

Response to Questions on the FY 2010 County's Line of Business & Schools Program Review Processes Fall 2008

Request By: Supervisor Hudgins

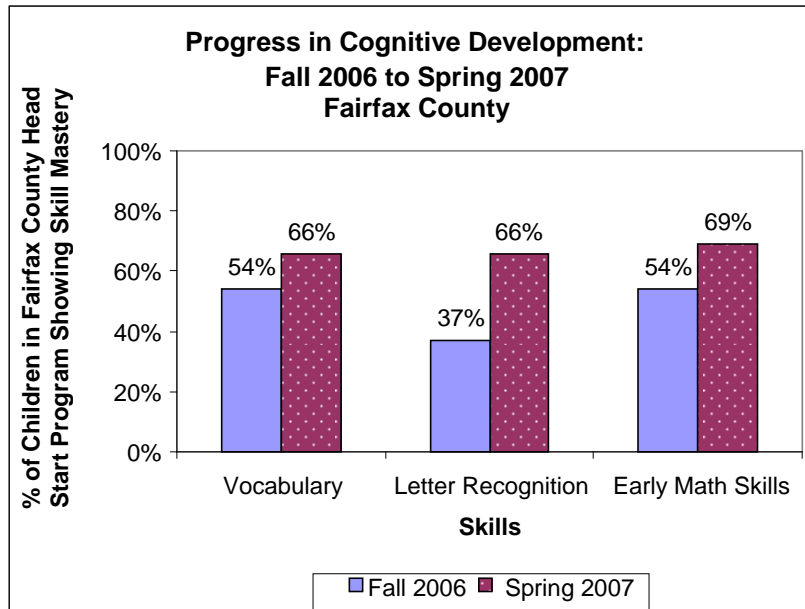
Question: For the Head Start program, please provide outcome data for both students and their families.

Response: The Department of Family Services tracks outcome data for Head Start children and families in a number of different areas in order to assess children's readiness for kindergarten and families' progress towards self-sufficiency.

Cognitive and Social-Emotional Development

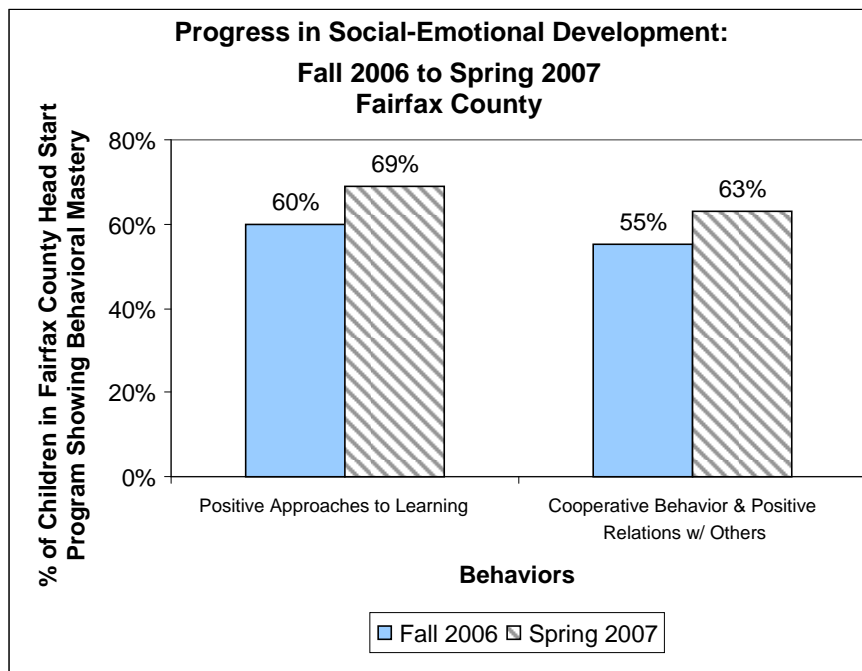
Fairfax County's Head Start program promotes school readiness for preschool-age children by providing developmentally appropriate instruction in a mixed-aged environment that is supportive of children's cognitive and social-emotional development.

In order to assess cognitive outcomes for children in the Head Start program, progress in areas of development such as vocabulary, letter recognition and math skills is measured by assessing four year-olds. These areas are indicators of school-readiness. Children are assessed in the fall when they enter the program and then they are reassessed in the spring to measure progress. As illustrated in the graph below, by the end of the 2006-2007 program year¹, children made gains in the areas of vocabulary, letter recognition and math. These outcomes are in alignment and/or exceed results found nationally for over half a million children tested by the Office of Head Start in program year 2006-2007.



¹ 2007-2008 data not yet available.

Healthy social and emotional development is critical to ensuring that children enter kindergarten ready to learn and that they are not hindered in their learning by behavioral or emotional problems. Therefore, progress in key areas of children’s social-emotional development, such as their approach to learning, their behavior and their relations with others, is measured by assessing four year-olds. As indicated in the graph below, from the fall to the spring of the 2006-2007 program year², Head Start children had made advances in the areas of: 1) positive approaches to learning (includes ability to work independently, adapt to changes in routine and pay attention well, as well as eagerness to learn new things); and 2) cooperative behavior and positive relations with others (includes following rules and directions and forming and maintaining relationships with peers and adults).



Health Outcomes

In the Head Start program, emphasis is placed on early identification of health problems. In collaboration with parents, each child’s health status is determined through a variety of examinations and screenings. This includes a review of medical, dental, nutritional, mental health and immunization information. In addition, parents are assisted in locating a source of continuous health care and/or obtaining follow-up diagnostic testing and treatment for identified concerns. Families are also linked with federal, state and local programs that provide assistance in paying for health care. Health services are tracked and monitored to ensure that children receive scheduled health screenings and appropriate follow up as necessary. By the end of the 2007-2008 program year, 100 percent of children enrolled in the program for the entire year had received all scheduled health screenings. As a result of these health screenings:

- 370 children were up-to-date on all age appropriate immunizations from the beginning to the end of the program year. This represents an increase of 64 children, or 21 percent, from the prior year total of 306.

² 2007-2008 data not yet available.

- 19 percent of children screened were diagnosed as needing further medical treatment and of those 19 percent, 94 percent received additional medical treatment.
- 37 percent of children screened were identified as needing further dental treatment and of those 37 percent, 77 percent received additional dental treatment.

Family Outcomes

Through the Head Start program, parents are offered opportunities and support for growth so that they can identify their own strengths, needs, interests and problem-solving skills. Through a Family Partnership Agreement, staff and parents collaborate to set family goals and develop strategies to meet those goals. Such family goals can include enrolling in school, gaining employment, stabilizing their home environment and addressing immediate needs for food, clothing and shelter. By the end of the 2007-2008 program year, 83 percent of the 1,867 families served had met the goals set out in their Family Partnership Agreement.