



# WYOMING HEAD START STATE COLLABORATION OFFICE NEEDS ASSESSMENT

2022 Survey Results



The goal of Head Start is to increase the social competence of children in low-income families

**Wyoming Department of Education**

---

122 W. 25th St., Ste. E200 | Cheyenne, WY 82002  
P: 307-777-7675 | F: 307-777-6234 | [edu.wyoming.gov](http://edu.wyoming.gov)

## Forward & Acknowledgments

---

This report, entitled Wyoming Head Start State Collaboration Office, 2022 Needs Assessment Survey Results, presents findings from a survey of staff and directors representing Head Start programs serving Wyoming children and families for the program year 2022. The survey was developed through a collaborative effort between Wyoming Head Start Association members, the Wyoming Head Start Collaboration Office, and the Region VIII Head Start State Collaboration Offices. The purpose of the survey was to gather information for a grant recipient-based assessment of Head Start programs with specific focus on cooperation, coordination, and collaboration within the following areas: 1) Community and state agencies, 2) National Head Start priority areas for Collaboration Offices, 3) Professional development, 4) Early Head Start – Child Care Partnerships and Child Care Systems, 5) Data collection, 6) Quality Rating and Improvement Systems, 8) State school system and, 9) Regional Head Start Collaboration Office priorities including: workforce, access to care, and full enrollment initiative. This report presents the results of the 2022 needs assessment survey.

The Wyoming Head Start State Collaboration Office Director, located in the Wyoming Department of Education, prepared this report per grant requirements from the U.S. Department of Health and Human Services, Administration for Children and Families. Head Start State Collaboration Offices are required by the Head Start Act (as amended in December 2007) to assess the needs of Head Start agencies in the areas of coordination and collaboration.

Wyoming's Head Start providers respond quickly and diligently to address challenges and needs in perpetual efforts to provide high-quality services to children and families most in need. This work is reflected in the following pages both in terms of accomplishments and the exposure of systemic gaps. The Collaboration Office is incredibly grateful for the work of Head Start staff throughout Wyoming and to the program directors that never shy from providing honest, reflective, and constructive feedback.

March 2023

Helena Wagner, MPA, M.Ed.

## Introduction

---

Head Start (HS) is a federal program that promotes the school readiness of children ages birth to 5 from low-income families by enhancing their cognitive, social, and emotional development.

Programs provide a learning environment that supports children's growth in:

- Language and literacy
- Cognition and general knowledge
- Physical development and health
- Social and emotional development
- Approaches to learning

Comprehensive services to enrolled children and their families include health, nutrition, social services determined necessary from family needs assessments, and education and cognitive development services. Offered services are designed to be responsive to each child and family's ethnic, cultural, and linguistic heritage. Head Start emphasizes the role of parents and caregivers as their child's first and most important teacher. Programs build relationships with families that support:

- Family well-being and positive parent-child relationships
- Families as learners and lifelong educators
- Family engagement in transitions
- Family connections to peers and community
- Families as advocates and leaders

## Head Start Services

---

Head Start serves preschool-aged (3-5 years) children and their families. Many grant-recipients also provide Early Head Start (EHS) services, which serves infants, toddlers, pregnant women and their families who have incomes below the federal poverty level. Over a million children are served nationally by HS programs every year, including children in every U.S. state and territory and in American Indian and Alaskan Native communities. Since 1965, nearly 30 million low-income children and their families have received these comprehensive services to increase their school readiness.

Head Start programs offer a variety of service models, depending on the needs of the local community. Programs may be based in:

- Centers or schools that children attend for part-day or full-day services
- Family child care homes
- Children's own homes, where a staff person visits once a week to provide services to the child and family. Children and families who receive home-based services gather periodically with other enrolled families for a group learning experience facilitated by Head Start staff.

## Early Head Start

---

Early Head Start is a federally funded community-based program for low-income families with infants and toddlers and pregnant women. Its mission is simple:

- To promote healthy prenatal outcomes for pregnant women,
- To enhance the development of very young children, and
- To promote healthy family functioning.

In 1994, the Secretary of Health and Human Services formed an Advisory Committee on Services for Families with Infants and Toddlers to design EHS. The program evolved from Head Start's long history of providing services to infants and toddlers through Parent Child Centers, Comprehensive Child Development Program (CCDPs) and Migrant Head Start programs. Grant-recipients incorporate evidence-based practices that align with advances in the field of infant development. As a need for infant and toddler care has increased in recent decades, many Wyoming HS and EHS grant recipients have or are considering expanding services in this area by seeking additional funding opportunities or by shifting funded slots from HS to EHS.

## Early Head Start – Child Care Partnerships

---

In 2015, as part of President Obama's Early Learning Initiative, the Administration for Children and Families set aside \$500 million for new Early Head Start - Child Care (EHS-CC) Partnerships. These grants allow new or existing EHS programs to partner with local child care centers and family child care providers serving infants and toddlers from low-income families. The partnerships support working families by providing a full-day, full-year program so that low-income children have the healthy and enriching early experiences they need to realize their full potential.

Early Head Start programs also provide comprehensive services that benefit children, families, and teachers, including:

- Health, developmental and behavioral screenings
- Higher health, safety and nutrition standards
- Increased professional development opportunities for teachers

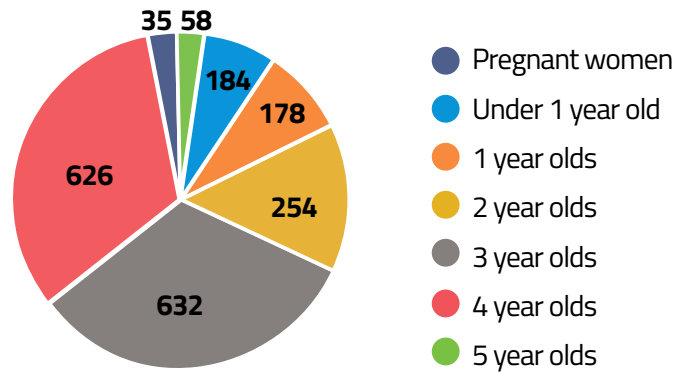
## Grant Oversight Information

---

The Office of Head Start (OHS), within the Administration of Children and Families (ACF) of the Department of Health and Human Services (HHS), awards grants to public and private agencies on a competitive basis to provide comprehensive services at the community level. Head Start grant recipients provide services as described in the Head Start Program Performance Standards (HSPPS) in accordance with the Head Start Act of 2007. OHS is responsible for oversight of grant recipients to ensure the HSPPS are met and quality care and learning experiences are provided to enrolled children. Additionally, some cities, states, and federal programs offer funding to expand HS and EHS within their service area (Source: <http://www.acf.hhs.gov/programs/ohs/about/head-start>).

# Head Start in Wyoming

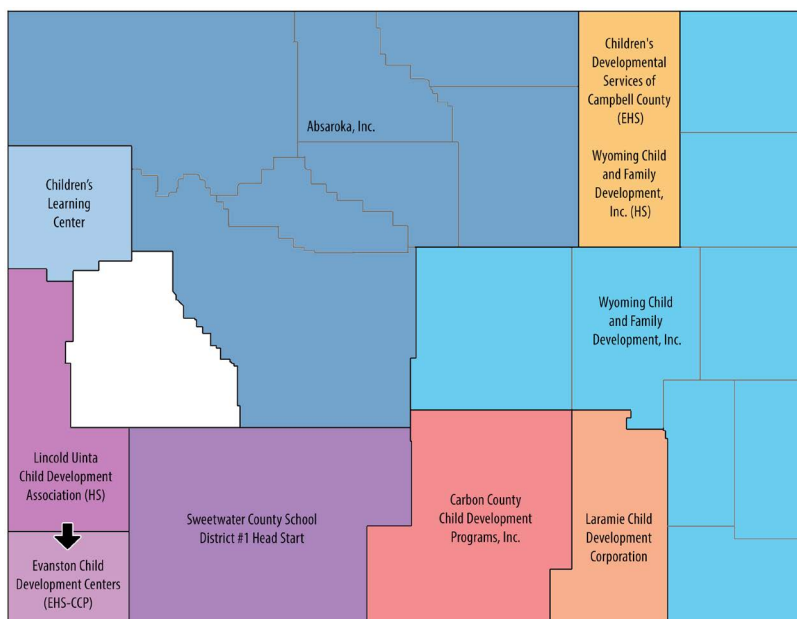
Figure 1: Cumulative HS and EHS Enrollment in Wyoming  
 Cumulative Enrollment: 1,967



Note: Data disclosed in Figure 1 includes information from the Head Start Program Information Report (PIR) from Program year 2022. Cumulative enrollment typically exceeds funded enrollment slots due to turnover of children for circumstantial changes (i.e., change in living situation) causing total number of children served to surpass the total number of funded slots available. The total number of statewide funded slots for the 2022 program year was 1,703.

Ten grant recipients operate sites in all but one county in Wyoming. Statewide, there are 20 sites offering EHS programs, 44 HS programs, three American Indian Alaska Native (AIAN) EHS sites and four (AIAN) HS sites. The Wyoming programs are listed in Figure 3 with the number of HS cumulative enrollment, and/or the number of EHS cumulative enrollment slots, and the number of total sites operating in the 2022 program year.

Figure 2: Wyoming Head Start Grant-Recipient Service Areas with AIAN E/HS



The Wind River Reservation is home to both the Shoshone and Arapahoe tribes with the AIAN E/HS Start grants held jointly by the two tribes. As a tribal grantee, the program is affiliated with Region XI of OHS; programs in Region XI have their own Head Start Collaboration Office designed to navigate the unique governing structure and relationships between sovereign tribal entities and state and federal governments. The National AIAN HSCO conducts an annual needs assessment and can be accessed through: <https://eclkc.ohs.acf.hhs.gov/programs/article/national-american-indian-alaska-native-head-start-collaboration-office>. Campbell County is jointly served by two grantees: Children’s Developmental Services of Campbell County and Wyoming Child and Family Development, Inc. Children’s Developmental Services of Campbell County provides EHS services while Wyoming Child and Family Development, Inc. provides HS services. Similarly, Uinta County is served by both Lincoln-Uinta Child Development Association (HS) and Evanston Child Development Centers (EHS-CCP).

Figure 3: Wyoming Grant-Recipient Program Types with Cumulative Enrollment Totals for 2022

Wyoming Head Start Grant Recipient	HS	EHS	Centers
Absaroka, Inc.	280	61	13
Carbon County Child Development Program	80	0	3
Children’s Developmental Services of Campbell County	0	56	1
Children’s Learning Center	45	40	3
Evanston Child Development Center	0	113*	2
Laramie Child Development Corporation	92	0	1
Lincoln Uinta Child Development Association	117	0	6
E. Shoshone and N. Arapaho Birth to Five Head Start Program	128	106	7
Sweetwater County School District #1 Head Start	111	0	2
Wyoming Child and Family Development, Inc.	467	213	20
<b>Total</b>	<b>1,320</b>	<b>589</b>	<b>58**</b>

\*Early Head Start-Child Care Partnership

\*\*Co-located HS & EHS sites

## Head Start Service Highlights for Wyoming Families

The following table represents a sample of the variety and scope of services provided by local programs to Wyoming children and families over the course of program year 2022 and reported in the annual Performance Indicator Report (PIR) to OHS. Partnership with state agencies and local service providers are essential to ensuring that family service needs, many of which are featured in the table below, are met.

Figure 4: Family Services Provided during Program Year 2022

Types of Family Service	Number of Families Receiving Services during PY 2022
Housing Assistance such as: Subsidies, Utilities, Repairs, etc.	204
Mental Health Services	329
Supporting Transitions between Programs (EHS to HS, HS to K)	895
Substance Misuse Prevention	78
Assistance in Enrolling into Education or Job Training	316
Medical & Oral Health Preventative Practice Education	1,445
Research-based Parenting Education	847
Fatherhood Engagement in Family Goal Setting	614

## Wyoming Head Start & Early Head Start Program Directory

Locations are listed in directory format, organized by the site name under which they operate. The directory reads alphabetically from left to right by HS or EHS site name, as listed on the Early Childhood Learning and Knowledge Center (ECLKC) Locator feature. Centers with both HS and EHS services with common addresses are combined. The number of funded slots for the most recent program year is included to illustrate the number of children served within each community served by grant recipients. Due to family relocation, and other contributing factors to unenrollment, programs typically serve more families than indicated by allotted slots. Total enrollment numbers from the 2022 program year are reported in Figure 1.

**Absaroka Head Start Basin Center**

609 Rue Ave  
Basin, WY 82410  
(307) 568-2032  
Slots: 17  
<http://abshs.org/centers/basin/>

**Absaroka Head Start Buffalo Center**

621W Fetterman St Buffalo, WY 82834  
(307) 684-2873  
Slots: 32  
<http://abshs.org/centers/buffalo/>

**Absaroka Head Start Cody Center**

1701 29th St.  
Cody, WY 82414  
(307) 527-6454  
Slots: 15  
<http://abshs.org/centers/cody/>

**Absaroka Head Start Lander Center**

626 Washington St.  
Lander, WY 82520  
(307) 332-5559  
Slots: 34  
<http://abshs.org/centers/lander/>

**Absaroka Head Start & Early Head Start Lovell Center**

384 E. Main St Lovell, WY 82431  
(307) 548-7071 [HS]; (307) 548-6165 [EHS]  
Slots: 15 [HS]; 11 [EHS]  
<http://abshs.org/centers/lovell/>

**Absaroka Head Start & Early Head Start Powell Center**

883 E 7th St Powell, WY 82435  
(307) 754-2013 [HS]; (307) 754-5154 [EHS]  
Slots: 47 (HS); 22 (EHS)  
<http://abshs.org/centers/powell/>

**Absaroka Head Start Riverton Center**

2420 Rose Lane  
Riverton, WY 82501  
(307) 856-5078  
Slots: 17  
<http://abshs.org/centers/riverton/>

**Absaroka Head Start Sheridan Center**

395 Phoenix Avenue  
Sheridan, WY 82801  
(307) 673-2637  
Slots: 32  
<http://abshs.org/centers/sheridan/>

**Absaroka Head Start Thermopolis Center**

326 Warren St  
Thermopolis, WY 82443  
(307) 864-5481  
Slots: 15  
<http://abshs.org/centers/thermopolis/>

**Absaroka Head Start & Early Head Start Worland Center**

1313 Big Horn Ave Worland, WY 82401  
(307) 347-3164 [HS]; (307) 347-4689 [EHS]  
Slots: 32 [HS]; 11 [EHS]  
<http://abshs.org/centers/worland/>

**Afton Child Development Center [HS]**

675 S Washington  
Afton, WY 83110  
(307) 885-9286  
Slots: 11  
<https://www.lucda.org/>

**Alpine Child Development Center [HS]**

247 Snake River Drive Alpine, WY 83128  
(307) 654-4116  
Slots: 6  
<https://www.lucda.org/>

**Bridger Valley Child Development Center [HS]**

1001 Highway 414 North Mountain View, WY 82939  
(307) 782-6601  
Slots: 22  
<https://www.lucda.org/>

**Carbon County Child Development Programs [HS]**

1705 Edinburgh St  
Rawlins, WY 82301  
(307) 324-4951  
Slots: 16  
<https://carboncountychilddevelopmentprograms.org/>



**Carbon County Child Development Programs [HS]**

1801 Edinburgh St  
Rawlins, WY 82301  
(307) 324-9571  
Slots: 48

<https://carboncountychilddevelopmentprograms.org/>

**Children's Developmental Services of Campbell County [EHS]**

1801 S 4J Rd  
Gillette, WY 82718  
(307) 682-2392  
Slots: 36

<https://www.ccgov.net/139/Childrens-Developmental-Services>

**Children's Learning Center Head Start**

145 Mercill Ave.  
Jackson, WY 83001  
(307) 732-0525  
Slots: 40

<https://childrenlearn.org/teton-county/headstart/>

**Children's Learning Center Home Based [EHS]**

145 Mercill Ave.  
Jackson, WY 83001  
(307) 733-5345  
Slots: 36

<https://childrenlearn.org/teton-county/headstart/>

**Children's Learning Foundation\***

1021 North Hwy 414 Mountain View, WY 82939  
(307) 782-7040  
Slots: 10

<http://www.evanstonchilddevelopmentcenter.org/infant-and-toddler.html>

**Ethete Head Start (AIAN)**

647 Blue Sky Hwy Ethete, WY 82520  
(307) 332-4815  
Slots: 51

**Ethete Early Head Start [AIAN]**

503 Ethete Rd  
Ethete, WY 82520  
(307) 332-7180  
Slots: 32

**Evanston Child Development Center\***

336 Summit St  
Evanston, WY 82930  
(307) 789-7040  
Slots: 62

<http://www.evanstonchilddevelopmentcenter.org/infant-and-toddler.html>

**Fort Washakie [AIAN HS]**

75 Sacajewa Circle  
Fort Washakie, WY 82514 (307) 332-7163  
Slots: 68

**Fort Washakie Early Head Start [AIAN]**

75 Sacajewa Circle  
Fort Washakie, WY 82514 (307) 332-7055  
Slots: 32

**Great Plains Early Head Start [AIAN]**

13 Great Plains Rd Arapahoe, WY 82510  
(307) 857-6035  
Slots: 32

**Great Plains- Home Base [AIAN HS]**

17 Great Plains Rd Arapahoe, WY 82510  
(307) 856--3807  
Slots: 12

**Green River Location [HS]**

250 Monroe Ave  
Green River, WY 82935 (307) 352-3430  
Slots: 10

[http://hstart.sweetwater1.org/home\\_page](http://hstart.sweetwater1.org/home_page)

**Kemmerer Child Development Center [HS]**

1208 Elk St  
Kemmerer, WY 83101  
(307) 877-6984  
Slots: 12

<https://www.lucda.org/>

**Head Start of Laramie**

365 W. Grand Ave. Laramie, WY 82070  
(307) 742-6792  
Slots: 75  
<https://www.headstartlaramie.com/>

**LUCDA-Evanston [HS]**

1013 W. Cheyenne Dr. Evanston, WY 82930  
(307) 789-7384  
Slots: 39  
<https://www.lucda.org/>

**Saratoga Head Start**

1114 W Saratoga Avenue Saratoga, WY 82331  
(307) 326-5056  
Slots: 16  
<https://carboncountychilddevelopmentprograms.org/>

**Sweetwater County School District #1 Head Start**

3400 Foothill Blvd  
Rock Springs, WY 82901 (307) 352-3430  
Slots: 90  
[http://hstart.sweetwater1.org/home\\_page](http://hstart.sweetwater1.org/home_page)

**Thayne Child Development Center [HS]**

250 North Vannoy Parkway Ste. D108 Thayne,  
WY 83127  
(307) 883-4116  
Slots: 12  
<https://www.lucda.org/>

**Wyoming Child and Family Development  
–Crook/Weston County [EHS]**

627 Pine St.  
Newcastle, WY 82701  
(307) 941-1035  
Slots: 5  
<http://wyomingchild.org/index.php?/main/services/C10>

**Wyoming Child and Family Development  
–Mills [HS]**

4981 W. Buick St. Mills, WY 82604  
(307) 265-0620  
Slots: 17  
<http://wyomingchild.org/index.php?/main/services/C12>

**Wyoming Child and Family Development  
– Casper [EHS]**

160 N. Washington St. Casper, WY 82601  
(307) 473-5831  
Slots: 42  
<http://wyomingchild.org/index.php?/main/services/C12>

**Wyoming Child and Family Development  
– Cheyenne [E/HS]**

521 W. Jefferson Rd. Cheyenne, WY 82007  
(307) 634-9378  
Slots: 96[HS]; 32 [EHS]  
<https://wyomingchild.org/index.php?/main/services/C26>

**Wyoming Child and Family Development  
– Douglas (Head Start & Early Head Start)**

630 Erwin St  
Douglas, WY 82633  
(307) 358-3901  
Slots: 35 [HS]; 10 [EHS]  
<http://wyomingchild.org/index.php?/main/services/C9>

**Wyoming Child and Family Development  
– Gillette [HS]**

601 Running W Dr Gillette, WY 82718  
(307) 682-4214  
Slots: 51  
<http://wyomingchild.org/index.php?/main/services/C8>

**Wyoming Child and Family Development  
– Glenrock [E/HS]**

929 W Birch  
Glenrock, WY 82637  
(307) 436-5357  
Slots: 17 [HS]; 8 [EHS]  
<http://wyomingchild.org/index.php?/main/services/C9>

**Wyoming Child and Family Development  
– Guernsey [E/HS]**

371 South Kansas  
Guernsey, WY 82214  
(307) 836-2838  
Slots: 16 [HS]; 7 [EHS]  
<http://wyomingchild.org/index.php?/main/services/C14>

**Wyoming Child and Family Development**

**– Casper B [HS]**

301 W B St

Casper, WY 82601

(307) 577-1864

Slots: 102

<http://wyomingchild.org/index.php?/main/services/C12>

**Wyoming Child and Family Development**

**– Lincoln Infant Toddler Center [EHS]**

436 E 22nd Ave Unit C Torrington, WY 82240

(307) 534-4720

Slots: 24

<http://wyomingchild.org/index.php?/main/services/C11>

**Wyoming Child and Family Development**

**– Lusk [E/HS]**

801 S Maple St Lusk, WY 82225

(307) 334-2252

Slots: 13 [HS]; & 9 [EHS]

<http://wyomingchild.org/index.php?/main/services/C13>

**Wyoming Child and Family Development – [HS]**

3110 W C St

Torrington, WY 82240

(307) 532-7068

Slots: 65

<http://wyomingchild.org/index.php?/main/services/C11>

**Wyoming Child and Family Development**

**-Wheatland [E/HS]**

28 Rompoon Rd

Wheatland, WY 82201

(307) 322-3385

Slots: 30 [HS]; 22 [EHS]

<http://wyomingchild.org/index.php?/main/services/C14>

## Head Start Collaboration Office Priority Areas

### Region 8 Head Start Collaboration Office Road Map

Office of Head Start Priorities					
CC Systems Emphasizing EHS-CC Partnerships	Data Collection	Elevating Workforce	QRIS	State School Systems Including *KEA	Region 8 Priorities
Children with Disabilities	Children with Disabilities	Children with Disabilities	Children with Disabilities	Systems Collaboration	Enrollment
Children Experiencing Homelessness	Children Experiencing Homelessness	Early Care and Education	Early Care and Education	Children with Disabilities	Health
Early Care and Education	Early Care and Education	Health	Health	Children Experiencing Homelessness	Work Force
Enrollment	Enrollment	Work Force	Work Force	Early Care and Education	
Family Literacy	Family Literacy			Enrollment	
Family Services	Family Services			Family Literacy	
Health	Health			Family Services	
Work Force	Work Force			Health	

The Head Start Act of 2007 identifies multiple collaboration requirements between state Head Start Collaboration Offices and various state and local agencies to ensure children and families receive appropriate and adequate services. Table 3 illustrates the intersecting nature of many requirements and how the Office of Head Start strategically categorizes and prioritizes each broad requirement to align with state systems. Annual updates to Head Start State Collaboration Office strategic plans are intended to identify how well each state is meeting federal requirements and further identifies opportunities for reducing barriers over a five-year period.

## 2022 Wyoming Head Start Collaboration Office Annual Needs Assessment

---

Head Start State Collaboration Offices (HSCO) are required by the Head Start Act of 2007 to assess the needs of Head Start agencies in the areas of coordination and collaboration. The purpose of the survey was to gather information through a HS grant-recipient level assessment with specific focus on cooperation, coordination, and collaboration within the following areas: 1) Community and state agencies, 2) OHS priority areas for Collaboration Offices, 3) Professional development, 4) Early Head Start – Child Care Partnerships and Child Care Systems, 5) Data collection, 6) Quality Rating and Improvement Systems, 8) State school system and, 9) Regional HSCO priorities. Additionally, several state partners were interviewed to assess perspectives on partnerships and to identify future partnership opportunities that align with OHS national and regional priorities.

### Study Design, Survey Instruments, and Methodology

---

Survey questionnaires for individual grant-recipients were designed to address the following OHS priority areas: early childhood systems, state level data collection, professional development, quality rating and improvement systems, school systems to ensure continuity, and regional priorities. The survey instrument was developed through a collaborative effort between Wyoming Head Start Association (WHSA) members and the Wyoming HSCO.

A 38-question survey was distributed statewide to collect data on the extent of involvement that each HS program has with various service providers and organizations. Quantitative ratings were supplemented with short written responses to provide context and additional commentary regarding partnerships and future collaboration opportunities. The questionnaire for grant recipients is included in Appendix B.

The assessment tool and stakeholders were written to reflect state systems work and collaborative data collection efforts in alignment with existing and upcoming projects at the statewide level. Though consistency between years is always a desired goal in survey instrument design, this process undergoes continued changes to best serve the interests in this particular data from of a range of stakeholders.

The surveys were administered via e-mail on February 3, 2023. Invitations were sent via email with a request to respond by February 17, 2023. Non-respondents were sent a follow-up e-mail on February 21, 2023. State partners were given a similar timeframe for initial participation request and a subsequent follow-up request.

The invitation to participate in the survey was sent to all Head Start grantees statewide. Eight of nine total Wyoming HS and EHS grant recipients, including the state's only EHS-CCP grantee, voluntarily participated in this assessment. Wyoming's only AIAN Head Start program is not represented in this year's Wyoming HSCO needs assessment, but may have participated in the AIAN HSCO annual assessment.

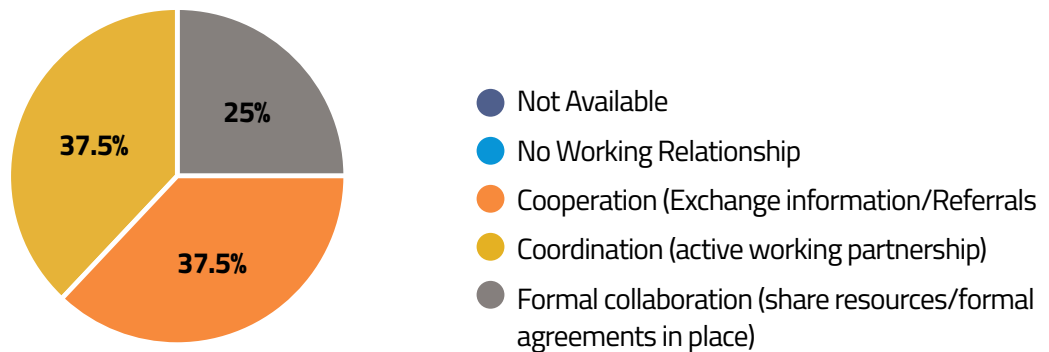
Programs were asked to rate partnerships with various aspects of state and local agencies that are typically the main service provider for a given area. A rating of "No working relationship" signifies that the question

is not applicable while a “Formal Collaboration” represents high collaboration between a grant recipient and state or local partner. Comments related to topics of interest are listed in the Appendices. Some questions may not have fully matched with program models especially for grant recipients with multiple funding sources and services; if clarification was needed, follow-up questions were sent to the individual program. All detailed, written responses are anonymous and recorded in Appendix C.

## Results

---

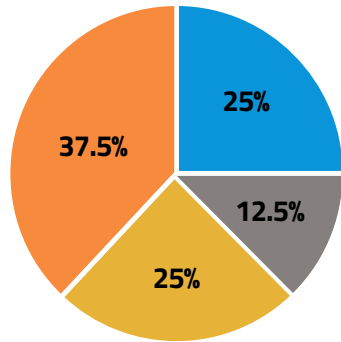
Licensing and resource and referral network:  
8 Responses



Local child welfare agencies:  
8 Responses

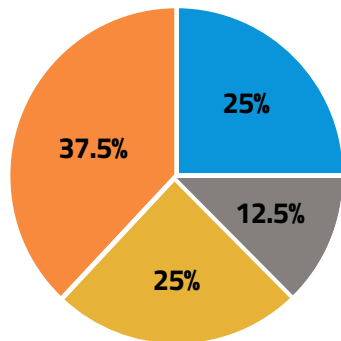


Child care subsidy program:  
8 Responses



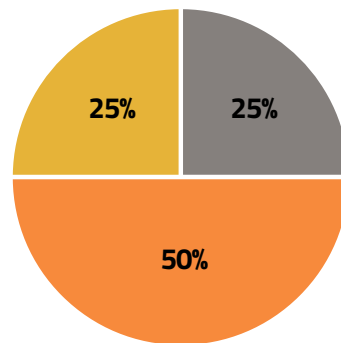
- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Local child care programs for full-year, full work-day services:  
8 Responses



- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Local referrals and support for families to access and retain safety net services (Medicaid, SNAP, WIC, TANF, LIEP, housing assistance, et.):  
8 Responses

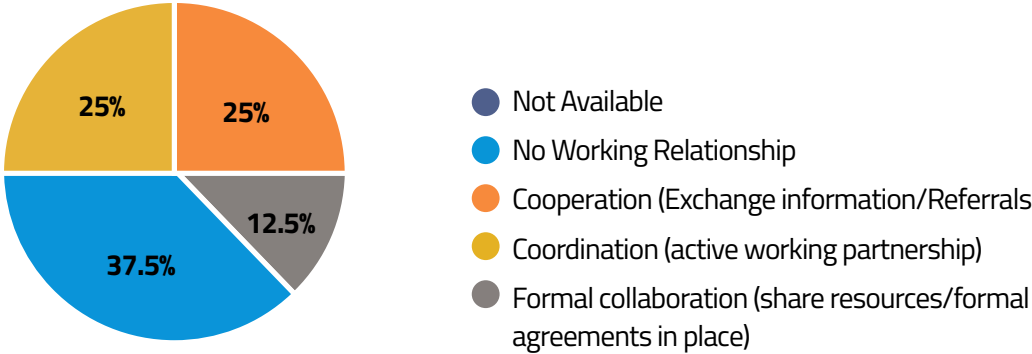


- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Work with state efforts to collect data related to early childhood outcomes (including learning, wellness, child welfare, etc):  
8 Responses



State Department of Education:  
8 Responses

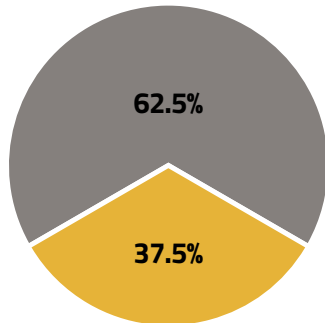


Funding opportunities for projects on school readiness, services for families and children experiencing homelessness, English Learning, and/or Early Literacy:  
8 Responses



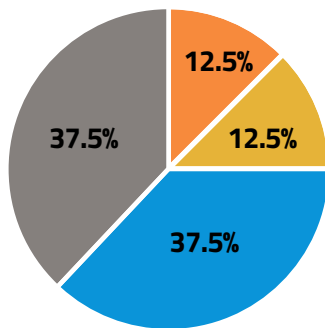


Local education agencies (LEAs):  
8 Responses



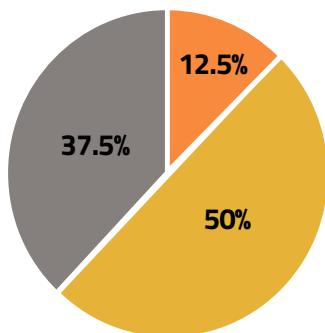
- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Joint staff training with LEAs:  
8 Responses



- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Is your program involved with local collaboration efforts for school readiness?  
8 Responses



- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Implementing Policies and Procedures to Ensure that Children Experiencing Homelessness are Identified and Prioritized for Enrollment:  
8 Responses



Local child development centers, Including part C and B services:  
8 Responses



Head start staff involvement in IEP or IFSP meetings:  
8 Responses



Exchanging information on role and resources with other providers/organizations regarding services for children with disabilities and support for families:  
8 Responses



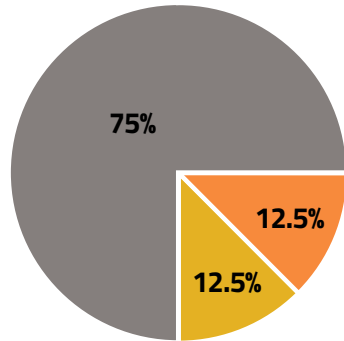
Early childhood professional learning collaborative:  
8 Responses



Medical services for children and families:  
8 Responses

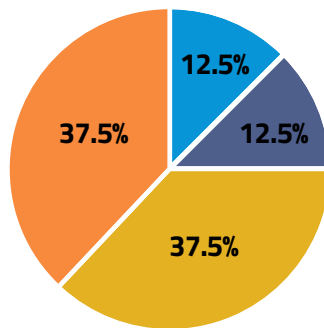


Mental health providers:  
8 Responses



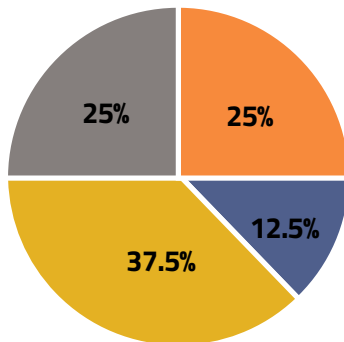
- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Services for substance misuse ( including alcohol and tobacco):  
8 Responses



- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

Pediatric dental services:  
8 Responses



- Not Available
- No Working Relationship
- Cooperation (Exchange information/Referrals)
- Coordination (active working partnership)
- Formal collaboration (share resources/formal agreements in place)

General dental services that serve patients using Medicaid, including pregnant women:  
8 Responses



## 2022 Statewide Performance Indicator Report Highlights

### Staffing Statistics

- 29% of staff are current or former Head Start parents
- 63% of classroom teachers possess a Bachelor’s degree or higher
- 81% of assistant teacher’s possess a CDA or higher Weight & Nutrition
- 64% of children were at a healthy weight according to BMI standards for age and sex
- 28% of children were identified as being overweight or obese

### Pediatric Medical Statistics

- EPSDT screening increased from 361 at the beginning of the program year to 1,162 by end of year
- At the beginning of the program year 18% of children were up-to-date on EPSDT schedules; 61% were up-to-date by the end of the program year
- 62% of children were up to-date-on immunizations at the end of the program year Homelessness & Foster Care
- 11% of HS families were identified as experiencing homelessness during the program year; 199 HS children experienced homelessness during the program year
- 9% of children served were in foster care at any point during the program year; 57% of those children were referred by the local family services agency

### Pediatric Dental Statistics

- 88% of children had access to continuous, accessible dental care by the end of the program year
- 73% of HS children received preventative care during the program year
- 59% of EHS children were up-to-date on the Wyoming EPSDT schedule for oral health IDEA Referrals & Partnerships
- 174 children were referred for evaluation to IDEA service providers
- 125 children were diagnosed with a disability during the evaluation process
- 29% of HS children qualified for IDEA services
- 92 EHS children had an Individualized Family Service Plan (IFSP) and were eligible to receive IDEA
- Part C services

### Early Head Start General Statistics

- 40% of slots are available for home-based programs
- All pregnant women enrolled in EHS received access to prenatal health care, education on fetal development, and education on the risks of substance use while pregnant

## Executive Summary

Partnerships between Head Start grant recipients and state and/or community agencies are presented in this report through a statewide lens. It is important to note that the nature of collaborations varies widely by individual communities and the historical context of partnerships. The following tables identify trends that present both strong statewide partnerships and areas for improvement. Additionally, areas that could be targeted for improvement over the next grant year and beyond for the HSCO are marked. The threshold for determining a possible focus area is 40% “No Collaboration” or “Limited Collaboration” ratings, as there is a likelihood of inconsistencies across the state due to service availability or interpretation of requirements.

The tables are supplemented with data from the state level 2022 Performance Indicator Report (PIR) and anecdotal data collected throughout the program year.

Figure 5: Responses Indicating Area of Identified Need

Service Area	Provider Organization	Percent (%) No Collaboration/ Limited Collaboration	Percent (%) Some/High Collaboration	Focus Area for Strategic Plan (X)
<b>Community and State Agencies for Education &amp; Early Intervention</b>	School Readiness	13%	87%	X
	SEA	63%	37%	X
	LEA	37%	63%	
	McKinney-Vento	37%	63%	
	Joint Trainings with LEA	50%	50%	X
	Child Development Centers*	12%	88%	X
	IEP/IFSP Planning	12%	88%	X
	Shared Funding Opportunities for Special Populations	25%	75%	

\*Note: Some Wyoming E/HS programs are co-located with blended or braided funding models

Service Area	Provider Organization	Percent (%) No Collaboration/ Limited Collaboration	Percent (%) Some/High Collaboration	Focus Area for Strategic Plan (X)
<b>Community Agencies for Health</b>	Local Pediatric Medical Services	12%	88%	
	Local Pediatric Dental Services	37%	63%	
	Local Dental Services for Pregnant Women*	12%	88%	
	Local Mental Health Services	12%	88%	X
	Local Substance Misuse Resources	63%	37%	X
<b>Professional Development &amp; Data Sharing</b>	Early Learning Collaborative & Facilitators	50%	50%	X
	Local Level data collaboration on child outcomes	63%	37%	
	Sharing of HS roles, resources, and regulations pertaining to local/state ECE system	25%	75%	
<b>Community and State Agencies for Child Care &amp; Family Supports</b>	Child Care Subsidy **	63%	37%	X
	Resource & Referral	37%	63%	X
	Local Child Care	63%	37%	
	Child Welfare Services	50%	50%	X
	Social Services (SNAP TANF, housing assistance, etc.)	50%	50%	X

\* Note EHS providers may be the only grant recipients that track and monitor this information

\*\*Note: Several programs reported limited interaction with the state subsidy program.

## Recommendations

---

Recommendations are based on the results of the 2022 needs assessment, HSCO interactions and reflection from the 2022 grant year, interviews with stakeholders, and the 2021 PIR Summary Data. Many of these recommendations are related Wyoming's continued work on improving early childhood education and care systems. Several identified recommendations are placed by best fit despite relevance in other systems, though are viewed within the broader systems context by the Collaboration Office.

### State School Systems

- Work with state school system to ensure continuity for children
  - Family Engagement
  - Coordinate enrollment efforts to ensure that children receive access to a Pre-K program that best fits the need of the child and family
- Approach transitions collaboratively through statewide efforts and support information sharing with involvement of all key stakeholders
  - Develop a unified definition of school readiness
  - Bolster services for children and families experiencing homelessness, including raising public awareness

### State Health Systems

- Maternal, Infant, and Early Childhood Home Visiting (MIECHV) services coordination
- Access to medical and dental services for infants/toddlers and pregnant women in communities with limited access
  - Connections to behavioral support for families and staff
  - Support expanded access to mental health services, including through partnerships within ECE network
- Early Intervention Services & E/HS coordination with emphasis on inclusion practices
- Consistent messaging to primary care and community providers on lead screening State Child Care Systems
- Support Child Care Partnerships (CCPs)
  - Increase collaboration with the Department of Family Services on subsidy, licensing, and federal grant funding opportunities
  - Identify interest in additional state funding for EHS and EHS-CCP
- Promote access by E/HS program to state and ARPA funds, when available State Family Support Systems
- Support for unique kinship caregiver needs
- Develop common referral system for WIC, SNAP, and related income-based services in partnership with DFS

### Workforce Elevation

- Support the expansion and access to high-quality workforce and career development opportunities for staff
- Adequate professional development to maintain and support high-quality
- Staff recruitment and retention supports
- Connect E/HS programs to state funding opportunities to support elevation of ECE workforce



- Provide support for new staff to maintain program quality and integrity
- Connect to training opportunities for staff stress management and staff mental health needs

#### Quality & Data Collection

- Work with state efforts to collect data regarding early childhood education programs and child outcomes
- Identify collaboration opportunities with the Wyoming Early Childhood Professional Learning Collaborative
- Coordinate with Pre-school Development Grant (PDG B-5) efforts to contribute to statewide EC needs assessment, strategic plan for the state’s early childhood system, and implementation of key initiatives and policies
- Offer pathways to easily create data agreements with state partners Community Partners
- Maintain lead screening awareness for community medical providers
- Promote public awareness of eligibility for E/HS services as identified through other community-level services

## Conclusion

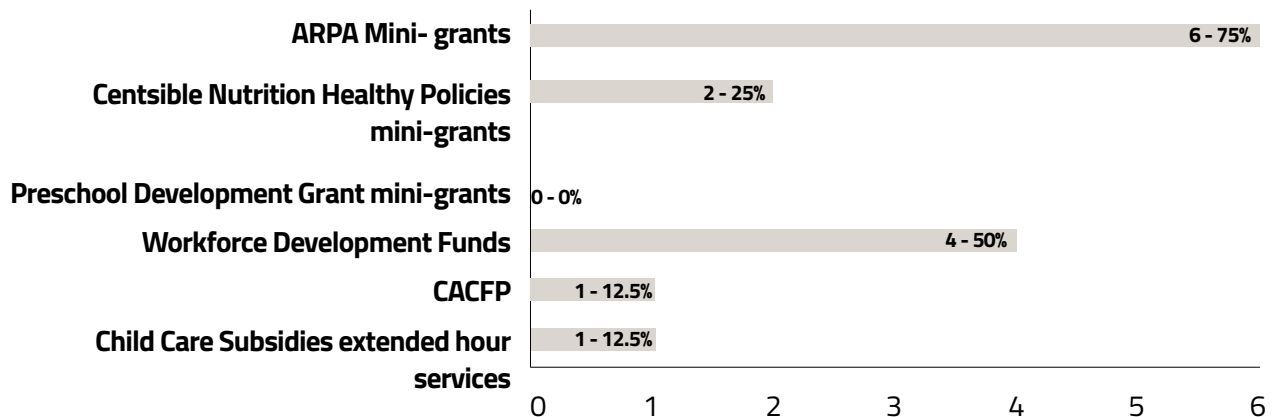
Head Start and Early Head Start programs across the state strive to promote the well-being of the children, families, and communities they serve. The program directors and personnel are engaged in a variety of working relationships with providers and organizations. They utilize a variety of successful strategies and experience challenges accomplishing their goals and provide a model for effective delivery of comprehensive services.

## Appendix A: Additional Survey Insights & Feedback to Inform HSCO Priorities

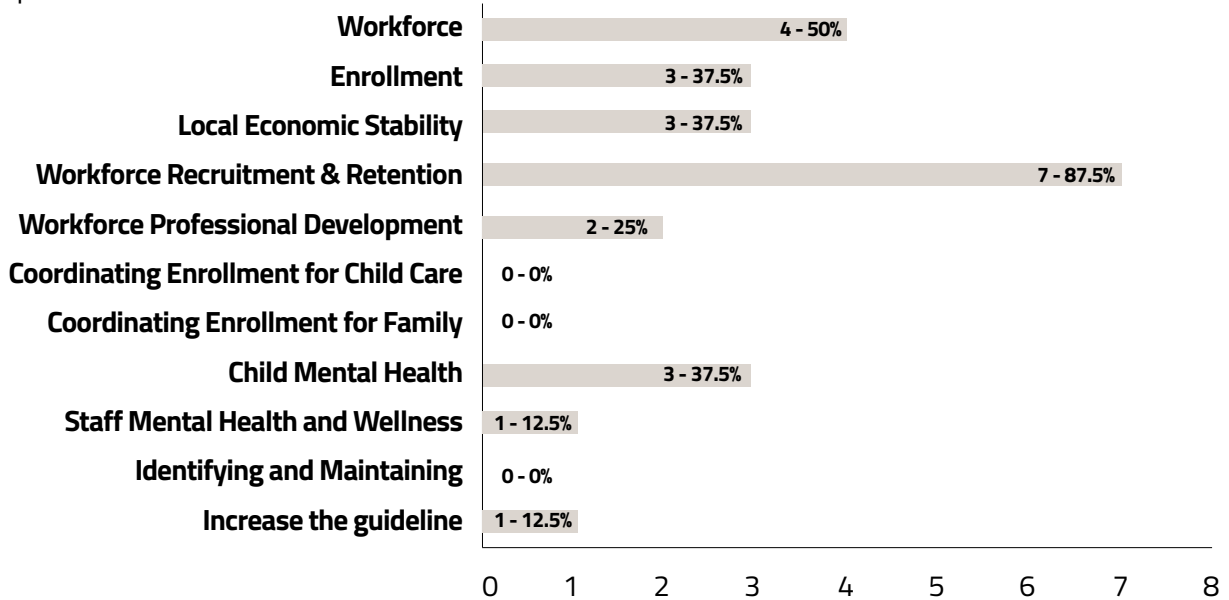
The following survey results were uniquely identified topics intended to drive HSCO/WHSA collaboration for the upcoming year. The first chart compares OHS Region 8 priorities to those identified by individual grant recipients in Wyoming. Additional charts show the level of interest in potential projects for the HSCO to engage in to strengthen processes and communication in the upcoming grant year.

Select all state funding sources used in the 2022 program year, if any:

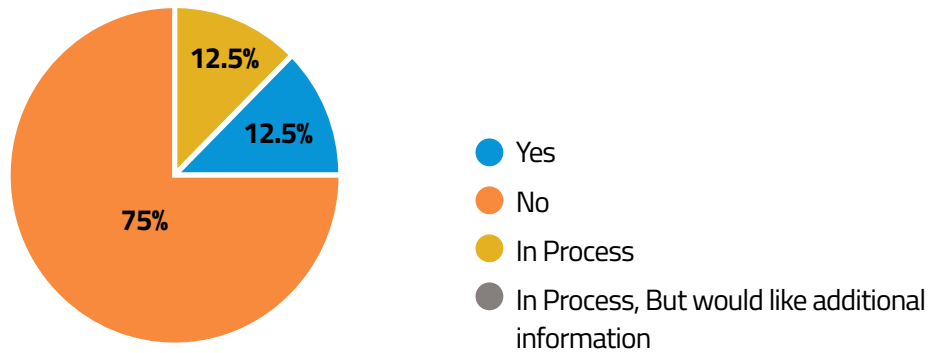
8 Responses



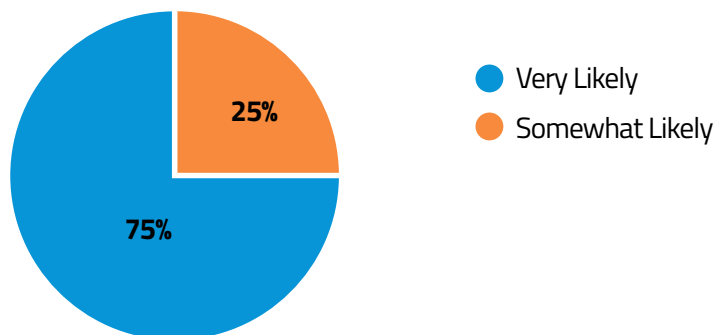
Select all state funding sources used in the 2022 program year, if any:  
8 Responses



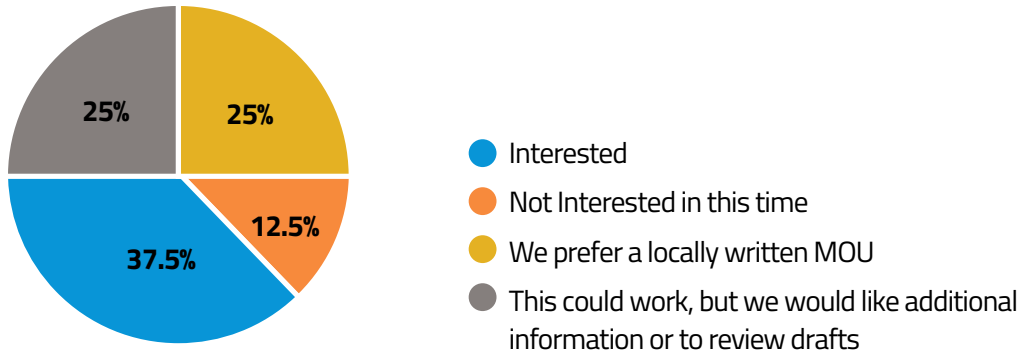
Are you currently connected to the WISER ID System:  
8 Responses



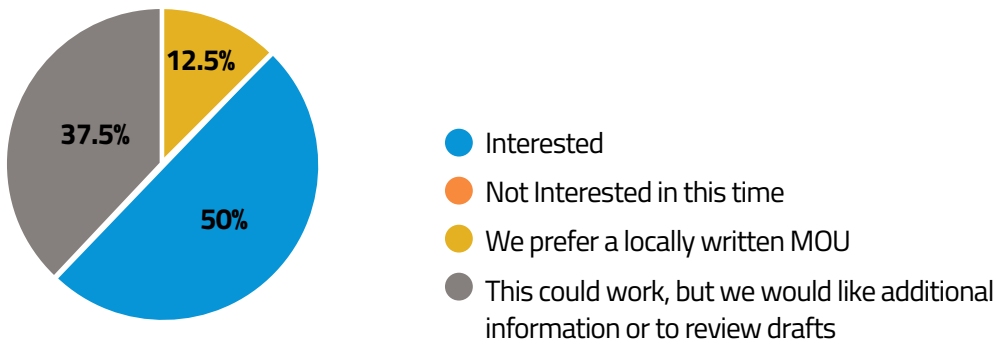
How likely would your program use materials, created jointly by the WHSA and HSCO, to support public awareness regarding E/HS services, priority or needs to share with community/state partners?  
8 Responses



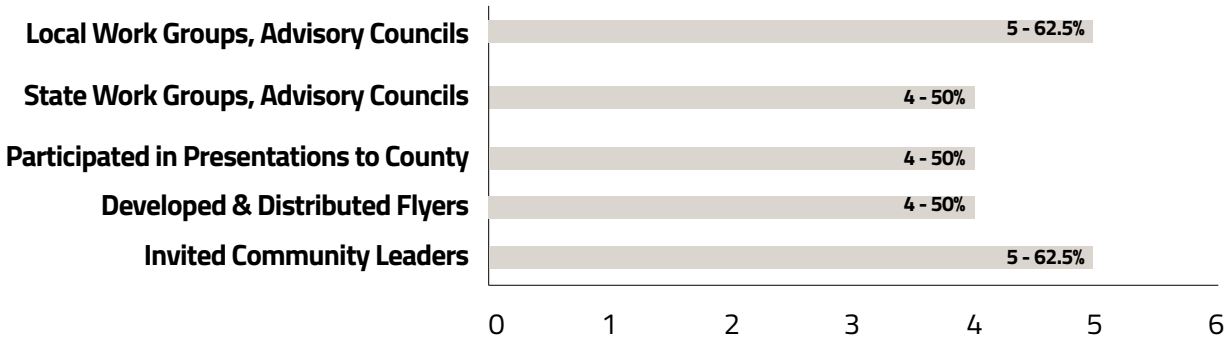
Please indicate level of interest in the development of an MOU Template for Data sharing with local partners, including the WISER ID:  
8 Responses



Please indicate level of interest in the development of an MOU Template for Data sharing with local partners, including the WISER ID:  
8 Responses



Please note how your program interacts with local political leaders:  
8 Responses



## Appendix B: Wyoming HSCO Needs Assessment Survey Instrument

---

### [HSCO Needs Assessment Survey Instrument](#)

## Appendix C: Qualitative Responses to 2022 HSCO Needs Assessment

---

**Please briefly describe how effective you perceive school readiness collaboration efforts at the local level to be. Please include any recommendations on processes or strategies that could improve the process:**

- There has been work with the school district, UW, and the public-school preschools. Due to Covid, those processes and collaborations have suffered. We also have new people in key positions, so we are working on getting back up to speed. I cannot think of any strategies at this time to improve processes. Just time!
- Our school transition is done in partnership with each of our local school districts and is successful for the most part. Some districts are more involved than others, but we have meetings and communication with all of them.
- School collaboration has improved over the last year with formal quarterly meetings and additional collaboration opportunities throughout the year. These communication channels have been a huge help to improve the processes and relationships.
- We work closely with the school districts in each of our communities, there is great collaboration on incorporating curriculum and making sure transitions run smoothly for children and families and to ensure that everything is done to increase school readiness.
- Our program belongs to a coalition that involves all area preschools and kindergarten teachers from the district.
- This varies by location and district. Places with the strongest collaboration have strong systems in place for ongoing communication.

**Please describe any barriers or delays in coordinating IDEA evaluations for children within 45 days from first day in classroom or home visit, if applicable:**

- Sometimes children are not available to be screened when we have our regularly scheduled screenings from our CDC. Things have been going well, but there is an increasing number of children needed services for IEPs and mental health.
- The biggest barrier for our program is the delay in when the DD centers start services in the Fall compared to when we start. We start in mid-August with children most years, but the DD centers did not start until after Labor Day.
- We are all part of the same organization so there have not been barriers.
- We are the LEA for Part C and B--one barrier would be other preschools not always referring a timely manner.
- We developed an MOU that allows our program to screen our enrolled children and report results to our IDEA partner.

- Screening occurs within the first 45 days of enrollment. Formal evaluations often occur later, yet within the requirements outlined in IDEA.

**Please describe any successes or barriers related to services for children with disabilities and their families.**

- Attendance for some of the families with children with special needs has been a challenge since Covid. Things are improving, but children on IEPs are often the ones who miss school and do not receive services due to absenteeism.
- This is the first year our school district has provided onsite and in house IEP service providers. In previous years we had worked with our local CDC to identify kids and for services. We are seeing a tremendous benefit to our students now with district provided service than we did with our local CDC.
- Again, we are all part of our local CDC so we are lucky to be able to break down barriers.
- We are concerned of the limited capacity (time spent) that our CDC has for delivery of services.
- At the service delivery level there are numerous successes.

**Please describe your efforts with recruiting staff with appropriate credentials:**

- When we advertise, we have specific credentials listed. We also reach out to the UW Education Department to seek qualified applicants. They advertise internally for us. We also make sure that we are hiring people with appropriate credentials and/or training opportunities within the specified time frame for getting those credentials. Another thing, we are working on supporting all staff with strong professional development plans. We have a board member that looks through transcripts to determine staff qualifications.
- We use social media platforms, local and state employment agency boards, post on our website as well as post flyers around our building and town.
- We have secured funding to provide sign-on bonuses and have tried advertising through a variety of different sources.
- This is a constant challenge! We have not been able to recruit fully-qualified staff even after many attempts. The school district starts their teachers at \$69K and we cannot compete. We have been training within and requesting waivers.
- Advertising on Wyoming at Work, social media, colleges.
- We have a well-developed recruiting and professional development process for staffing; however, the turnover is higher than previous years.
- Through Workforce Services, our website, Facebook, Indeed, job fairs, college placement services, word of mouth, flyers, and on occasion-- newspaper advertising. We also work to identify current staff interest in future possibilities and "grow our own."

**Please describe your efforts with recruiting specialized staff (Health, Education, Family Engagement Managers, etc.):**

- We make sure that all applicants interviewed have the appropriate degree in their content area. We also reach out to the regional office to help us verify qualifications. We are also working toward developing a succession plan to give in-house staff the opportunity to take classes, attend conferences, etc. to gain training experience in areas of desired positions (i.e., teacher to coaching position).
- We use social media platforms, local and state employment agency boards, post on our website as well as post flyers around our building and town.

- We have had very little (to none) turnover in this area so no efforts have been necessary.
- We are lucky to be small enough to absorb this work internally.
- We often recruit from within as we have great professional development opportunities within our agency. Otherwise, we use the same recruitment methods as we do with other staff
- No vacancies in the past few years.

**What is working well in your efforts to address workforce needs of your program?**

- We have a high percentage of staff that are past and/or HS parents and students. We build great relationships and encourage parents and past students to apply.
- We feel we haven't found a solution to our staff shortage. It used to feel like a revolving door, now it feels like the door is wide open but no one is even peeking in.
- We have improved our retention rates by providing bonuses and utilizing an employee wellness program.
- Working on wellness initiatives and workplace culture.
- We have created a culture within our agency of flexibility and understanding of family dynamics, which adds a level of security to staff that means more to them than the extra pay. That said, we do have turnover yearly because the school districts pay more.
- Utilizing Workforce Service programs for internships and professional development.
- We have seen a recent increase in the number of applications and qualifications. Highlighting the opportunity for meaningful work and benefits offered. Using an alternate staffing model allowed us to increase wages.