

Head Start Forward: ERSEA and Program Structure

Dr. Bernadine Futrell: Well, hello, hello, hello, Head Start. It is so wonderful to be here with you today. I'm super, super duper excited and super proud of our team at Office of Head Start. I'm Dr. Futrell, the proud director of OHS and a proud Head Start baby, and I'm thrilled to kick off and welcome you to our first Head Start Forward webinar. We are so ready to have these conversations. We know that over the past few months there 's been a lot of challenges and a lot of things that we've been navigating through together. But this is an opportunity for us to come together as a united Head Start commune it to have conversations about what it looks like as we move forward. So, I welcome you to this first Head Start Forward webinar and we are going to get started into some content to have conversations with you and to share with you some updates on information as we move forward to build back out of this pandemic. But first, let's get started with a few housekeeping details.

Glenna Davis: Thank you so much, Dr. Futrell. All participants today will be in a listen-only mode for the duration of this webcast. Closed captions are also available during today's webcast. You can turn the captions on or off by clicking on the CC button near the bottom of your screen. Also, to participate in the discussion with the panelists, we invite to you please use that chat pod. To participate in the chat, click on chat and add your comments in that chat area. However, if you would like to ask a question, we are asking you to, kindly, please submit those questions using the Q&A pod. To submit a question, click on the Q&A and add your question to that pop-up screen. Again, to engage in the chat and participation in the discussion, please use the chat pod, and if you would like it ask a question, please use the Q&A area. I would like to turn the floor over now to Desmond Clayton. Desmond?

Desmond Clayton: Well hello, hello, everyone. So, so glad you could join us. And thank you, Dr. Futrell, for setting the tone and bring something energy to this webinar. As we move forward, I will impart on you some very valuable information that I'm sure you're all eager to hear.

So, just a little bit about what we will be touching on today. You know, first thing's first. We will be further defining Head Start Forward. I think that it will be a great opportunity for you to hear directly from Dr. Futrell. I know she did an introduction video back then, but this will be another opportunity to hear directly from Dr. Futrell in regards to further defining Head Start Forward and what that means for the Head Start community. Then we'll move on to discussing the recent Head Start expectations PI that was released. Hopefully, you all had a chance to read it. We will go into additional detail regarding that. And we will also touch on the performance standards, and specifically with 1302 sub parts A and B in areas of ERSEA and program structure. Then we will get into live Q&A. Hopefully, we will have time for that because I know that everyone is just itching, itching to ask questions. Please, please, please, I will reiterate it again, input all of the questions. Ask the questions in the Q&A section of the webinar. And with that, I will turn things back over to Dr. Futrell.

Dr. Futrell: Thank you so much, Desmond. And as we get started, the I want to just pause and say thank you to the wonderful team at the Office of Head Start. Kate, Heather, Ann and many, many others who we will hear from today, including Desmond and Sarah. We thank you all so much because he Office of Head Start, we are ready and excited and honored to have this opportunity to open up conversations as we look forward to moving, building back better out of this pandemic.

What I want to do, to just open it up – because this is our first webinar – is to define what we mean when we say Head Start Forward. And I live by this understanding that we can always do more by coming together than we can do on our own. And so, that's what Head Start Forward is. Head Start Forward is an organizing framework for us to come together in a community to move forward and learn from the lessons from the pandemic, but also to build towards reaching and supporting and connecting with more children and families as we build out of this pandemic. So, quite specifically, what is this ? It's a campaign. It includes opportunities for us to offer support, like a forum like this today as well as other instructional guides that we will give out when it comes to what our expectations are for the fall, ideas and innovative ways that programs are approaching enrollment, and all of the things in between that makes us strong and united as Head Start community. So, the campaign is specifically designed for the Head Start community, all of you. And we are just overwhelmed with over 4,000 people who have registered to attend this webinar. We're overwhelmed and we appreciate the responsibility of having these conversations together.

So, Head Start Forward includes a series of webinars – this is the first one – also guidance and other resources from the Office of Head Start. And we're going to prioritize talking about questions and answering and providing information from what we are hearing from you. And so, this first webinar is going to be about enrollment, recruitment, eligibility, and selection, but we're also going to talk a little bit through these webinars about program structure, mental health, staff wellness, health and safety considerations, because the end of all of this ... When we say Head Start Forward, it means not forgetting that we've gone through something significant with this pandemic. We recognize that we have all experienced this pandemic in unique and different ways, and that uniqueness binds us together. It bonds us in a by that allows us to lean into each other for strength and also to lean into each other for ideas about moving forward. And so, the webinar, as I mentioned, is about doing that. It's honoring what we have been through, and it's honoring that in a way that we will build off of it and move forward. And we're going to do that together as a Head Start community. And so, as we continue to focusing on returning to work and prioritizing wellness in our support of each other, we're going to do it together. And we will have these conversations, and this is the first one and we will have many more and share more about those details, but you will also see information on our website. You will get e-mails and be connected. We want you to connect with us as we continue to have conversations about what it means to move Head Start forward and what the opportunities ahead of us are.

So, with that, we will get right into some content. I'm going to invite Heather to join us and walk through information from our most recent program instruction. Heather?

Heather Wanderski: Thanks so much, Dr. Futrell. I'm excited to talk more about that program instruction that both Desmond and Dr. Futrell had highlighted. So, I want to say that this really was the first major communication from the Office of Head Start on the Head Start Forward campaign and really this instruction is I think provides the framework, really, for Office of Head Start expectations an upcoming 21-22 programming year. We realize that our programs have worked a really, really hard to provide service during the pandemic and we are able to help grantees by providing flexibilities and guidance that allow programs to adapt their programming and services based on changing health conditions. So, with the President's executive order on supporting reopening, of our schools and early childhood education providers, we now are tasked with the need to really lay out our expectations for how we will now support our programs and safe reopening and continued operations I want it highlight – as well for as many have not stopped providing services – and now as we are moving forward in the pandemic.

So, one of the first message in the instruction is really focused on operations as well as enrollment. So, the first thing I do want to say and the first expectation that is highlighted in that instruction is that our Head Start and Early Head Start programs are expected to provide comprehensive services in their approved program options to the extent possible beginning with the start of the 21-22 program year as local health conditions allow.

So, that said, many of our programs have been providing in-person services for our children and families during the pandemic. Therefore, these programs are really expected to continue services and continue providing those services to children. Alternatively, there are other programs that have been providing a variety of different services, alternating between in-person, virtual, remote services or a combination of the two as a result of the conditions in their communities. So, these programs are really expected then to move to in-person services for the upcoming year. And so, while programs are expected to work to full enrollment and full comprehensive services it is contingent upon CDC guidelines , state and local health conditions and the departments that are providing that guidance, as well as school district decisions for those.

And then you will see here that with the start of September 2021, the Office of Head Start is going to start reviewing monthly enrollment in the Head Start enterprise system. But I want to be clear that we will not be instituting the Full Enrollment Initiative just yet starting in the fall. We realize that even now when we lay out expectations for the upcoming program year that not everyone is going to be at the same place at the same time in September. So, but I think we want to make sure that we are very clear in that programs should be building toward full enrollment and comprehensive services as quickly as possible. And then, during time of the fall, the Regional Offices and their contacts will be monitoring enrollment reports; they're going to be actively talking with you about your plans to move to full enrollment if you're not already there yet. And so, we also want you to be able to communicate with the Regional Office if you are experiencing any challenges or any ... or if you' re not able to be fully enrolled come the fall, and particularly in the approved options that you are already providing pre-pandemic. And that ultimately, you know, as emergency preparedness, we would expect that all programs would

have plan should the need arise due to local changing conditions with health or if there is a need to close for any reason, that would you have those plans in place and be able to respond accordingly.

And then, beginning in January of 2022, that's when the Office of Head Start is going to resume the Full Enrollment Initiative. And I want to ... I know partners are probably going to have a lot of questions about this, so I want to make it clear that all programs will start fresh, including those that were previously participating in the Full Enrollment Initiative prior to the pandemic. So, this includes grantees in any status, whether you were on a 12-month plan, those who may have been designated under chronically underenrolled, and any other status that is part of that process. But again, I want to make clear we are resetting the status for all grantees. And January of 2022 will be the first month of enrollment that OHS will actually evaluate for underenrollment. And so, if a grantee reaches four consecutive months of underenrollment – that would be January through April – at that point Office of Head Start would then take necessary steps to place the grantee on a 12-month plan that's really much more intentional to provide training and technical assistance to really help you identify what the root causes are for enrollment issues and really help you to try to reduce and ultimately eliminate those underenrollment issues that you may be experiencing. So, I'm hoping that that helps to further clarify what we outlined in the instruction.

Ann Linehan: So, I am ... Heather, this is Ann Linehan. I'm going to pick it up for here. We didn't apologize for putting a lot of text on the slides, but we did that purposefully, folks, because we know you're going to come back to these slides once you're able to download them and use them as reference guides throughout the next couple of weeks and months as do you your planning, both for your summer programming and returning next fall for your full program year.

That said, Heather, I've got to give you a gold star. You didn't mention virtual and remote services too many times, but this past year, as we know throughout the pandemic, these are two words that were used in our vocabulary all the time. And we are ... As we talk about this ramping-up period, we are going to be really decreasing, diminishing our virtual remote services over time, particularly during ramp-up period. We certainly know virtual and remote services were never intended to be long-term solution for delivering services. They are an interim strategy and certainly, as Heather referenced earlier, we know there will be another emergency or another disaster, and we may have to invoke virtual remote in the future. But this is not considered a locally designed option, and it would not be approved as local design option. And for program year 2021-22, it is not allowable to have a program option run entirely by technology or delivery of educational materials. But I keep thinking about the expression we use all the time, "how much relationships matter." Do we think that relationships can be initiated and nurtured virtually? To some degree, but there is nothing that substitutes a child being among his or her peers and with teachers on a daily basis. And again, we want to be reasonable as we have been since the pandemic began. There may be some support of technology or remote – and such as food delivery, if that's still necessary.

And we recognize – and we're going to visit this in, I think, three other slides ... We recognize programs have discovered some new virtual strategies for engaging families and reinforcing early learning and development at home. Clearly innovations in virtual practice should be used as enhancements, and I love that. We're not saying it can't be done, but it should be an enhancement rather than a substitute for your previously approved program options and service delivery, such as parent conferences. We have heard anecdotally that getting parents on Zoom before a parent conference or a Policy Council sometimes means better participation.

So, again, we are in our ramp-up. There will be some considerations, but we are moving from virtual and remote because it is not a substitute for in-person services with children and families. I will punt back to you, Heather.

Heather: Great. Thanks, Ann. So, I think that the third big message out of the instruction really is around recruitment and selection. So, really I think emphasizing here that OHS really expects programs to make recruitment of eligible children and families a priority. And so, I will say that we know, based on the monthly centers reporting, that the Office of Head Start is really serving a third fewer children than we were prior to the pandemic, and that this amounts to roughly 250,000 children who have not received any services. And conversely, we also know that the number of children and families of poverty has grown significantly. So, all grantees really should be thinking about and making plans to update those community assessments for a variety of reasons, but I think two of the big important ones and focus areas should be around recruitment and selection.

So, specifically for recruitment, programs are really going to want to make sure that they are reaching families most in need of services. And so, in particular, I'm thinking about like if a program, once they update the community assessment, determines that their pre-pandemic approved options or option – if they are only doing one – is not going to meet needs of the community, then you should be engaging in conversation with the Regional Office to be thinking about and moving forward on requesting approval for a change in scope. The request really needs to be grounded in those results from that community assessment and the data that has been made available based on that update. And programs should include specific efforts to actively locate and recruit eligible children, in particular those whose families are English-language learners, those experiencing homelessness, those affected by substance misuse, as well as children with disabilities and children in foster care. And then, when also thinking about the selection, the updated community assessment information should be taken into consideration when you're revisiting an established selection criteria that you may already have in place. And so, at this point, grantees have or will receive substantial financial support – through basically the CARES Act funding, through CRRSA funding, through now the Art funds – to be able to support these recruitment efforts. And we actually spend a lot of time in program instruction on the American Rescue Plan funding increase. We highlighted and provided extensive examples of how grantees can use these one-time investment funds to be able to support needs of staff, the needs of children, and the needs of families. And so, this includes ... I'm thinking, in particular, funds to be able to purchase services and materials to ramp up recruitment efforts. And I'm also thinking about ... We highlighted the ability to for funds to be

used to provide vaccine outreach to support staff. I think that you know we should be thinking about this comprehensively, that we've got funds there to be able to support all of these efforts and expectations that are being outlined now. So, with that, I think I will kick it back over to Desmond to kind of walk us through some of those question-and-answer pieces.

Desmond: Thank you, Heather. Yes, everyone is stuck with me for the duration of this webinar, and helping to navigate in particular this section in regards to ERSEA and program operations. I will go ahead and read questions and then I will punt it over to my esteemed colleagues, either Heather Wanderski or Ann Linehan to give their input, answers, et cetera.

We'll just get rolling. What are OHS's expectations related to service delivery for classrooms and home-based services? I think I will throw this one to Heather.

Heather: Thanks, Desmond. So, I do want to say really that the expectation here is that programs should be working toward full enrollment and full in-person services for all program options as local health conditions allow. So, again, I'm not sure ... I want to highlight again that we know programs are not all going to be at the same place at the same time. So, we are making available a ramp-up period through the 21 calendar year that will allow programs to be able to review that community assessment data that I just talked about, make adjustments to recruitment and enrollment strategies, consider your staffing plans, and assess facility capacity. So, all of those things should be ... you should be working on right now and thinking about. Ultimately, programs should be engaged in planning for in-person services and actively sharing and communicating their plans to do so with the Regional Office during this period.

And so, I also want to say to continue on with that, is that while we are allowing for ramp-up period that we do expect that all programs will have return to in-person services for the full funded enrollment by January of 2022. And if, during the community assessment analysis, that you find that a program design change is warranted as I highlighted before, you should be in communication with the Regional Office and talking about those changes and whether a change in scope is warranted based on the information you're finding out from those assessments. But all programs need plan in place, as I highlighted before, to allow for temporary suspension of in-person services, whether it be based on changing health conditions or changing guidance. So, I think those are the big things to specifically highlight here about OHS expectations. Thanks, Desmond.

Desmond: Great, great, thank you. I do recall that you mentioned a ramp-up period going to the end of the year and being back to essentially what Head Start does best in beginning of January of 2022.

Fantastic, but I'm going to keep rolling because we only have limited time, and I'm sure people want to get to a live Q&A at the end. Going along with this slide, can programs continue to use virtual and remote services to serve more children while complying with health and safety guidelines. Ann, can you help us out with this one?

Ann: Sure. And I think I will be known as broken record after this webinar because I'm going to come after this several times over. And I think we've learned that sometimes we have to hear some things seven times before we remember them, so here I go.

Again, right back to what I talked about a few minutes ago – the use of virtual remote delivery of program services is only an interim service delivery strategy during an emergency, a disaster. It's not acceptable for long-term placement for in-person comprehensive services. And again, as Heather said about seven times already, programs should transition to in-person service as soon as possible. And of course, we always add the caveat, "depending on local conditions." And again, it is unallowable to have a program option run entirely by technology or through the delivery of education materials to children's homes. Just not acceptable. And the use of virtual remote services for children's comprehensive educational services will not be approved as a locally designed option.

Again, we are allowing ... We keep referring back to kind of this ramp-up period, that we know that some programs may be delivering virtual remote services to some enrolled children, again if local health conditions necessitate or if the program is meeting an individualized need. But the goal is moving towards a comprehensive in-person ...

And I do want to say, it is always tricky because when you give a ramp up, and we keep talking about January 1 as being this very pivotal date where children will all be in service or back to your new normal of providing comprehensive services in person ... We don't want programs to think that there's the flexibility of taking one's time ... And I say that out of the greatest respect. We think about our 3-year-olds who have already lost a third of their little lives in educational instruction and in person, the socialization that occurs with their peers. So, we don't want to lose another half year, program year in a ramp up. We understand you are going to need time, but we don't want you to view this as a time that – "pew, we don't have to worry." And we want you to worry about getting children back in person. Again, I say that respectfully.

Desmond: Great, thank you, Ann. You can say, respectively ... And Dr. Futrell touched on it in the beginning, we are just trying to get Head Start programs back to the things that we do best in the best way that we can do it. We know that remote and virtual learning was only supposed to be in the interim and during the unfortunate situations that have been going on for the past year. But you know, we want to make those transitions back to full in-person comprehensive services.

Ann: And Desmond, I should have made a plug, one thing that I was neglectful in not mentioning and stressing again. I think we've heard it from Heather: The communication with the Regional Office throughout this ramp-up period will be critical.

We don't want surprises. We want to understand your planning. We want to understand the incremental steps that you are taking. And again, that's for folks that are ramping up, and you always want to acknowledge those folks that continue to be fully operational and in person. But again, the communication with your program specialist, grant specialist – absolutely critical.

Desmond: Absolutely. Thank you for that, Ann. I will continue to drive that point home as well. [Laughter] So, some recurring themes that all of you folks will hear over the course of this webinar. But we must press on.

Heather, this one's coming to you. Does OHS advise programs' leased temporary space to meet expectations around full enrollment and comply with physical distancing per CDC and local health guidance?

Heather: Thanks, Desmond. Yes, if a program cannot serve its full enrollment in existing facilities, either due to class sizes or physical distancing requirements, programs really should be considering leasing additional temporary space. And so, this would allow a program to both meet full enrollment as well as comply with health guidelines. Ann was talking about the broken record, and I think you will hear me mention this more than once on today's webinar is that programs can leverage all of the available one-time funding investments – that CARES Act funding, the CRSA money, the Art funds – to really support their efforts in this area. So, and then we have to think about to ... If there are no facility options available, you really should be in communication with your Regional Office to talk about alternatives. Virtual or remote services are not a long-term replacement, but programs could consider this as interim strategy during the ramp-up period if restrictions with local health conditions are precluding a program from being able to serve their full-funded enrollment in existing space. So, again, as Ann mentioned already, we would expect you all to be in communication with your Regional Office to talk about what challenges you may be facing, whether there is still some issues around being able to serve your full-funded enrollment and to think about and talk about what alternatives you may have available.

Desmond: Great, great, thank you, Heather. I think ... some very good points about a lot of lessons learned when it comes to uses of the additional one-time funding that we've secured throughout the year. But, moving on. Ann, I think has your name on it. [Laughter]

Ann: It does. And again, we want to recognize that there's a virtual program strategies that we learned that can continue to enhance our work ongoing. But we wanted to make a distinction between those that we are affording flexibility during the ramp-up period and those that we see are really good examples of ways of doing business in this new era of having the post-pandemic and what we've learned. And again, when ... I know my colleagues were always nervous when we put out a list like this, and we want to say, "Include but are not limited to ..." If you see something that's ... If you say, "Oh, I wonder about ..." Well, that's ... Have a conversation with your Regional Office. But again, looking on the [Inaudible] side, I mean, things that we understand could be virtually done, again during the ramp-up period. Again, we're hoping you don't have to rely on it, but you may have to. And when I look at parent-teacher home visits, well, there may be some reasons why they'd be reluctant to go into a home, there are also other ways where you can still meet up with a parent, not in their home. Outdoor parks. So, we want people to be creative even though we're saying some of these things in the ramp-up period are going to be acceptable. Just take a look to the right. And again, the virtual for flexible use indefinitely. And I'm sure people can add other ideas. So, again, I

don't want to spend much time on this. People will have this slide, but just to give you an example that we do appreciate that there are virtual program enhancements that are here to stay.

Desmond: Great, Ann. I think one takeaway is that it's not an exhaustive list. There are some items that would go a ways in supporting programs virtually. But we don't want that to be the main focus. However, Ann, I will keep you on for this one, too. So, given new capacity – e.g. technological advances and familiarity – will programs be expected to conduct virtual, remote services in future weather- and disaster-related situations?

Ann: Well, you know, it's interesting. I think of our colleagues in Puerto Rico that have endured so much as well as many other grantees across the country with natural disasters. And I bet they're thinking about what they in place, your policies and procedures. Did they really ... Were they really strong enough or comprehensive enough to deal with the disaster? And I would think every program should have an emergency preparedness plan, but now, the way I would say is ... Everyone should go back and revisit and say, "Is everybody experienced ..." Well, it was ... It is a health crisis. It may not have been a human disaster, but one could say we probably could fall into that. But I think programs should be looking at what they need to put in place because we know that there is going to be another disaster. And we all know that. So, what did you learn about this situation where you would want to say "You know what? We want to have policies and procedures in place so we can respond quickly, and we know from experience when we would have to temporarily suspend services and what we would do in place of having to suspend in-person services. So, again, is this going to happen again? It could. It might. It's likely it will. But how much better prepared can we be if we have to temporarily shut down and provide the continuity that so many of you did such a great job without even having been preparing for this. So again, we want to be reasonable. But again, this gets back to what's the governing body's role? What is the management system's? We're not talking about the people that are in direct contact with our families everyday. We are talking about management systems and governance bodies and saying how can you best prepare your organization if something like this should pass, should come.

Desmond: Thank you. Thank you for that, Ann.

Ann: I think I'm good , Desmond.

Desmond: OK, I just wanted to be sure. Thank you for that. So I think one of those takeaways is plan, prepare, respond. It's something that we've said previously and hopefully that programs have had an opportunity to essentially learn what happened over the past year and for whenever we do encounter something in the future because unfortunately, it is not an if – it's essentially a when.

But again, pressing on. Heather, this one will be coming in your direction. What should programs do if home-based staff are hesitant to go into families' homes for visits or are worried about going from one home to another due to concerns with COVID-19 transmission?

Heather: Thanks, Desmond. We have been getting this question quite a lot. So, I want to respond by saying that if home based staff are hesitant to go into family homes for visits, programs should be thinking about creative ways for staff to be able to conduct in-person home visits and socializations. Home visits can be conducted while the staff and families are physically distanced. They can be conducted outdoors or on porches. I'm thinking about those pop-up tents. They can actually, and I'm channeling by best Amanda Bryans here. She would say, in particular, pop-up tents are great because they not only provide shade, they provide cover during inclement weather but then they also make in-person services more comfortable for staff, for families, and for children. And children really appreciate being outdoors and being able to make that connection. Again, here is my plug. So, pop-up tents would be considered an allowable use of funds with the additional increase in funding that programs have received. So, can't say enough how much I'll make a plug for that. And also that funds can be used to provide access to vaccines for adults. So, I will say that, but I know I'm pretty sure Ann wants to say another piece here too. I will let her speak to this as well.

Ann: Well, this is an interesting topic because I think this also applies to teachers that may be a little bit hesitant to return to a classroom setting. And this is really, this is again, I think a management and board issue that folks need to begin to talk about because we always say, "depending on local conditions." There are going to be situations in many communities where the local conditions indicate it is safe. And in those cases, I keep getting back to: We're here to serve the children and families first. While we want to be sensitive and support staff ... We've talked about mental health and wellness and being able to use funds to support staff.

At what point of do we say, got to do an alternative because I can't. My staff just won't go into the home or won't go into the classroom. At what point for management does that become an issue that the organization has got to grapple with. Because if the conditions are fine and someone just has a trepidation, a concern of fear, which we are not saying is not legitimate, what do you do as an organization? Because we cannot be in a situation where we are not providing the services that children and family needs when the conditions are safe because there may be some staff who are reluctant. I think that this is just a really tough issue, but programs have got grapple with it. When is it reasonable to provide someone with time? And is it a time to say if the person is not willing to do their job, then the organization's got to have policies and procedures in place to address that. And Heather, I'm sure that was a comment you thought I would make.

Heather: You betcha.

Desmond: OK. Thank you.

Ann: I think we can roll, Desmond.

Desmond: All right, then, we will just keep it moving. What happens to program that were reporting underenrollment or participating in the Full Enrollment Initiative prior to COVID-19 pandemic. Heather, this one is coming to you too. You seem to be on a roll.

Heather: All right, sound good. So, I will say that the Office of Head Start realizes that all programs are in a different situation now than they were in February and March of last year. And so, we are wiping the slate clean for any programs that were previously participating in the Full Enrollment Initiative regardless of their previous status. And this will take effect at the beginning of the upcoming program year, which will be ... Programs for Head Start generally start in August or September. And while we are resetting all programs, we will have a ramp-up period available for grantees through the end of the calendar year, and then come January 22, that will be the first month that we will actually be using the enrollment reports to look at and evaluate for consideration as part of the Full Enrollment Initiative. So, we are essentially wiping that slate clean, Desmond.

Desmond: For people in the back, did you say, "Wiping the slate clean"?

Heather: I did. I said, "Wiping the slate clean."

Desmond: Well, that's something that I like to hear. I think everyone likes to start anew. So, I'm very, very excited about that. Maybe that'll be some good news to some programs. But, again, we must press on. So, you know what, Heather? I'm going to bring you back in for this one too. Should programs plan to recruit and enroll new families for program year 21-22?

Heather: Yes, absolutely, and I'll highlight the exact sentence I said earlier when I was talking about the program instruction: "The Office of Head Start expects programs to make recruiting eligible children and families a priority." And so, we know that the number of families in poverty has grown and that there has been significant disparities and inequities for families. And we also know from our data that we are serving fewer children. All grantees need to be updating their community assessment data and that using information to help guide recruitment efforts and ensure they are reaching families in most in need of those services.

And the other thing I want to highlight here is that not only should we be looking to [Inaudible] enrollment, but programs really should have robust waiting lists to fill slots immediately when a vacancy becomes available. So, I can't highlight that enough. I think that that's really, really important because we're not just trying to reach full enrollment, we need to build back up our capacity to fill vacancies as quickly as possible. Thanks, Desmond.

Ann: And Heather, I wonder if that also underscores a need for programs to look at their selection criteria. Is the selection criteria the same? I mean, that's something they should be doing on an annual basis anyway. But again, to stress to your point, we would expect through the backlog, programs are going to have robust waiting lists, and if they're done their selection then it is not days before once they have a slot that they can fill that that child and family is being served. So, really very important.

Heather: Yeah, thank you.

Desmond: I agree, and I think that's a good lead-in to our next question, which actually, I'll fire your way, Ann. Will programs be penalized if they do not reach full enrollment at this time? Will limited enrollment impact grant funding?

Ann: Can you advance the slide? You are a little cut up there, but it could be me. Yeah, that's ... OK, thank you. So, I know this word, "penalize," is one that programs worry about a lot, and we certainly talked about it when we were ... last spring. But again, getting back in, you're not going to be penalized if you're not at full enrollment through the end of the calendar year, and that's December 31st. But again, we are expecting programs to be working towards that full enrollment. Again, just to ... comments about ramp up. Well, whew! We got a ramp-up period – first quarter or first half of the program year – we don't want programs to consider. "Wow, we don't have to worry about it. We're not going to be ... Yes, we're going to be looking at enrollment starting when the program year opens. Program specialists are going to be interested in how you're incrementally increasing that enrollment. We wouldn't expect the program enrollment to be the same September, October, November, December and all of a sudden jump in January. Certainly, this is going to be incremental. So, again, we're saying you're not ... There's no digging between now and December 31st, but there's got to be that full-out effort whenever the capacity ... If it means you are renting additional space when you get those classrooms open, you have 15, 16, 17 or 18 little babies ready to move into those classrooms.

And again, just to reiterate as Heather said several times, January 2022 is the first month we'll look at that under our enrollment process. But from September through December 31, we are still going to be looking at it as routinely as our program specialists should in working with you.

Desmond: Thanks, Ann. There's that ramp-up period again. And then, [Inaudible] is back on January 22. So, moving on to another piece of enrollment. How will the 10% disability enrollment be determined in program year 21-22. Heather?

Heather: All right, thanks Desmond. I want to make it clear that the 10% disability enrollment requirement will be based on a program's funded enrollment during the upcoming 21-22 program year. If programs are experiencing difficulty in meeting 10% requirement, they should be in regular communication with their Regional Office to talk about challenges and strategize on other opportunities to increase their enrollment. But ultimately, if a program is unable to meet the 10% requirement by the end of the program year, then grantees should be working with the Regional Office to submit a detailed request for a disability waiver. And so, I want to specifically highlight here that the Office of Head Start did put out a program or an information memorandum – that's what the IM stands for – and we did include a link that will be made available with the slides for everyone to be able to access. So, and it does talk about inclusive children with disabilities and timing if you need to be in consultation with your Regional Office around this requirement.

Desmond: Thank you for that, Heather. Much appreciated. On to this slide. Excuse me. Are programs expected to meet service duration requirements in program year 21-22? Ann, I think this one has your name on it.

Ann: And again, I know Heather talked a little bit about when programs are making decision about ... permanent decisions versus temporary positions. And whoever thought when we issued this rule that we would be recovering from a pandemic, and the rule that said, basically, and it was described in a recent PI, which we've got the link, that by August 2021, 45% of funded enrollment would have to meet the 1020 annual hours. And so, again, it's the same theme. We want ... We know it matters the more instruction time kids have, better link to better outcomes. We recognize during, again, the ramp-up period that you are going to be moving towards those duration requirements, but we know that you may not be able to meet it. You may try to serve more children for fewer hours until things settle out. There could be some local conditions that prevent serving 45% of your children meeting the duration requirements. Again, and I think Heather brought this into full scope, I think what's important is we're considering this ramp-up period to be temporary. We don't see it as permanent. We don't see it as meeting the needs of your community. So, we're not considering ... You should not be submitting a change of scope application or a waiver because you can't meet the duration requirements during the first quarter. So, seriously, we're not looking for waivers. We're not looking for change of scope applications. We understand that this is going to be a fluid time. So, again, if you can meet them or you have been meeting them, fantastic. If during this ramp-up period, again as you move towards what you typically do on a permanent basis, then we understand the duration requirements may not be met. We understand that. And again, I should say ... And there is no penalizing for programs that can't do that. And again, we have been consistent, probably throughout every issue we have talked about today, Heather. I think that's clear, and I know Desmond, programs will go back to this particular slide several times over, particularly when they are briefing their boards and their Policy Council about what the expectations are of the Office of Head Start.

Desmond: Oh, absolutely. And I think you hit on it that we have an understanding that things will be fluid for quite some time. But how about that programs are already making some permanent changes? And that's when we need to do those official changes of scope. Moving on to this section. Heather, I think you would like to answer this one: What is new in the American Rescue Plan that I need to know to determine a family's income eligibility for Head Start programs.

Heather: Yeah, great question. So, programs should know that families collecting unemployment as result of the pandemic should not count toward family income. And additionally, the new art monthly child tax credit and the child and dependent care tax credit do not count as income for purposes of determining eligibility. And so, this has not changed at all as other tax credits do not count towards income either, so it should be applied consistently. But I do want it highlight specifically that there are a substantial number of tax credits, refunds, and benefits that were made available to families under the American Rescue Plan. The Office of Head Start created a whole document that was sent out via e-blast through the ECLKC that was dedicated to explaining this information and really should be widely disseminated to our families. And it's highlighted here, called "Partnering With Head Start Families to Access Benefits, Tax Credits, and Supports through the American Rescue Plan. That is a very rich document, but I think really well written and concise and that we really should be highlighting

this information because I think in particular a lot of the tax law and sometimes maybe hard to navigate. And so, we want to make sure that we are giving this information and we are providing access to families to be able to tap into these resources because we really want them to be able to make best use of the American Rescue Plan and the additional benefits that are available.

Desmond: Thank you, and I think it's important to point out the vast number of resources that we have out there, and those really, really important and actually very thoughtful information on these topics available on ECLKC. You know what, Heather? I'm going to keep you on again for this one as well: How the programs document income eligibility for families that that they are recruiting whose income changed because of COVID-19.

Heather: So, I'm going to go back to the performance standards, and they say that – we highlight and we reference it – if a family's income situation has changed significantly, that programs may consider parent income when determining eligibility rather than reviewing the last 12 months of income. But if a family has no income, a signed declaration from the family is acceptable provided the grantee made attempts to verify the family income. So, I think that the most important takeaway here is that programs really should maintain adequate documentation regarding those decisions. So, if you are going to be using current income versus looking at the last 12 months, how did you come to that decision. And document that as well as if family does, comes to you and says, "I have no income," what types of efforts did you make in order to determine or verify that that information was accurate and then also documenting those determinations as well. So, I think that that's the going to be the most important piece there.

Ann: And I think, Heather, it's interesting considering we haven't used the word document, document, document too much throughout this webinar. But again, I think we need it stress that decision programs are making or if they're taking a family's attestation, documenting the process. The documentation is really going to matter. When we think about just Head Start alone, \$2 billion have come into our system to support this post-pandemic ... Well, during the pandemic and certainly post-pandemic activities. So, the accountability for the funding, which I'm sure we will deal with on later webinars, is really very, very important. It is a huge investment, and we are confident that programs will be using the money wisely for the best benefit of the program, but the documentation is going to be important.

Desmond: Thank you for that, both Ann and Heather. And I think it goes without saying that documentation is important overall. But some things that I want to bring your attention to on this slide in particular are Head Start for webinar dates. Today is obviously the first one. The next one, if you pay particular attention to that, the date is Friday, June 25. I believe that's a date change from something that was, from some information previously communicated to you all. I believe that date was changed from the 23rd to the 25th. So, please definitely make note of that change, as it's rather important. And of course, you see the subsequent dates are all on Wednesdays, one in July and two in August.

And I believe with that, that includes the question-and-answer slide portion. And that leaves us time to dive into addressing some of the questions that you all have been furiously – and I do say furiously – furiously submitting throughout webinar. One thing that I think we'll kind of jump into is: Can we further clarify or reiterate again the ramp-up period, and then, what takes place in January 2022.

Heather: You want me to take that, Desmond?

Desmond: Sure.

Heather: OK. So, you know, when we talk about a ramp-up period, I think the goal really is for programs to start out the upcoming program year. So, that full enrollment, in person and their previously program options, to the extent possible. And so, knowing that and kind of highlighting again that not everybody, some other programs need additional time to be able to make that happen. And so, using the fall time – I'm thinking like August, September, October, November, December – like using that additional time, if you are not able or local health conditions are not allowing you to return to your full enrollment, to be able to use that opportunity to work toward achieving that, and that come January of 22, then we would expect and again ... We would expect you to be able to reach that by January. And so, I think Office of Head Start is going to be looking at your enrollment reports, having regular conversations with you, and talking about what your plans are if you are not at full enrollment at the start of the year. What are your challenges? What's happening? Is it a result of local health conditions? Are you facing other challenges? Is it staffing? What's happening within your program to be able to help you and thinking about and planning for that full return.

Desmond: Alright, thank you for that, Heather. This may go to you as well, and I'm sure Ann will jump in when necessary. There were a number of questions that came in around full enrollment, the Full Enrollment Initiative. There was one specific question that asked for clarification. If we would be reviewing enrollment in January for December or if we would be reviewing enrollment in February for January. And I will add a little bit on to that if we could probably also touch on again, what wiping the slate clean means for people and just a little bit more about the Full Enrollment Initiative.

Heather: Sure. So, I think if people have general questions, we did put out an instruction all about the Full Enrollment Initiative that folks may want to take a look at. It was put out quite some time ago. But I think it's an important one that programs should be familiar with. But ultimately, to clarify what the wipe the slate clean means – and what that means for programs is that ultimately, if you were at any point on a 12-month plan, if you were designated as chronically underenrolled, if you had a situation where we had pursued taking slots and funding at any point – while, like I said, that is all part of being designated as chronically underenrolled – and any actions we may take as a result of that – we are wiping the slate clean. So, every program is going ... There is an expectation that your funded enrollment level – that you will start out that process, and that's the expectation of your existing current funded enrollment levels. And that there is ... We're going to reset the whole full initiative. So, if you were on a 12-month plan, you are not on 12-month plan. If you were designated as chronically

underenrolled, you are not any more. We're considering everybody to have a wiped slate. But then when we are talking about the enrollment report [Inaudible]. So, it's a good clarifying question. So, when we talk about January of 22, programs report on a particular month. So, if a program's last day of operation, let's say, for instance, was January 31 for the month of January. By February, they will be submitting their enrollment report for January 31. So, that's the month. So, that report won't come in until February. But so, we will be looking at those February reports for enrollment as of where you were in January of 2022. So, I hope that clarifies. That's the report that will come in technically in February. But it will be for the month of January 2022, where we start to really evaluate and determine whether or not programs are experiencing underenrollment.

Ann: And Heather, programs are still required to report monthly regardless. It doesn't take away reporting requirement. It's just our overview based on the underenrollment processes beginning in earnest in calendar year 2022.

Heather: That's right. That's right.

Desmond: Thank you for that, Heather. Ann, actually, this next question picks up on, I believe, a slide you covered earlier, which we did get a question about. Would we still be able to continue having policy council and parent meetings virtually?

Ann: Well, again, I would say there has to be a reason why someone would want – why an entity would choose to do that. If you can demonstrate, “You know what? We had incredible parent participation.” Then if that is something that enhanced engagement of parents on policy council, then it may make absolutely perfect sense. You just want to make sure that everyone has equal access. I mean, you wouldn't want to do that then know that certain members would have no access or be at a disadvantage and have to be on a telephone. I think equal access – if it is providing equal access and the engagement works, it certainly reduces the worry of travel back and forth to the meeting and certainly reduces the worry about child care. So, there are many things that may be – that a program could conclude, “Right thing to do. We're going to do it.” Again, it's understanding the decisions programs have made. And that's a good example.

Desmond: Thank you for that, Ann. I believe both of you will have input on this one. But Heather, I think you did cover this slide. But it is essentially a reiteration of one that you did cover earlier [Inaudible]. Are home-based visitors expected to resume in-person home visits in the home by September? By January 2022? They are trying to get a little clarification on what those expectations will be.

Heather: Yeah. So, there is no expectation, you know, I want to say of home visits. Particularly, if there's an issue around family concern about them being physically in the home. I think we try to make clear that there are alternative ways and means for home visits to be conducted. We can do porches. We can do tents in the backyard. Like for sure, we want to be able to give those flexibilities. But again, I think the first thing that I had said about the program instruction was that we expect programs to return. The goal is to return to in-person services for all approved program options, starting with the beginning of the 21-22 program year, which will

be in August or September for Head Start and continuous for Early Head Start. Wherever that separate designation allows for Early Head Start. That's our expectation. Start of that year, that's what we want to see programs be able to do. I don't think we are necessarily making a distinction that you must physically go back to the home in January of 2022. Because if you are doing in-person, whether it is in a tent in the backyard or whether it is on a porch or wherever – it is still in-person. That is the expectation there.

Ann: Heather, the one thing that made me think about what Dr. Futrell said in the beginning – and this sort of links to it – we hope that programs are thinking about how they can support parents who are reluctant to get the vaccination. We know the more people that get vaccinated, then obviously, the threat of transmission diminishes. We hope that – we know that programs have done really solid campaigns with their staff, and many have branched out. But I think if you have families that particularly have not gotten the vaccine, then that is a concern. But how can we turn those energies to the part of education or supporting parents in doing those outreach to help those folks gain a greater level of confidence in getting the vaccine? I just wanted to mention it because it is all connected, right?

Heather: Yes, absolutely. Absolutely.

Desmond: Thank you for that. We have a flurry of questions. The slide that you had addressed earlier, Heather, there was a number of questions that came in around unemployment benefits. And how they count or do not count towards income. And if programs are just looking at the additional pandemic stipend above regular unemployment levels. I think we need a little bit of clarification around that.

Heather: So, I think that's a good question. It's interesting because I think what we are trying to make sure that we communicate out is that unemployment really should not count if it was a result of the pandemic. I think that's going to get to the heart of it. I would also say I think for the first – and don't quote me on this exact number – I think for the first 10,000 or \$12,000 of unemployment income, it is not going to be taxable income any way on the 1040 for tax purposes. But I think we have to ask smart questions when we're doing our intake information and just getting down to the heart of the unemployment situation. But ultimately, the answer is no, it should not be counted toward income.

Desmond: Thank you, Heather. I will let either of you decide who wants to take this one. Essentially, we did get a clarification question on what do you define as the 2021-2022 program year?

Ann: Well, I think every program enters into HSES what their program year is. We generally think of program year as for Head Start – and again, that's kind of part-year Head Start, right? The generally program year for Head Starts that are not a full year generally start in August or September, depending on what part of the country you live in. And generally end in May or June. So, that's really, again, we're not talking about the full year – I mean, we're not talking about the full year programs. And we're only talking about Head Start programs because Early Head Start is full year anyway. So, again, program year – again, what makes sense? It is really –

you establish your program year. And that is something that you provide that information in your annual refunding application also. So, we can say, generally, these are the parameters of when it begins and ends. But it is the program's decision based on their community. Heather, you probably want to jump in.

Heather: Yeah. I mean, grantees actually list the program year directly on the program information report. And that date looks very different from one report to the other. Not very different, but it varies. Some are August. Some September. But generally, it's around that period of time for the majority of our programs.

Ann: And I think what could be confusing, Heather, because we made a big deal about programming and program year. And there is also a fiscal year. And that's something ... That's your annual refunding date. And that often doesn't coincide with the program year. So, that's why we're focused on program year because that's when the in-person stuff happens for children and families.

Heather: And then there's also the federal fiscal year, which doesn't start until – that starts October 1. So, just to throw in another date and year. But yeah, I think there is a separate and distinct difference that we are trying to make there.

Desmond: Thank you for that clarification. You are both wonderful. That's just coming from me. That's not one of the questions that's in there. That's just coming from me. But there is a question that ... You talk about examples of how to use various additional funding. Where is that located?

Ann: You're talking about, I think, the document we issued on ... Actually, we sent it out. We disseminated through ECLKC. And then there was a link in the presentation that would take you to it. So, it is posted on ECLKC. And again, it's just ... And there are links in the publication. And this, really, I'm glad someone asked a question. I don't know if we can post the link in the chat for folks. But this is where programs ... There is a lot of complexity to the wonderful array of benefits that your families and some of your staff are going to be eligible to. Thank you, Kay, for doing that. We implore you to dig in. Get your family service workers, get your ... looking at that information, understanding how these ... They could be cash benefits. They could be other benefits to your families so they can have access as expeditiously as possible. These are significant dollars. This is a huge investment from this administration to really help families move to greater access and move that needle out of poverty. Incredibly important. So, thank you for bringing that up. And thanks, Kay, for putting it in.

Desmond: Thank you. Another question. If we have to close a classroom due to COVID exposure, can we use virtual services as a short-term program model?

Ann: I think we did cover that. If there were some justification where something had to be closed, we are hoping a close would be very – very – very temporary. But again, if the local condition is something that erupts – let's say there is an uptick in cases. Again, we want programs to use their best judgement. But, again, ... And this is always a hard part of webinar

because some things, it's not always a yes or no from us. It is what the grantee determines based on the data they have available. And that is what we are asking folks to really be cognizant of. And that's what guides your decisions.

Heather: And that's right. Then also highlighting those emergency plans. What is your plan if there is a change in the guidance or in those local health conditions? That you have those plans in place, and that you are able to implement them immediately.

Ann: And I think ... I'm glad you mentioned the guidance because the guidance has changed over time in terms of what to do with disinfecting or cleaning up or how long something has to be closed. So, I think, again, I think anything we have done, we've certainly referenced the CDC guidance along with asking folks to look at their local guidance. But, again, we would say CDC guidance, relative to these kinds of issues, is still extremely important. And as we have seen, and it's changing over time and will continue to change.

Desmond: I think it's good you touched on that because there was a question that was asking about should programs still use CDC guidelines when moving to in-person services? And if CDC guidelines are not set in a way that allows for full enrollment, what should happen on the road to 2022?

Ann: Well, again – and I understand the question – I think that people should keep in mind and get their links to CDC. We are moving all in the right direction. Can we predict that something is going to reverse that direction or pause a direction we are moving ? We don't know. But we are in a very different place than we were a year ago – March – when all we knew was something terrible was happening. We had no idea how bad it was going to get. This time I think we are looking at ... And that's why I think the campaign is “Head Start Forward.” Because every indication is that we are moving forward. And it may be a new normal. But it's getting back to being able to give those kids hugs and for them to see their friends and all that great thing that in-person interaction allows.

Desmond: Thanks for that, Ann. One more question about full enrollment. Is full enrollment 97 to 100% of funded enrollment, with anything under 97% counting as underenrolled for any given month?

Heather: I think that this always trips folks up. So, when ... And that's why I said reference – going back and brushing up on this stuff, I think, is really important for programs. So, if a program ... Full enrollment is full enrollment. So, if you are funded for a hundred children, then the expectation is you are serving a hundred children. That's your funded enrollment. That's what we are looking at. If you are serving less than that, then we – for the purposes of Full Enrollment Initiative – we look at those reports. And if you are – we look at it for four consecutive months. If for four consecutive months you are not fully enrolled – meaning you are not at those hundred slots – then yes, we will be looking to ultimately place you on a 12-month plan to help support you with additional targeted training and technical assistance to help you reach full enrollment. And then what happens generally is after the end of that 12-month plan, a program would need to demonstrate for a period of time that they are able to

achieve and maintain at least 97% enrollment in order to ultimately be removed from that Full Enrollment Initiative. That is when the 97% kicks in, is after the end of that 12-month plan. So, I think it is important for programs to take a look at that and really brush up on some of that. So, hopefully, that further clarifies things.

Desmond: Thank you for that, Heather. I do believe this is in reference to another slide that you covered, Heather, in regards to capacity issues. If we didn't put leasing in our application that we already have approved, can we still use those grant funds for leasing?

Heather: Yes, absolutely. And so, the other thing that I want to highlight is that there was a separate memorandum that we did put out around fiscal and administrative flexibilities. It talked about the ability to move for related purposes up to \$1 million between object class categories without the need for prior approval from the Regional Office. So, I want to highlight and raise up that if you do need to make adjustments to your budget, you do have the flexibility to do so. So, I would also refer back to that instruction as well. But that ... If you do reach and you move more than a million dollars, then you need to come in and ask for prior approval for any adjustments made beyond that. So, yes, you can make those adjustments. And that should be no issue with adding additional funding for leasing.

Desmond: Thanks, Heather. This next one I think either of you are absolutely well equipped to handle. But someone has asked – they stated on one of these slides about COVID relief funds could be used to vaccinate adults. Or something along those lines, they said. Vaccines are free. So, please explain. So, I think [Inaudible] the additional use of COVID funds in regards to outreach and those types of efforts.

Heather: Yeah. And I think what we were trying to say is making access to vaccines for adults. So, sometimes, depending on where the vaccine may be available. There may be a need for transportation assistance. Staff may need time off in order to do that. Maybe they don't need transportation but maybe they need some leave time. I think that ... So, maybe make some paid administrative leave time available to staff. I mean, all of those things are opportunities. But I think that it was making access to vaccines – using funds for those purposes are OK.

Desmond: What about a stipend for staff for getting vaccinated?

Heather: So, I mean ... And Ann, I don't know if you want to weigh in here. I do understand that there are a number of programs that are really treating this in a way – are making that available to their staff. And trying to incentivize them. They are trying to make that apart of their vaccination campaign for their own staff. So, I think that it's important to make sure that if a program is interested or wanting to add that as part of their own internal campaign to get their staff vaccinated – if they are not making it a requirement for their employees but they do want to encourage them – then I think that they need to make sure they have policies and procedures in place that would be able to support that and that is being used consistently across their entire program. So, I think before we would say whether it is allowable or unallowable, that we would want to make sure that it's somewhere that they have included this in their policies and procedures that this is going to be a benefit that's offered to staff to

encourage that vaccination effort. So, I think every campaign, or every vaccination procedure or efforts are going to be a little different from one program to another. And programs would really need to iron that out first to.

Desmond: Ann, did you have anything you wanted to add to that? Or we can move on?

Ann: No, I think we can move on. And Sarah just posted another link in the chat and will help folks out.

Desmond: Great. This is an interesting question. To clarify, are all programs required to do a community needs assessment? Or are we to do one if we feel it's necessary due to changes post-pandemic? Please advise.

Ann: Heather, you want to jump in? If not, I will jump in.

Heather: It's fine. I mean, I think I'll – I think ... I think unless a program updates their community assessment, how are they going to know the information that ... I think I would be hard pressed to be able to demonstrate that I know what's been going on in my community unless I do the community needs assessment update. But Ann, you may see it differently. But I really think our expectation is that everyone should. In order to really get the data that we need to inform all of the programming that we are offering – what our families need – they're really going to have to do an update.

Ann: Well, and the one thing I think about – and someone just brought it up – I think housing conditions may have changed for many people. And you wonder how many families are now homeless that were not homeless before. I also think about how many poor parents who had low-paying jobs had child care that no longer exists. So, I do think in terms of getting a scan and even understanding of eligible population and how that shifted, I think is important. I mean, there got to be some data that influences the decisions programs will be making.

Desmond: Right. And I think it was touched on earlier that the community needs assessment is the foundation of program planning. So, it is important to have a pulse check on everything going on so that you know that you are providing what the needs of the community are. And as we get down ... We have five minutes left, so I will take the opportunity to wrap things up for everyone. And I do want to acknowledge that yes, there are a lot of questions that came through Q&A. And we will absolutely work and be looking into ways that we are able to address them. And Heather, any parting words ?

Ann: You know, I just think that we want to extend the incredible appreciation we have for everything that's being done. We know how hard programs have worked. We know how creative they've been. We know how exhausted they are. We know you have significant decisions to make about funding. And we are just so anxious to learn from you. How have you used the funds to support this ramping up? How do you use the funds to get back in person? Just so much for us to learn. And it is also going to be really important story that the Office of Head Start would need to tell. I can tell you that the President is interested in how we are doing

and how money is spent. And I can tell you that Congress is going to be very interested. And communities are going to be interested. And this is a time where I really think you have to put on your public communications hat to say, "What stories can we tell about what we have done?" Like in any post disaster, what meaningful things has your agency done to make this situation better? So, I think the telling of the stories, making those wise decisions, are incredibly important. Heather?

Ann: I can't go after you, Ann. Because you always just like magically do the ... You have so much gusto. I just want to thank all of our Head Start and Early Head Start programs out there. Our grantees – you have done just a tremendous job being able to support children and families. And we want to be able to support you in continuing that work and really ... Like Desmond was saying, and Dr. Futrell was saying, getting back to what Head Start does best – those comprehensive services. Just thank you so much. Thank you.

Desmond: All righty, then. And that will conclude today's webinar. Please join us again for webinar number two on June 25. Some of your questions may be answered in subsequent webinars. Keep that out there. And hey, Head Start Forward. Thank you, everyone.

Heather: Thank you.