results to measure and help guide the work of the SD Collaboration Office in supporting the priorities of the Office of Head Start. Building collaborative relationships between Head Start and local and statewide agencies aids in the achievement of a common outcome – support children in school readiness and helping families meet their needs and reach their goals.

Collaboration Strengths
Although certain staff specialize in different areas of expertise, the overall connection all staff have with State agencies is high.

- DSS: Recruitment of eligible children utilizing TANF lists, childcare services, child protection, community action programs, and behavioral health services.
- DOE: Part C Birth-3, Part B Preschool, and Child and Adult Nutrition Services
- DOH: WIC Services and Immunization Records

Head Start grantees continue to have high connections with their local school districts through developmental screenings, kindergarten transitions, special education and participating in shared educational events when possible. They also have relationships with their local medical and dental providers, nutrition services, parenting education, libraries and museums, and statewide child development websites and resources.

Program specialists/managers/directors are linked with more agencies/organizations due to their position with working with families, thus having more connections. Education staff were familiar with most local agencies but not as connected.

- Mental health and related health programs
- Domestic shelters, housing agencies, and Helpline 211
- Transition programs/resources and disabilities services

SD Head Start Collaboration (SDHSCO) Connections
From November 2021 to May 2022, the SDHSCO invited statewide agencies to attend Grantee/Stakeholder meetings to present services, information and/resources of their program.

- Utilizing the SDStepAhead website, Transition to Kindergarten Crosswalk
- Department of Labor & Regulation: programs available for parents
- SD Family Connections: program for families of incarcerated loved ones (Sioux Falls)
- SDSU Extension: Financial Literacy for families (and staff)
- Behavior Care Specialists, Inc.: Behavior Intervention and Positive Reinforcement for children
Collaboration Opportunities
Head Start considers the full range of strengths, interests and needs of each child and family. Connecting families with all available services and resources they need to achieve their goals. Grantees identified a need for increasing collaboration with statewide and local agencies providing similar and/or additional services for children and families. Program and Education staff varied in what agencies they had low collaboration with or who they were not familiar with with.

- Program staff would like more information and collaborate more regarding childcare services, particularly SD childcare listings in service areas.
- Education staff would like more information on referring children and families in Behavioral Health, Prevention and Treatment of Substance Misuse, and more information on community action programs.
- More knowledge and/or collaboration regarding homelessness including McKinney-Vento and the steps and processes grantee staff can take when connecting and enrolling children experiencing homelessness in South Dakota.
- More information and connection with programs working with incarceration of a loved one.
- More information and resources on Substance Misuse
- More shared activities around school districts and Head Starts
- Access to the Head Start PD Interactive Document

Professional Development
1302.92(b) of the Performance Standards: A program must establish and implement a systematic approach to staff training and professional development designed to assist staff in acquiring or increasing the knowledge and skills needed to provide high-quality, comprehensive services within the scope of their job responsibilities, and attached to academic credit as appropriate.

In the fall of 2021, the SD Head Start Collaboration Office created and distributed to SD Head Start staff. This document included information and links to professional development opportunities in South Dakota and accredited national sites such as Early Childhood Learning and Knowledge Center (ECLKC) and National Association for the Education of Young Children (NAEYC). Staff also participate in the SD Early Childhood Education Conference held annually in April and the Head Start Region VIII Conference held in October.
What agency or program are you from? (% of responses)

**Health**
- WIC (Community Health Programs) – 15%
- Department of Health – 14%
- Medical or Dental – 3%
- Mental Health – 1%

**Community**
- Domestic Shelters/Centers – 14%
- Economic Assistance – 6%
- United Way – 4%
- State Child Care Services – 4%

**Early Childhood**
- EC Development – 7%
- Secondary Education – 6%
- Advocacy – 4%
- SD State Library – 1%

**Professional Development**
- For providers/professionals – 4%
- For parents and families – 3%

**Working with children and families with disabilities**
- 14%
Q.3. DOES YOUR PROGRAM PROVIDE SERVICES THAT COVER EACH COUNTY IN SD?

56% of respondents stated their program provides services in all 66 counties in South Dakota. The other respondents are represented by color dots in the counties they serve.
<table>
<thead>
<tr>
<th>Program</th>
<th>Ongoing or as needed collaboration: info-sharing, referrals, resources, etc.</th>
<th>I have not connected with this Head Start since our program is local only</th>
<th>No collaboration yet, but would like to share information about our services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter-Lakes Head Start</td>
<td>46%</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Youth &amp; Family Services Head Start</td>
<td>44%</td>
<td>31%</td>
<td>26%</td>
</tr>
<tr>
<td>South Central Child Development</td>
<td>37%</td>
<td>31%</td>
<td>34%</td>
</tr>
<tr>
<td>Sioux Falls Head Start</td>
<td>36%</td>
<td>34%</td>
<td>29%</td>
</tr>
<tr>
<td>Oahe Child Development Center</td>
<td>34%</td>
<td>41%</td>
<td>25%</td>
</tr>
<tr>
<td>USD Head Start</td>
<td>32%</td>
<td>36%</td>
<td>32%</td>
</tr>
<tr>
<td>Northeast SD Head Start</td>
<td>30%</td>
<td>38%</td>
<td>33%</td>
</tr>
<tr>
<td>TREC-Badlands Head Start</td>
<td>26%</td>
<td>38%</td>
<td>36%</td>
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</table>

Q.4. HOW HAVE YOU CONNECTED WITH THE SD HEAD START PROGRAMS?
Q.5. IF YOU WOULD LIKE TO COLLABORATE WITH A HEAD START PROGRAM, WHICH OPTIONS BEST SUIT YOUR ORGANIZATION/AGENCY?

50% or above responses

49% or below responses

Q.6. 73% stakeholders stated they were interested in sharing information about their program’s services with Head Start programs.

Virtual presentations or trainings

In-person presentations or trainings

Via email, phone call or resource sharing

Recorded presentations or trainings

Work through the collaboration office
Q.7. TOPICS OFFERED BY STAKEHOLDERS FOR PROFESSIONAL DEVELOPMENT

- Early Childhood Topics (48%)
- Family and Community Engagement (28%)
- Mental Health: self, children, families (29%)
- Working with children with disabilities (28%)
- Child and/or family trauma (26%)
- Early Literacy (23%)

By collaborating with statewide or local stakeholders, Head Start programs can increase supports for families and their needs. Respondents specified the following topics for families:

- Effective kindergarten transitions
- Substance misuse-prevention/treatment
- Financial Literacy
- Workforce skills
- Parenting Education
- Parenting Skills
- Prevention in domestic violence
- Prevention of suicide
- Economic Assistance
- Nutrition-prenatal to 5 years

20% of respondents do not provide trainings
The Office of Head Start (OHS) Program Information Report (PIR) provides comprehensive data on the services, staff, children, and families served by Head Start and Early Head Start programs nationwide. All grant recipients and delegates are required to submit this data for Head Start and Early Head Start programs.
Q.8. DOES YOUR AGENCY COLLECT DATA IN THE FOLLOWING CATEGORIES?

- Foster care
- Funded enrollments
- Disabilities Services
- Homelessness
- Health Services
- Primary language
- Services to families
- Ethnicity/Race
- Age of child

32% stakeholders do not collect this data.
Q.9. DOES YOUR AGENCY COLLECT THE FOLLOWING REFERRALS, INFORMATION- AND RESOURCE-SHARING, OR FOLLOW-THROUGH SERVICES?
Q.10. DO YOU UTILIZE HEAD START DATA IN YOUR AGENCY?

1. We use Head Start data when applying for federal funds such as grants or special projects.

2. We use Head Start data in our agency’s required statewide needs assessment.

3. We use pertinent Head Start data for planning purposes of our agency.

4. We do not utilize Head Start data, but we inform families of the local Head Start programs.

5. I am unsure if we use Head Start data at this point.

YES 13%

NO 75%
Through community partnerships, Head Start and Early Head Start programs build collaborative relationships with local and statewide organizations that support positive child and family outcomes. These agencies/organizations can respond to families' interests and needs. They can connect families to outside resources, encourage engagement in children's learning, and use community strengths and needs assessment data to guide collaboration. Through these connections, programs can also promote successful transitions for children and families from one service setting to another over time, or when multiple services are needed during the same time period.

Over 50% of respondents represent all SD counties. This gives Head Start programs an advantage when connecting with these agencies. An average of 48% of stakeholders had ongoing collaboration with one or more of the non-tribal Head Start programs. Although about 46% stated they had no collaboration, there were 40% who wanted to have this collaboration. This collaboration can be done via the SD head Start Collaboration Director. 70% reciprocated they would like to be contacted to begin this collaboration between grantee and stakeholder.

Stakeholders offer a variety of trainings, webinars, classes, or presenting in topics related to helping support children and families enrolled in Head Start. A high number stated they were willing to do virtual or in-person presentations for Head Start staff. With this in mind, and since 70%, as shown above, the SDHSCO will connect with local and statewide agencies to begin that collaboration. Beginning in Septembers of the new program year, grantee staff meet every other month for networking of same-position staff and SDHSCO provides a stakeholder to present on their program/agency. This continues for each program year.

Less than half of stakeholders collect data for their agency. However, those that do collect show similarity in the type of data with Head Start's Program Information Report (PIR). This presents the opportunity to work with other programs when collecting and aligning data.