

<b>Section 6: PROPOSAL FOR STATE-ONLY EARLY HEAD START OR INNOVATIVE INITIATIVE</b>		<b>Agency Name:</b>	<b>Duluth Public Schools/Duluth Head Start</b>
<p>INSTRUCTIONS: If proposing to use state Head Start funds in a manner different than adding enrollment to the program's existing federal program design, complete this section. Complete all sub-sections for existing, new or expanded services except as noted.</p> <p><b>A. Statement of Need:</b> Why is this initiative needed?  <b>B. Outcomes Evaluation:</b> What do you expect to accomplish?  <b>C. Proposed Services:</b> How will you do it? What services will be provided and how will you manage these?  <b>D. Requests for Exemptions:</b> What flexibility is needed to provide these services?  <b>E. Capacity/Preparation for New or Expanded Services:</b> What is required to be successful?  <b>F. Start-up Plan for New or Expanded Services:</b> What steps must be completed in advance of starting services?</p>			
EHS (if not a Federal EHS prog.)	<b>Innovative Initiative # 1</b>	Initiative Name: <b>Families in Transition</b>	
<b>A. Statement of Need</b>			
<p>What is the specific <b>community need</b> for this proposed use of state funds? (If an EXISTING VARIATION, how has the need changed?) What <b>data</b> substantiates this specific need? What is the source of the data? <i>DO NOT EXPLAIN PROPOSED SERVICES HERE.</i></p> <p><b>This existing variation was designed to meet a need in the community where families experiencing homelessness with preschool children was a growing need. Our current information bears that out. To date this year, Duluth Head Start has served 119 children who are experiencing homelessness and parents reported 22% of those enrolled this year were homeless at some point during the past year. Our PIR data shows a huge increase in requests for help with basic needs over last year and preceding years which reflects the most current data we have on poverty rates; in 2009, the overall poverty rate in Duluth is 25.1%, nearly twice the state of Minnesota rate of 11%. Clearly the need still exists and has grown.</b></p>			
<b>B. Outcomes Evaluation</b>			
<p><b>EXPECTED OUTCOMES:</b>  What do you expect to accomplish? What difference do you expect to make as a result of the provided services?</p> <ul style="list-style-type: none"> <li>- Identify two or three benefits or changes for participants.</li> <li>- For each, include the targeted number (#) and/or percentage (%) of participants expected to achieve the outcome.</li> </ul> <p>Outcomes should be knowledge, skills, behaviors or conditions, not services or activities.</p>		<p><b>OUTCOME INDICATORS:</b>  How will staff determine if the participant is making progress toward the outcome?</p> <ul style="list-style-type: none"> <li>- Identify at least one observable and measurable indicator for each outcome.</li> </ul> <p>In addition to the tool(s) being used, be specific about the criteria staff will use to determine if the participant met the indicator. How will staff know?</p>	
<p><b><u>Increase support and advocacy of parents with preschool children who are experiencing homelessness.</u></b></p>		<p><b>1. Head Start Families in Transition partners, Churches United in Ministry (CHUM) and Safe Haven Shelter for Women, will report a decrease in the number of families with young children who are experiencing homelessness who are not receiving services from Head Start.</b></p>	

<p>Continue with existing outcome:</p> <p><u>75% of the families participating in the FIT program will meet the goal selected by the parent. Possible goals include sobriety, personal safety, housing, childcare, employment, training or education toward a credential or job qualification, etc.</u></p>	<p>1. Parents will make observable, documented progress toward achieving their self-selected goal.</p>
<p>Continue with existing outcome:</p> <p><u>75% of families participating in FIT will utilize available community support services to meet family needs.</u></p>	<p>1. Staff will document that the FIT family has been actively and repeatedly engaged in at least one community support outside of Head Start which may include: Early Childhood Family Education, Community Action, First Year, Second Year, therapy/counseling and/or drug/alcohol addiction support.</p>
<p>If this is an EXISTING INITIATIVE, to what extent was each outcome indicator or measure (identified in the last approved application) met during the most recent operating period?</p> <ol style="list-style-type: none"> <li><u>75% of the families participating in the FIT program will meet the goal selected by the parent. Possible goals include sobriety, personal safety, housing, childcare, employment, training or education toward a credential or job qualification, etc.</u> We have piloted an Exit interview that allows us to track what services were in place for a family when they entered FIT and what were in place when they left FIT. This works for some of our data tracking unless a family exits the program without our prior knowledge. To date, exit interview tallies are as follows: 13 families with 18 children were interviewed, 5 left the service area, 4 transitioned to another early childhood program, 3 transitioned to a Head Start classroom, 2 found permanent housing, 6 are in transitional housing, 2 are continuing their education, 6 find their child's behavior improved after Head Start, 3 sought parental counseling, 2 children entered counseling, 5 were able to secure medical coverage. <u>We will continue this goal and work to refine our data collection form and strategies.</u></li> <li><u>Increased parent involvement in all aspects of Head Start.</u> We struggled to meet this goal as stated because as a program we have seen an increase in parent involvement overall but FIT families pose a different set of issues. Because they tend to be with us for varying amounts of time, we must gauge their level of involvement in a different way. That combined with the nature of the work we do with FIT families, we cannot accurately determine if we have met this goal.</li> <li><u>75% of families participating in FIT will utilize available community support services to meet family needs.</u> This outcome addresses a family's connection with services outside Head Start. As shown in outcome number one, we have made progress here. Our community partners are pleased to hear we are applying for funds to serve families with infants and toddlers year round, furthering our opportunities to support families most in need of Head Start services. As a program, we are working to implement a system of follow-up with families that will provide us with evidence of the effectiveness of our referrals to community resources. This will most likely involve our ChildPlus database. <u>We will continue to work to meet this outcome in the coming year.</u></li> </ol>	
<p><b>C. Proposed Services</b></p>	

What is the proposed approach for meeting this need and achieving the outcomes? Be concise but identify all distinct elements of the proposed services, particularly those which are different from the agency's federal program design and work plan. How will these differences address the community need and achieve expected outcomes identified below?

**Over the past couple of years working with families experiencing homelessness, we learned that our existing model of service delivery spanning 9 months of the year was falling short of the need. We now propose to continue providing Head Start services to this population during the summer months. The staff assigned to this position will work a flexible calendar allowing for continued contact with families referred through our partners at CHUM and Safe Haven Shelter for Women. Through this home-based model, we will offer home visits, group socializations and a child-centered approach to helping families work toward stabilization. Screenings and follow-up, connecting families to a medical home and working through a Family Partnership Agreement to help families achieve their goals are all components of this proposed year round variation.**

**D. Requests for Exemptions**

Are you <b>requesting an exemption from maintaining full enrollment</b> to serve a high-risk population as allowed by Minnesota Statutes, section 119A.52(c)?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If yes, what is the reason for the requested exemption?

Are you <b>requesting an exemption from any federal HS/EHS requirements</b> in order to implement an innovative initiative as allowed by Minnesota Statutes, section 119A.53?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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If yes, identify (a) each federal standard, (b) the reason for the requested exemption, and (c) what alternatives will be implemented to meet the intent of the requirement.

Standard	<b>We request a waiver for the strict 1.5 hour weekly home visit. In order to meet the immediate needs of women and their children in the battered women's shelter, or the needs of families in other homeless shelters, we find that it is preferable to meet more than once a week, especially in the beginning. Our FIT teacher may spend several hours with parent and child during the first two or three weeks that families are housed in a shelter. One visit is more child-focused and lasts a minimum of one hour; the other visit(s) are family need focused and last as long as they need to. Thus, we most often split up a traditional Head Start home visit into two or more. As families begin to stabilize, we may back off so that parents can complete the requirements for securing permanent housing, reclaiming ID cards, securing orders for protection, etc.</b>
45 CFR 1306.33	

Standard	

**E. Capacity and Preparation for New or Expanded Services**

What is the **capacity** of the program and community to successfully implement the variation? What existing resources, experience and partnerships are being used? What are the **qualifications and training** of the staff to implement the proposed services?

**Our Head Start staffs assigned to this innovation hold early childhood licensure, four year degrees in early childhood, one with a master's degree in education. The part-time FIT position will be filled following grant approval notification. We have candidates who have Head Start experience and FIT experience, serving as long-term subs for staff who retired mid-year and staff on medical leave. We know this work is not the traditional model and we honor that by choosing highly motivated, compassionate staff that is skilled at relationship building and listening for opportunities to help families reach stability.**

**These staffs are supported by service area coordinators with college degrees, licensure in their areas and many years of early childhood, parent education and Head start experience. We have evolved over the year into a program that is often looked at as a model of support for families experiencing homelessness.**

**F. Start-up Plan for New or Expanded Services**

<b>ACTIVITY</b>	<b>No action required as this is an existing variation.</b>	<b>TIME FRAME</b>	<b>RESPONSIBILITY</b>
Secure location			
Select staff			
Orientation and training			
Recruitment and selection (for enrollment)			
Intake and enrollment			