

*Knoxville - Knox County  
Head Start/  
Early Head Start*



*Annual Report  
2014-2015*

*Administered by Knoxville-Knox County Community Action Committee*

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*In January of 1964, President Lyndon B. Johnson declared The War on Poverty in his State of the Union speech. Shortly thereafter, Sargent Shriver took the lead in assembling a panel of experts to develop a comprehensive child development program that would help communities meet the needs of disadvantaged preschool children. Among these experts were Dr. Robert Cooke, a pediatrician at John Hopkins University, and Dr. Edward Zigler, a professor of psychology and director of the Child Study Center at Yale University.*

*Part of the government's thinking on poverty was influenced by new research on the effects of poverty, as well as on the impacts of education. This research indicated an obligation to help disadvantaged groups, compensating for inequality in social or economic conditions. Head Start was designed to help break the cycle of poverty, providing preschool children of low-income families with a comprehensive program to meet their emotional, social, health, nutritional and psychological needs. A key tenet of the program established that it be culturally responsive to the communities served, and that the communities have an investment in its success through the contribution of volunteer hours and other donations as nonfederal share.*

*In September of 1995 the first Early Head Start grants were given. In October of 1998, Head Start was reauthorized to expand to full-day and full-year services.*

*Head Start was most recently reauthorized again in 2007 with bipartisan support. The Improving Head Start for School Readiness Act of 2007 has several provisions to strengthen Head Start quality. These include alignment of Head Start school readiness goals with state early learning standards, higher qualifications for the Head Start teaching workforce, State Advisory Councils on Early Care and Education in every state, and increased program monitoring, including a review of child outcomes and annual financial audits. The Head Start training and technical assistance system was redesigned to support programs through six National Centers and a state-based system to ensure success.*

*Head Start has served over 32 million children since 1965, growing from an eight-week demonstration project to include full day/year services and many program options. Currently, Head Start is administered by the Administration for Children and Families (ACF) in the Department of Health and Human Services. Head Start serves over a million children and their families each year in urban and rural areas in all 50 states, the District of Columbia, Puerto Rico and the U.S. territories, including American Indian, Alaskan Native and Migrant/Seasonal communities.*

*-<http://www.acf.hhs.gov/programs/ohs/about/history-of-head-start>*

## Head Start History



# Children

*We served approximately 33% of eligible preschool children and 3% of eligible infants and toddlers in Knox County, for a total of 1109 children.*

*41 children under age one  
62 one-year olds  
89 two-year olds  
457 three-year olds  
460 four-year olds*

*157 of the children received vouchers through the Child Care Certificate program.*

## *Primary Language of the home*

*826 children (74%) - English  
197 children (18%) - Spanish  
30 children (3%) - African Languages  
36 children (3%) - Middle Eastern or South Asian Languages  
13 children (1%) - East Asian Languages  
7 children (1%) - European or Slavic Languages*



*The average monthly enrollment (as a percentage of funded enrollment) was 99% for Head Start and 100% for Early Head Start.*



# Services

## Medical

95% (1055) of children received medical exams  
Through Head Start partnerships, 487 children  
received the FluMist and 253 children  
received lead testing.

## Nutrition

54,998 Breakfasts were served  
99,114 Lunches were served  
51,550 Snacks were served

## Education

1175 children received developmental assessments  
398 children transitioned to Kindergarten

## Dental

90% (1000) of children received dental exams  
25% increase in the number of children with  
continuous, accessible dental care provided  
by a dentist (790 in the fall to 1060  
by the end of the year)

## Disability

11% of children had an IEP or IFSP and  
received on-site services

## Transportation

614 children were transported daily  
on bus routes  
Transportation was provided for 477  
appointments for support services

# Families



*We served 1030 families: 437 two-parent families and 593 single-parent families.*

*614 families had one or more parents employed and 706 families had a parent with a High School diploma, GED, or higher.*

*Families had the opportunity to complete Family Partnership Agreements. 978 families participated. 51% of families set goals in the area of Family Well-being. Other areas where goals were set include Parent Child Relationships, Families as Educators, Families as Learners, Family Engagement in Transitions, Family Connection to Peers and Community, and Family Advocates and Leaders.*



Parent Orientation - 100% of families attended orientation and toured their child's center.

## Parent, Family and Community Engagement

Center Parent Committees - 61% (629) of families participated in one or more Parent Committee meetings, with an average monthly attendance of 260.

Policy Council - 20 parents were elected by the parents in their centers to serve on Policy Council. Policy Council met monthly. Parents and 12 Community Representatives and Alternates worked together in relation to program governance (shared with Grantee Board of Directors), and to provide guidance and support for Head Start Administrative staff.

6,025 Home Visits/Parent Conferences were conducted with Head Start families, 1,107 Home Visits/Parent Conferences were conducted with center-based Early Head Start families, and 2,787 Home Visits were conducted with home-based Early Head Start families.

Volunteering - 1,409 parents and family members contributed 16,212 hours in classrooms, material preparation, training, parent meetings, on field trips, etc., to assist the program in meeting local match requirements for federal funds valued at \$244,241

18 community members with the Foster Grandparent Program worked with 72 children in the development of their social/emotional skills.

# School Readiness

*When children leave Head Start, they will be physically healthy· socially competent· academically ready·*

*The purpose of the Head Start program is to promote the school readiness of low income children·*

*Specifically, one of the primary goals of the Knoxville-Knox County Head Start/Early Head Start program is to “bring about a greater degree of social competence (school readiness) in the children we serve by working to enhance their cognitive and intellectual development, their social skills, and their physical and mental health”· In short, Head Start is all about getting kids ready for school· To this end, the program has developed school readiness goals· These goals are aligned with the following: Head Start Performance Standards; Head Start Child Development Early Learning Framework; Tennessee Early Learning Developmental Standards; Knox County Schools Targets for Kindergarten Entry·*

*Data for measuring progress in meeting School Readiness goals comes from the following screening and assessment instruments:*

- Learning Accomplishment Profile Diagnostic (LAP-D)*
- Learning Accomplishment Profile (LAP-R)*
- Devereux Early Childhood Assessment (DECA)*
- Alphabet Identification Assessment*
- Getting Ready to Read Screen*
- Pre-IPT-Oral English Language Proficiency Test*
- Speed Dial 3 Screen*
- Additional data are obtained from: Parent Reports, Teacher Observations, Child Health Records, Hearing and Vision Screenings, Growth Assessment, Blood Pressure Screening and Blood Lead Screening·*





# School Readiness Indicators Head Start

Physically Healthy

## Out of 917 Preschool Children

- 100% who were identified by a medical professional as needing medical services received them
- 99.9% were current on immunizations
- 99.7% had an ongoing source of continuous, accessible health care
- 94.1% received dental exams
- 58.4% were at a healthy weight

Socially Competent

## Out of 398 Transitioning Kindergarteners

- 95% could follow 2-step commands
- 99% expressed displeasure verbally instead of physically
- 96% followed classroom rules
- 94% showed empathy by sympathizing with peers
- 91% were generally compliant and did not display concerning behaviors
- 94% showed appropriate initiative
- 95% showed appropriate self-control
- 94% showed appropriate attachment in relationships
- 93% assisted peers in need

Academically Ready

## Out of 398 Transitioning Kindergarteners

- 92% could count objects to 10
- 45% could count to 20 without error
- 87% could name and sort by color
- 68% could identify printed numerals accurately
- 97% knew math concepts - tall, long, short, more
- 71% knew 10 or more letters of the alphabet
- 78% mastered many of the literacy skills necessary for learning to read and write



## Out of 192 Infants and Toddlers

- 97% were current on immunizations
- 87% had an ongoing source of continuous, accessible health care
- 95% have developed the ability to control large muscle movements to navigate, balance, manipulate larger objects, and & coordination skills
- 84% have developed the ability to complete simple self-help tasks, including personal care routines with minimal assistance

## Out of 140 Infants and toddlers\*

- 94% have developed positive relationships with adults
- 98% have developed positive relationships with peers
- 97% have developed self-regulation skills
- 94% can identify and recognize feelings
- 95% follow simple directions
- 67% participate more in conversations
- 63% use social rules of language
- 91% have positive approaches to learning
- 96% show curiosity and motivation

## Out of 140 Infants and toddlers\*

- 80% use expanded vocabulary
- 94% use and appreciate books
- 82% recognize that text is meaningful
- 96% have emergent writing skills
- 77% have verbal counting skills
- 68% have begun to recognize a few numerals
- 76% can identify a few basic shapes
- 84% can make simple comparisons
- 93% can classify objects in different groups by single attribute

# School Readiness Indicators Early Head Start



# Dual Language Learners



Children whose home language is something other than English are actually learning two or more languages which is why they are referred to as Dual Language Learners (DLLs). The program helps these children to learn the English language, which lays the foundation for a successful start as children transition to public school. Because the home language serves as a foundation for learning English, ongoing development of the home language is also essential.

Children who are DLL typically go through several stages of English language acquisition prior to becoming proficient. We assess our children at the beginning of the school year to determine which of the levels of English proficiency each child falls into. Our goal is to promote the home language and help our children to learn as much English as possible prior to entering school.

The Head Start program has worked to increase the percentage of DLL children performing at the later stages of English proficiency in order for them to be successful in academic English as well as conversational English.

26% (283) of Head Start families have a home language other than English.





*176 people:*

*141 Child Development  
and Health Staff*

*20 Family Services/  
Support Staff*

*15 Program Design/  
Management Staff*

*Leadership included a  
Certified PreK/K ESL  
Instructor, 10 Reliable  
CLASS Observers, a  
Registered Dietician,  
Licensed Clinical Social  
Worker, a First Aid/CPR  
Instructor and a  
Registered Nurse.*

*Of the 176 staff, 14%  
(24) were current or  
former Head Start  
parents.*

# Staff





# Teaching Qualifications

*High quality programs and services for children require highly qualified staff. Personnel recruitment and employment efforts, training and staff development services, and salary improvement initiatives in the local program reflect that principle. KKCHS employees meet staff qualification requirements as outlined in the HS Performance Standards and the 2007 HS Act.*

*75% of KKCHS preschool teachers hold a BS or higher in ECE or a related field. The remaining 25% hold an AAS degree in ECE. EHS teachers and home visitors are similarly well-qualified with 70% holding a BS in ECE or a related field.*



# Program Achievements

## Tennessee Report Card and Star Quality Program Assessment Results

The Star-Quality Child Care Program is a voluntary program that recognizes child care agencies who exceed minimum licensing standards. All of our centers continue to receive the highest rating of three stars. One area of evaluation is the Program Assessment, where one-third of the classrooms are assessed using one of the Environment Rating Scales. These are observational assessment tools used to evaluate the quality of early childhood programs, looking at the program's physical environment, health and safety procedures, materials, interpersonal relationships, and opportunities for learning and development. The areas are scored on a scale of 1 to 7, with 1 being inadequate and 7 being excellent.

Center	Score
Claxton-West	6.05
Anderson-South	6.12
Kiwanis-East II	6.19
North Ridge Crossing	6.29
L.T. Ross	6.42
<b>Program Average</b> ★★★	<b>6.21</b>



# *Knoxville-Knox County Head Start/Early Head Start*

*is in full compliance with the standards of the following regulatory agencies:*

- *State Childcare Licensing*
- *Child and Adult Food Program*
- *Department of Transportation*

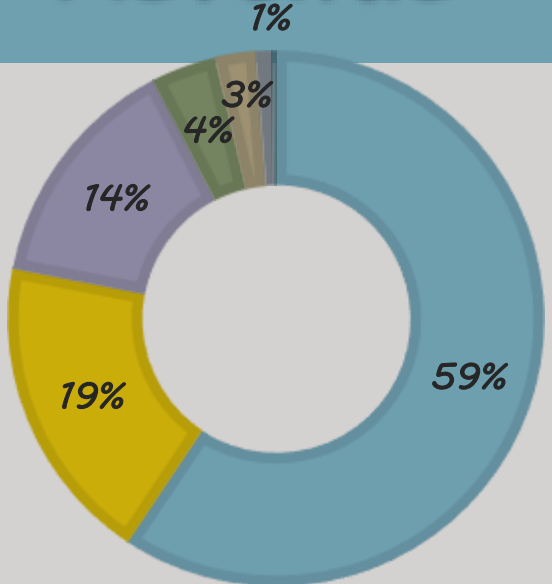


*The outcome of the most recent Federal Monitoring Review, completed in Fall 2017, indicated that Knoxville-Knox County Head Start is in full compliance with program regulations in the following areas: safe environments, mental health services, family and community services, transportation, child health and development, staff qualifications, nutrition services, facilities management, and human resource management. During the Federal Monitoring Review, observations were conducted in thirty of our preschool classrooms using the Pre-K Classroom Assessment Scoring System (CLASS). The CLASS tool looks at three domains and ten dimensions of teacher-child interactions as well as interactions between children. It measures those observations on a seven point scale. To meet the standards established by the federal government, we needed to score at least a 5 in Emotional Support, a 4 in Classroom Organization, and a 2 in Instructional Support. Below are our results:*

<i>DOMAIN</i>	<i>KKCHS Score</i>	<i>Govt. Standard</i>
<i>Emotional Support</i>	<i>6.0583</i>	<i>5</i>
<i>Classroom Organization</i>	<i>5.4889</i>	<i>4</i>
<i>Instructional Support</i>	<i>3.1167</i>	<i>2</i>

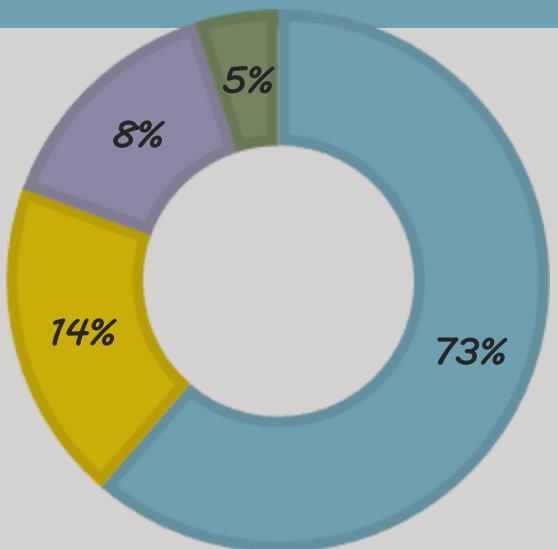
# Annual Budget and Expenditures

## Revenue



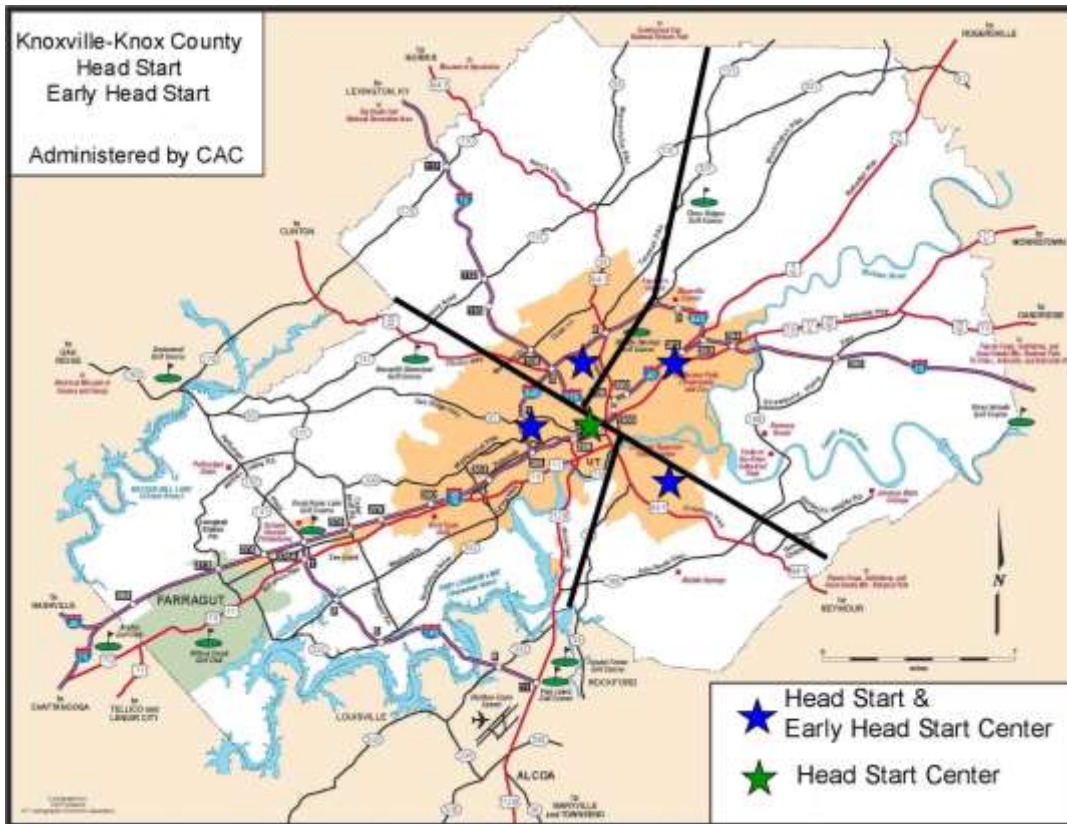
- Head Start - \$6,786,726
- Local Match - \$2,137,382
- Early Head Start - \$1,648,238
- USDA - \$444,491
- Child Care Certificate - \$281,226
- Training and Technical Assistance - \$112,564
- Parent Child Care Co-Pays - \$25,367

## Expenditures



- Personnel and Related Costs
- Facilities/Transportation and Operational Costs
- Program Materials, Supplies and Services
- Administrative Costs - Grantee





The county-wide HS/EHS Program is operated in and provides comprehensive services through five Head Start centers. Four of the Head Start centers are located between the outskirts of the inner city and the outer boundaries of the city - North, South, and East - to be accessible to both the largely urban population and the more rural county areas.

In addition, one center is located in the central city area, easily accessible to working and training sites in the city, to major interstate and bypass limited access routes, and on public transit routes. This central city center is accessible to close-in families in all four target quadrants, and within easy transport distance to accommodate other center applicants once those centers are filled.

All of the Head Start centers have in their target populations one or more public housing developments, three adjacent to and in walking distance of the centers, the others generally in close proximity and easy transport distance.

# Centers

**Claxton-West** · 2400 Piedmont Street  
Knoxville, TN 37921

971-5845 phone · 546-2705 fax  
claxtonheadstart@comcast.net

**Anderson-South** · 4808 Prospect Road  
Knoxville TN 37920

573-1846 phone · 577-5874 fax  
andersonheadstart@comcast.net

**Kiwanis-East** · 2330 Prosser Road  
Knoxville, TN 37914

637-2639 phone · 637-6358 fax  
east2headstart@comcast.net

**North Ridge Crossing** · 1008 Breda Drive  
Knoxville, TN 37918

689-1183 phone · 689-1538 fax  
northheadstart@comcast.net

**L.T. Ross-Central** · 2247 Western Ave  
Knoxville, TN 37921

637-6244 phone · 523-2996 fax  
ltrossheadstart@comcast.net

**Head Start Administrative Office**  
2400 Piedmont Street

Knoxville, TN 37921

522-2193 phone · kkchs@comcast.net

**Community Action Committee**

2247 Western Avenue · P.O. Box 51650

Knoxville, TN 37950 · 546-3500



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