

Considering Conversion

(links for viewing and download at end of transcript)

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Frank Fuentes: Welcome to our first webcast of the new year, considering conversion. We're glad that you have taken the time to join us. My name is Frank Fuentes, and I am the deputy director of the Office of Head Start. This past December marked one year since the Improving Head Start for School Readiness Act of 2007 was signed into law.

While the re-authorization included many significant changes for Early Head Start, one of the most notable modifications is the provision that allows for the proposed conversion of preschool Head Start slots into Early Head Start slots, based on local community needs and capacity. Head Start serves over 62,000 infants and toddlers, while serving approximately 840,000 preschool-aged children.

Many programs are struggling to achieve full preschool enrollment while serving only a small percentage of their eligible infant and toddler population. Some of these programs may now want to use the authority given to them in the Head Start Act to increase services to our very youngest children. Last week, the Office of Head Start issued a program instruction regarding slot conversion from Head Start to Early Head Start.

Over the next 90 minutes, our panel will examine each point articulated in the program instruction. We will provide clarification on the process of conversion, and we will also discuss some of the things programs should think about if they are exploring the possibility of serving infants, toddlers, and pregnant women through the Early Head Start Program, at some point in the future.

By the end of this webcast, our hope is that programs will have a better understanding of conversion and what it takes to operate an effective Early Head Start program. Now I'm going to turn things over to Lillian Sugarman, our moderator for today's webcast. Lillian.

Lillian: Thank you, Frank. And thanks to everyone in our viewing audience. I'm Lillian Sugarman, director of the Early Head Start National Resource Center of Zero-to-three. Joining me to talk about conversion today are several guests. Craig Turner is the director of Budget for the Office of Head Start. Craig will introduce the new program instruction that was issued on Thursday, January 7, 2009, and will guide us through each point as we examine the new policy.

Amanda Bryans is the director of Educational Development and Partnerships Division of the Office of Head Start. She is here to walk us through some relevant program performance standards and to remind us of some of the factors grantees should keep in mind from a federal perspective as they consider converting. Angie Godfrey is the newly appointed Infant and Toddler Specialist at the Office of Head Start.

Angie will talk about planning for conversion and she will detail some of the steps programs can take to make sure planning goals will be achieved and will lead to high-quality experiences for pregnant women, infants, toddlers, and their families. Mary Ann Cornish is the executive director for the Higher Horizons Head Start Center in Fairfax County, Virginia. Mary Ann's Head Start center was Awarded an Early Head Start Grant when Early Head Start first began.

Today Mary Ann will reflect on the experience of adding an Early Head Start program, and will share some practical advice and tips based on her many years of directing a birth through five center. Welcome, Amanda, Craig, Angie, and Mary Ann. Over the past week, we have been collecting your questions regarding today's webcast.

Many of these questions will be answered throughout the day and some may even be answered directly during our live Q and A session which will take place near the end of our program. If you were not able to submit your question in

advance, please don't worry. During the webcast, you can simply type your question into the Q and A field on the right side of your browser.

There will also be an on-demand archive of this webcast, including answers to the questions we don't have time for this afternoon that will be posted on the Early Childhood Learning and Knowledge Center or the ECLKC.

And finally, we encourage you to send any additional feedback or suggestions you have to the email address you see on your screen now, ehswebcast@esi-dc.com. Now grab a pen and paper because I'm turning the conversation over to Craig Turner who is going to guide us through the program instruction. Craig.

Craig: Thank you, Lillian. As Frank mentioned earlier, the Re-authorization of the Head Start Act signed by President Bush on December 12, 2007, includes new language regarding the possibility of grantees converting slots serving Head Start-aged children to slots that would serve infant and toddler-aged children.

Specifically, it allows any Head Start grantee that currently operates either a Head Start program alone or a combined Head Start and Early Head Start Program to propose using a portion of the funds allocated to serve Head Start children to instead serve infants and toddlers. Before we discuss the program instruction, we want to note that there is a special provision related to American Indian and Alaska Native Grantees.

Indian tribes that operate both an Early Head Start program and a Head Start program may, at their discretion, at any time during their grant period, re-allocate funds between the Early Head Start program and the Head Start program in order to address fluctuations in client populations. Indian tribes that plan to re-allocate such funds are asked to notify their regional office prior to the effective date of that re-allocation.

However, Indian grantees that currently operate only a Head Start program would need to apply for Early Head Start Conversion using the same procedures as all other Head Start programs. The program instruction issued last week explains the process grantees will need to go through to submit a proposal for conversion and it outlines the seven major pieces of information programs must include in their proposals.

The first major point in the program instruction says the request should include the following information -- the amount of funds that is currently being used to serve Head Start children that you are proposing to use to instead serve Early Head Start children. The number of Early Head Start children proposed to be served. And the number by which the enrollment in your Head Start Program will be reduced.

In other words, please indicate how much of your current funding allocation for preschool-aged children you are proposing to use to serve infant and toddler-aged children. In addition, please include the number of Early Head Start children you will serve with these funds and the number of Head Start children that will no longer be served if this conversion is approved.

Please remember that the average Early Head Start cost per child is approximately 50 per cent higher than the average Head Start cost per child. For this reason, you will likely not be able to serve the same number of children. Also, please consider that in order to make available sufficient funding to permit your agency to operate a viable Early Head Start program, you will need to propose a meaningful funding reduction in your Head Start program.

In a center-based program, for example, this means that you will need to propose enrollment reductions of discrete classrooms of 17-20 children, and to use the funds freed up by this reduction to serve Early Head Start children.

An enrollment reduction in which you do not free up sufficient funding, a reduction, for example, of one child from each of 20 Head Start classes would not provide you with enough funding to operate an Early Head Start program. Later in our conversation, we will have a more detailed discussion of the budget implications of conversion as it relates to one-time funding needs.

Lillian: Amanda, tell us, why is the budget a primary concern for programs proposing to convert Head Start into Early Head Start slots?

Amanda: Thank you, Lillian. The budget should be one of the first concerns for grantees who are considering conversion for a number of reasons. First and most importantly, last week's program instruction revealed that no new funds are available for conversion. Without outside funding, a conversion of enrollment slots will result in a reduction of the total funded enrollment in the Head Start -- in the grantee's Head Start program.

As Craig mentioned, the conversion of a preschool slot to an Early Head Start slot is not an equal exchange in terms of numbers of children. The required adult-to-child ratio is very different between Head Start and Early Head Start. In Head Start, that ratio ranges from 2-15 to 2-20, with a teacher and a teacher assistant. Early Head Start programs require a greater number of staff, and the staff must have special training related to the care and development of infants and toddlers.

Group size for infants and toddlers is one teacher to no more than four children, with a maximum of eight children with two teachers in a group. Small group sizes and low adult-child ratios are important for the individualized care that is required to meet the varied needs of very young children in a group setting. They also facilitate close, nurturing relationships between children and their caregivers which are so important to the overall healthy development of a child.

Lillian: Thanks, Amanda. Now, Craig, can we talk about the next point?

Craig: The second major point in the program instruction says the request should include a Communitywide Strategic Planning and Needs Assessment, demonstrating how the use of such funds would best meet the needs of your communities. Grantees should include in this Assessment your current Head Start and if applicable, Early Head Start service area and your proposed Head Start, Early Head Start service area. Angie, could you elaborate on this?

Angie: Thank you. Angie: The community assessment paints a picture of your community; a thorough analysis of the assessment will help you as you begin planning and development. Knowing the demographics of the community, the services that are available in your community and the kind of access community members have to those services is key to understanding how you can best serve the families you intend to work with.

It is also important to establish a proposed Early Head Start service area based on the results of your community assessment. In many cases, the service area may not be the same service area for your current Head Start program. As you analyze your community assessment, consider these questions: What are the health and human service needs of identified families and how are they currently being met? What are the childcare needs for your families and what resources exist?

What do those resources cost? What do parents think about the current Head Start program? How are parents involved in the decision to convert to slots? And what are their expectations for services? Were they involved in discussions around program options? Lillian: Mary Ann, what did you learn when your program completed their community assessment, and how did it inform the decisions that you made during the budgeting and planning stages?

Mary Ann: Lillian, our community assessment identified a large number of working parents who needed full-day infant care. We found that many of the moms work in hospitality and many of the dads work as day laborers, both with non-traditional work hours. As we talked with the parents, we realized that in order to serve them better, our program would need to adjust the hours. We responded by changing the hours of operation, opening earlier and closing later each day.

We also learned through the community assessment that we work in a very ethnically diverse community. Over 100 languages are spoken by students in the Fairfax County Public Schools alone. This guided our planning process in a number of ways, particularly as we would begin recruiting and selecting staff. Like many Head Start and Early Head Start programs throughout the country, this is not unique in large metropolitan communities.

To better meet the needs of our community, our staff must be able to understand the languages and the cultures of the children and families in the program. This has been challenging because of the diverse range of populations we serve.

Lillian: Thanks, Mary Ann. You really did get a lot out of your community assessment. Craig, can you share with us the third point?

Craig: The third major point in the program instruction says the request should include a description of how the needs of eligible Head Start children will be met in your community if a conversion takes place, including the needs of those children who will not be able to be served by your Head Start program should your request be approved.

In other words, since you were proposing to serve fewer preschool-aged children, please explain how the comprehensive school readiness needs of those children will now be met.

Amanda: Head Start believes that a child can benefit most from a comprehensive program which involves both the family and the community. Therefore, the program serves the child, not only through direct educational, health, nutrition, and mental health services, but also by providing support and needed services for the family as a whole.

If your community assessment has indicated that the educational needs of eligible preschool children are being met elsewhere such as in a pre-K program, please consider how their health, nutrition, and mental health needs are met. How will the comprehensive needs of the child be met? Angie.

Angie: Thank you, Amanda. We know that birth-to-five programming is a concept of providing continuous and care for children and families participating in Head Start, throughout pregnancy and for as long as Head Start remains an appropriate setting for a child during the first five years of life.

As your program considers making the shift to serve some infants and toddlers instead of only preschool-aged children, think about the role your program will serve in your community. How will the preschoolers enrolled in other programs and their families continue to benefit from and contribute to the Head Start community? Lillian: Good points, Angie. Craig?

Craig: The fourth major point in the program instruction says the request should include a description of how the needs of pregnant women and of infants and toddlers will be addressed. Include in this discussion the proposed program option or options you will use to provide Early Head Start services. Amanda?

Amanda: There are a number of program performance standards related to services for pregnant women and care for infants and toddlers which may be very unfamiliar to programs currently serving only preschool aged Head Start children. These standards can help you decide how you will provide services.

Some of the standards require that programs must, for example, assist pregnant women to access comprehensive care, provide pregnant women and other family members as appropriate, with prenatal education on fetal development, labor and delivery, and postpartum recovery.

Provide information on the benefits of breast feeding to all pregnant and nursing mothers, and arrange for health staff to visit each newborn within two weeks after the infant's birth to ensure the well-being of both the mother and the child. Early Head Start services, like everything else, begin with planning.

After consulting the community assessment to gain an understanding of the needs of the population in your community, here are a few factors to consider. How many families have a stay-at-home parent? When do women in your community typically return to work after having a baby? What kinds of hours do the adults and eligible families work?

Many Early Head Start programs have discovered they need a range of options, including home-based for pregnant women and babies under six weeks or maybe under 12 weeks, depending on what's typical in your community. Some programs have found the combination option best aligns with the needs of families who may be working part time or going to school.

In thinking about capacity and community needs, programs also must take into account what science has taught us about early development. Infants and toddlers develop in the context of relationships and depend on the continuity of these relationships. Therefore, programs must consider full year services.

Lillian: Mary Ann, I'm going to ask you if you wouldn't mind talking to us about how your program chose its program option.

Mary Ann: Sure, Lillian. I will share my story. As we began thinking about our options, we decided that we would operate a center-based and home-based option to meet the needs of our community. As I mentioned earlier, we serve many working parents in our community, but we found that there were mothers in our area whose traditional role is to stay home and raise their children.

So the opportunity for someone to come in and deliver comprehensive services in the home from prenatal to post-natal meets their needs. Additionally, the opportunity for group socializations gives the home-based parent a connection with community resources, community events and activities outside the home environment.

Angie: When programs opt to work with pregnant women, infants, and toddlers, there are a number of things that need to be taken into consideration. Community partnerships play a key role in serving pregnant women, infants and toddlers and their families...

...Strong partnerships that begin with a shared vision and clearly defined roles and responsibilities support the efforts of Early Head Start programs by maximizing program resources, reducing the likelihood of duplicating services, and making community services easily accessible to families. Mary Ann?

Mary Ann: Determining how your program will meet the needs of pregnant women in your community is also driven by the community assessment. For example, a community assessment in a rural area might reveal that there is a shortage of obstetricians and that pregnant women are not receiving adequate prenatal care because they do not have transportation to medical facilities in neighboring towns.

The Early Head Start program might address this need by assisting pregnant women and accessing transportation or by developing partnerships with other agencies that could bring qualified health care providers into their community. Or a community assessment might reveal a high rate of teenage pregnancy, as ours did.

In this case, we collaborated with a high school to offer supportive services that allowed teens to remain in school while planning for the birth of their child and for the services and resources that they would need following delivery. Care received during the prenatal period has a lasting impact on a child's potential for healthy growth and development after birth. How Early Head Start programs plan to support pregnant moms plays a critical role in the baby's development.

Lillian: Thanks, Mary Ann. Now, Craig, what does the fifth major point in the program instruction tell us?

Craig: Lillian, the fifth major point says the request should include a discussion of your agency's capacity and capability to carry out an effective Early Head Start program in accordance with the requirements of section 645A-b of the Head Start Act and all applicable program performance standards.

Include a discussion of the qualifications of those staff, including classroom staff that are proposed to be part of your Early Head Start program, and a discussion of the physical infrastructure including facilities that will be used to support the new or expanded Head Start program. Amanda?

Amanda: Thanks, Craig. Taking a careful look at your agency's capacity to carry out an effective Early Head Start program could really be the key to your success as you begin to move forward. It is important to honestly assess the strengths and weaknesses of the staff, the infrastructure, and the facility.

Programs that intend to provide Early Head Start services must be thoughtful in how they design and implement their

programs. Putting a new program into action involves multiple simultaneously tasks. Identifying a team or individual to plan and manage this process provides structure and organization to program planning. Some of the important implementation activities include hiring staff. You must have staff who have infant-toddler-specific background and expertise.

Just having been a parent of their own children and teachers of preschool children do not qualify staff to be the teachers of infants and toddlers. Initiating staff development activities. Preparing facilities. Identifying an approach to curriculum. Many people are surprised to learn that infants and toddlers require a written curriculum as do preschool-aged children. Ensuring that community partners are ready to receive families, and recruiting and enrolling those families.

While planning for an Early Head Start program, it is important to know that key stakeholders such as parents, community and stakeholders have an opportunity to share ideas and learn about the progress of the grant or program. These programs have a vested interest in helping improving the quality of an Early Head Start program and can do this only with adequate information and regular opportunities to provide feedback.

Angie: One of the greatest challenges programs face when integrating infant and toddler services with preschool-aged programs is ensuring that the distinct needs of children at each developmental stage, infancy, toddlerhood, and the preschool years, are recognized and fulfilled.

It is important to consider each stage in the choices you make regarding curricula, facilities, community partnerships, staff recruitment and training, and by demonstrating that your organization has dynamic communication that will ensure continuity in the program's mission and philosophy. If you are considering converting slots, begin by talking to your staff and your policy council about the impact these new changes will bring to the program.

Helping them to understand in advance how the needs of infants and toddlers differ from preschoolers and what changes must occur to accommodate those needs, will begin to prepare them for the long planning journey ahead. It should be acknowledged that the differences in the two programs may present challenges, but it will also provide great opportunities. Head Start has seasoned staff members, some of whom have been with the program since its inception over 44 years ago.

Early Head Start, while a relatively new initiative, brings a wealth of resources to enhance program quality, including staff training opportunities and technical assistance services. Respecting and building upon the unique differences between Early Head Start and Head Start will support grantees in building a strong, unified birth-to-five program.

No matter where your starting point in this process, you must ensure that management, classroom staff, and governing bodies are committed to integrating the two programs into a single, seamless program. Amanda, can you elaborate more on the planning for the hiring and development of staff?

Amanda: Before hiring staff, a plan should be developed that specifies the type of staff needed, how many individuals will fill each type of position, the lines of supervision, and how the services to infants and toddlers will relate to the rest of the organization. Developing an organizational structure allows Head Start programs currently serving preschool children to determine how they might use any existing staff to meet the needs of infants and toddlers.

Preschool Head Start programs need to consider their current staff and determine if it is possible to move some staff into Early Head Start. They must also determine if they have sufficient staff to support services for both preschool Head Start and Early Head Start.

Staff development opportunities for Early Head Start programs need to take into consideration the unique characteristics of infants and toddlers. Knowing the developmental experiences of a child from birth enables staff to support the child at all stages of development and encourage their further growth by providing appropriate experiences.

Angie: Facility cost is another expense that needs to be factored in when considering conversion. Every Early Head Start classroom is to be designed to provide a safe, developmentally appropriate environment.

Both center based infant-toddler care and spaces designated for home-based socialization should follow a similar design process to ensure the optimal environment for daily routines and learning. facilities that have been used as preschool classrooms will require significant changes to meet the needs of infants and toddlers. Your fiscal plan should include funds for the physical environment as well as materials and supplies.

Lillian: Thank you, Angie and Amanda. And now, back to Craig for the two final points detailed in the program instruction.

Craig: Thank you, Lillian. The sixth major point in the program instruction say the request should include an assurance that your agency will participate in technical assistance activities, including planning, startup site visits and national training activities, in the same manner as current Early Head Start grantees. William, I wonder if you could talk further about this -- Lillian, I wonder if you could talk further about this point.

Lillian: Absolutely. There are training and technical assistance support that may be available to help you. Each region in every state has systems that cover on-the-ground support. Every state also has or soon will have an infant-toddler specialist that could provide cluster training for programs wanting to convert slots to serve infants and toddlers.

Also, at the request of the Office of Head Start, the Early Head Start National Resource Center has been developing resources and offering support to programs serving infants and toddlers for over 12 years. Most of the resources are available to you on the ECLKC, some on CDs, and DVDs and some in print. You can download tip sheets and technical assistance papers from the ECLKC.

These documents help answer some of the questions programs have, and offer strategies that can be used to address challenges programs may encounter. The EHS NRC has also developed online interactive lessons for those on the front line working with infants and toddlers. The audio conference calls that we have conducted over the past years are also housed on the ECLKC.

These calls feature expert panelists who present cutting-edge research and practices on topics relevant to the work we do with children and families. Two other highlights of the EHS NRC are the annual Birth-to-Three Institute and the EHS 101 Toolkit. Birth to three is a one of a kind opportunity for training in all aspects of the Early Head Start program. And, the toolkit includes almost everything that you ever wanted to know about Early Head Start but were afraid to ask.

The Toolkit is currently available through the publication center and will also soon be available on the EHS NRC website. We hope you will take advantage of materials and experiences that will help you offer the highest quality program for the infants and toddlers you serve! Now, there's one more point in the program instruction we would like to mention, Craig....

Craig: The seventh and last, major point in the program instruction says the request should include the proposed timetable for implementing this conversion. Also, please discuss any one-time funding necessary to implement your proposed conversion and how your agency intends to secure such funding. I want to talk briefly about start-up funding for Early Head Start conversion and about timetables. We noted earlier that no funds were made available for this conversion.

We should also note that the Head Start reauthorization act does not, in itself, make available funding. Funds, rather, are made available through the annual appropriations process. We simply do not know, at this point in time, if there will be any funding that the Office of Head Start can use to assist grantees to meet any one-time costs associated with Early Head Start conversion. We are requesting that grantees include in their conversion proposal an estimate of the one-time start up costs that you will need.

We also request that you include a discussion in your proposal as to how you would cover any one-time costs, should no additional federal funding be available. Any conversion of Head Start slots to Early Head Start must, of course, be done in a manner that does not displace any currently enrolled child. For most of you, that means that a conversion

will happen over the summer, after the end of your program year.

There will be few circumstances in which a conversion midway through your program year will be appropriate. Please consider this as you assess what lead time your agency will need to implement a thoughtful and well-planned Early Head Start conversion. Lillian?

Lillian: Thank you Craig. The planning for any conversion and how much time you would need to do it well is another area where you will find the assistance of your TA provider invaluable.

The timetable should include putting together a planning team, reviewing the community assessment, planning a budget, forming community partnerships, staffing and training, recruitment and enrollment, and curriculum development. Once again, I encourage you to visit the ECLKC and the EHS NRC Web sites for resources and information you may find helpful during the process. Amanda?

Amanda: Thanks, Lillian. From Early Head Start research, we have learned that programs that implement the performance standards "early and fully" have a better impact than programs that do not. Head Start is a complex program. It was designed to continuously evolve in response to research and the ever-changing needs of the community.

Programs taking full advantage of training and technical assistance opportunities have a far greater chance of providing effective services to children and their families in their communities. Mary Ann, in closing, can you share some of the lessons you've learned over the years you have operated a Birth-to-five program?

Mary Ann: Sure, Amanda. For the past 25 years, probably more, I have had the opportunity to work at Higher Horizons Head Start and Early Head Start. The program was established as a nonprofit organization in 1963 by community advocates and remains strongly rooted in the Fairfax County community of Falls Church, Virginia.

Higher Horizons is currently a delegate agency of the Fairfax Office for Children delivering both Head Start and Early Head Start services to over 200 low-income children and families in a fully integrated system of services. Fairfax County serves over 1,600 children totally with funds from federal and local sources.

The program operated a Head Start parent/child center at Higher Horizons with services to infants and toddlers in a home-based model. When these programs were phased out and Early Head Start funding became available, we applied for the grant. Like many others, we thought that a conversion of the existing program would be approved because we successfully managed and operated a parent/child center. It was not!

After two failed attempts and serious attention to the requirements for establishing and operating an Early Head Start program, we were finally approved. Our management team had to 'come to the table' many times and analyze what the requirements of serving pregnant women, infants, and toddlers. We examined the program performance standards for Early Head Start, as well as the four cornerstones that serve as the framework for Early Head Start.

We thought about the impact adding this program would have on the agency and our overall goal was to achieve a fully integrated birth-to-five program. Once the grant was awarded we began planning. Fortunately, we were already in the midst of a facility renovation with plans for incorporating space for services to infants and toddlers. Both the performance standards and our state licensing requirements guided us in working with architects and the design team.

For programs who are considering converting slots, one of the most important aspects to consider is space. Ask yourself, can an area where a cot fit now serve as a space for a crib? Will the teacher be able to navigate her way through that space to meet the needs of all four infants in her care? Is there adequate outdoor play space for infants and toddlers - separate from the Head Start play area?

An existing Head Start classroom may need structural adjustments to meet Early Head Start program needs such as lowering the sinks, adding diapering areas, appropriate equipment sizes for tables and chairs. You also should think about how you will address breast milk, food, formula, and storage for infants and toddlers. And please don't forget the

diapers!

Another challenging aspect of establishing an Early Head Start program is recruiting and retaining qualified staff, and also having qualified substitute staffing. Careful attention should also be given to the special populations you serve as well as the model of service delivery you select. As many...as you may consider a structure that allows you to have floaters or qualified subs to make sure that there is consistent care at all times throughout the day.

You may also want to make sure you have staff who are current with practices that are appropriate for infants and toddlers. Ultimately, you're ensuring that the appropriate adult-child ratios are met throughout the day and the quality of care is consistent. Establishing and developing strong community partnerships has been another key to our success. We've taken an integrated approach to service delivery - partnering with many Fairfax County agencies and human service organizations.

As a result of these partnerships, the children are successful in their school experiences and parents leave the program confident as advocates for their children. Parents are better connected with resources in the community and can readily navigate the educational and human systems designed to support them. Each day, I see children, families, and staff engaged in positive learning experiences and I applaud them. It makes me smile because I know we're doing something right.

Lillian: Mary Ann, thanks so much for sharing your perspective with us today. Now we're going to take a very short break, and when we come back we're going to turn things over to our audience for our live Q and A session. We'll see you in three minutes...

Lillian: Welcome back. And now that you've had a few minutes, what questions do you have for us? Well, we're going to take the first question that Sarah sent us. Sarah is from Arizona. And she says, you mentioned that staff need to be knowledgeable about infants and toddlers. So Amanda, what are the qualifications for teachers?

Amanda: Great question, Sarah, and thank you very much for sending it in. You can probably tell I didn't get to say as much about that as I wanted to. It is very important that the people in the critical role of teaching infants and toddlers have background that is specific to the care of infants and toddlers. The current requirement is that Early Head Start staff get a CDA of infants and toddlers within one year of hire.

That doesn't mean they should come with absolutely no experience. It means that programs have the opportunity to recruit people who may have substantial experience, but not a formal credential and give them a short window to obtain that credential.

Into the future, by 2010, everyone you hire must have a CDA at time of hire and then by 2012, is that right, Craig, they must have an infant-toddler specific CDA. And again, when you are thinking about applying for conversion, it's really critical that you let us know how you will ensure that the people you have teaching your babies have the appropriate preparation and background to fulfill that role.

Lillian: Thank you, Amanda. Do you want to add anything, Angie or Mary Ann? New Speaker: No, we're good.

Lillian: We're going to take this next question. Craig, in the P.I. where it states "will result in reduction of the total funded enrollment in our grantees' Head Start program," does that mean that our money will stay in the same or even though we will be serving less children, or does that mean that our money will go down based on our total enrollment?

Craig: Nothing in this proposed Early Head Start conversion should be construed any grantee will be funded at any lower funding level than you currently are funded for. On average, you can serve two Early Head Start children for every three Head Start children you're currently serving. Nationally, it's about \$7,000 a year to serve a Head Start Child. It's about \$10,500 a year to serve an Early Head Start child.

Unless you are able to bring additional non-Federal resources to this conversion, any conversion will result in fewer total children served in your grant. This reduction will be reflected in a revised financial assistance award which will

take up the new population you are expected to serve. It will be fewer than you were serving. Your dollars will stay the same.

Lillian: I bet everybody likes that answer, Craig, thank you. Mary from Illinois comes to us with this question. Can we choose to serve only toddlers in the slots we convert to Early Head Start? You want to try that Angie?

Angie: Sure. Early Head Start is a program for pregnant woman, infants, and toddlers. And as you consider conversion, the first thing as we mentioned earlier is you should do a community assessment. And as you analyze the data in your community assessment, you will be making a determination about which ages of children you serve. That age could vary depending on the demographics in your community and the needs of the families in your community.

The important thing to remember is it's a program that serves pregnant women, infants, and toddlers. As you look at conversion, you understand that it involves all those ages and that you use the demographics in your community assessment to help you make the decision.

Amanda: Great, you want to add to that at all? New Speaker: I would just add, to kind of reinforce what Angie is saying. Based on what we know from research and infant and toddler development, the very youngest children develop optimally, very much in the context of relationships. In order for them -- they have to have consistent lasting relationships.

And so it may be hard to make the argument that the program is going to have the optimal impact if it's going to enroll children ages birth to three for a short amount of time, say, from the time that child was 18 months old until 36 months versus from the time of birth or before birth until 36 months.

As Angie said, there may be variations based on community assessment, but the program was designed and founded kind of on the principal that we're going to serve programs or children and families during this incredible window that occurs from the very youngest age until age 3. New Speaker: Any other things you want to share on that?

Mary Ann: I think as agencies begin to think about incorporating or considering conversion, the opportunities to design a seamless zero to five program is there.

Looking at infants and toddlers and what we know about research gives us this opportunity to develop a group of professionals who really can concentrate on working with pregnant women and infants and toddlers. And that's a unique part about Early Head Start. So I think this is a great opportunity and programs would benefit by looking at the zero-to-three approach.

Amanda: You know, Lillian, we have mentioned the research a couple of times. It might be a good chance to remind people that we have Early Head Start research briefs which are also available through the ECLKC. They're very practitioner-friendly ways to understand the implications for some of the research we have done, specifically in Early Head Start for making decisions about things like program option and design.

Lillian: Great, thanks for remembering that. Craig, I'm going to look at you for this one. This one comes from Shari in Ohio. She says, asks, rather, if our grant year is February to January and the likely transition would work best in August, how would the conversion of funding work in the middle of a grant year?

Craig: I think you're exactly right. It's the point we tried to make earlier that the vast majority of these conversions we believe will need to happen over the summer, if you will, in-between program years. They can't happen in this case in February concurrent with your new grant award. We will reflect any approved conversion by issuing a revised grant award.

If you get funded, let's say, on February 1 and you will be serving in that proposal a certain number of Head Start preschool children only because you have not yet got an approved Early Head Start program, subsequent to submitting that, you submit or are approved to an Early Head Start conversion that will take effect, let's say, in September, we will, prior to September, issue a revised grant award to you reflecting the change in the number of children you are

expected to serve.

We will reduce what we call your "program account 22 money," which is your Head Start money, and we will increase the money in a separate program account that is used to serve Early Head Start children. So your funding year makes no matter at all in terms of you putting together a conversion that works for your children, which again, in most cases is going to be over the summer.

We will accommodate any accounting or funding issues to assure that whatever funding date you have has no relevance to the implementation of a thoughtful, well conceived, well planned Early Head Start conversion at the right point in your program year.

Lillian: Anybody want to add to that? Thank you, Craig. Now we have a question from Ellen in Illinois. And she says if the Head Start slots are center-based option, could we convert them to Early Head Start home-based option. Angie.

Angie: Again, I keep referring people back to their community assessment. I think that's the foundation for how you're going to make decisions to change this and if in fact the families in your community with infants and toddlers prefer home-based, that certainly should be the option that you present the discussion for, including the budget that's needed to develop a home-based, training for home visitors.

What the Office of Head Start is asking is what Amanda mentioned earlier, a thoughtful planning approach, understanding what it is the families in your community are needing and how you as a program can meet those needs.

And once you have done that, then I think you will come up with what the best option is for your program and it's important that we see not only the plan for that, whether it's center-based or home-based, but also the budget and planning and community involvement in developing that plan. So thank you. Lillian: Thank you. and you want to add to that at all?

Amanda: Sure, I would again really want to support what Angie is saying with regard to your community assessment and also remind viewers that we do know that for many communities, it is beneficial to offer more than one program option. This is proven especially true for Early Head Start programs. Certainly we know when we enroll pregnant women that they receive services most usually through a home-based model.

Immediately post natal babies shouldn't be going to group care until they're at a minimum six weeks old in some states. In some states, a longer amount of time that they stay home. We would expect the Head Start home to be providing services during that very important interim.

And then, finally, there is the need for --when families have infants and toddlers, frequently for them to be able to benefit from one option for one period and then be able to move into another option, perhaps the mother or father stays home for a longer period of time with the child and could get home-based services and the child could enter a center-based option later.

The research on multiple options that we have had from Early Head Start is really interesting in showing we have a wider range and stronger impacts when programs offer more than one option. There is no -- there is a correlational finding. We're not exactly sure why. But one kind of common sense idea is that if you have options that are best aligned with families' different needs, you get better results.

I think that is a very important consideration in Early Head Start, perhaps even more than for preschool where it's a more simple are the families working in this community, is it typical that someone stays home. It's a little bit more complicated question when we're dealing with the very youngest children.

Lillian: Indeed, thank you. We are still getting questions in and I'm really glad that they're coming in and we will try to answer as many as we have time for for sure. This comes from Peter in Vermont and the question is, would it be expected that some of our Early Head Start children would be children with disabilities? And then what are the challenges associated with that? Amanda, Mary Ann, Angie?

Angie: There are, as you know, we have referred a couple of times to the reauthorization that took place in December, and there is new language requiring that 10 per cent of slots in an Early Head Start program be made available to -- well, actually, serve children with disabilities, I'm falling back on the old, too, and that works for your program whether it's Head Start or Head Start and Early Head Start.

There are mandated percentages that the program must meet. And so in truth, that is an expectation that programs have. I don't know, Mary Ann, you have served both Head Start and Early Head Start for a long time, so you might want to talk about serving infants and toddlers with disabilities.

Mary Ann: I think there are several resources that are available. First is the health advisory committee at your local program and the health advisory committee would probably have professionals with expertise in serving infants and toddlers. If not, that would be a consideration when you're thinking about conversion, is to make sure that you have someone at the health advisory committee level to kind of guide what the needs are for children with disabilities.

Additional services from the State is the Part C, they play a major role in supporting and supporting and coordinating services for children with disabilities.

Amanda: Just to really, again, add a little to all of that, of course, it would be incumbent upon a program considering conversion to really learn about services to infants and toddlers with disabilities in their jurisdiction. There is some variation across states, although children who are diagnosed with disabilities are entitled to special education and related services.

As Mary Ann said they acquire those services through Part C agencies, rather than through what may be to preschool services, the more familiar local education agency. Infants and toddlers have an individualized family service plan as opposed to the individual education plan that preschool-aged children with disabilities have.

It would be really important to understand kind of how you access, what the referral process is and how children are able to receive services, how the local special education provider agencies are willing to work with Head Start Programs with children, enroll children who may be in Head Start centers, in Head Start family child care settings or in Head Start home-based settings. A lot to think about there and slightly different than what we're used to for preschool aged children.

The 10 per cent is applicable grantee-wide. So in some cases, Early Head Start may really struggle to -- you know, it is the obligation of the grantee to enroll 10 per cent of the children with disabilities. The Early Head Start program may have more difficulty at times meeting that because of the windows of development in very early childhood. There is great reluctance to diagnose it away, until the child has exceeded the outer window of limit for a certain milestone.

Lillian: Good information, thank you all. Estelle in Maine has a question I think for you, Craig. When we combine slots, can we blend revenue streams between Early Head Start and Head Start, therefore, providing a seamless system of early care and education?

Craig: The short answer is yes. I don't want to make this too complicated. You are getting one grant. We are not issuing two grants any more, a Head Start grant and separate Early Head Start grant. Any grantee who is approved will continue to receive one grant. The way we distinguish the funding levels for both populations is by program accounts we set up.

So we have a program account that is for serving preschool aged children, and we have a separate program account that is for serving infant and toddler-aged children. A Head Start director that might find herself in charge of both Head Start and Early Head Start would simply be asked to allocate her time proportionately: the amount of time she spends on Early Head Start, the amount of time she spends on Head Start, and charge her salary to both of those accounts which I want to emphasize, though, will be funded in one grant.

So we just want to track the funding internally because that's the way we award it to you so we can track how much is

being spent on Head Start and how much on Early Head Start. It's one grant, it's a simple allocation process and we don't foresee any difficulty with any program being able to implement such an allocation process.

Lillian: Thank you. Any additions? No. We have a question from Molana who gives us a little bit of the regulations at 1304.52. To sum it up, it's around ratios and she says some community partners such as daycare providers may have 12 children in a room and we know that we're saying groups of eight are appropriate. 12 children with three providers as they're allowed by their state licensing regulations. Are these centers required to make adjustments if they desire to partner with Early Head Start?

Amanda: That's a great question. Lillian: It is a good question. Amanda: I'm glad that it came up. The answer kind of is a good rule of thumb with everything with regard to Head Start performance standards. You must either comply with the Head Start regulation or the state regulation, whichever is more stringent.

So certainly Head Start would be more stringent in this case. Having said that, you could have a group of -- depending on the physical space, it may be possible that you could divide it such that you have three teachers, each working with their group of four children and that you would never have any group size larger than eight and you could still probably meet the requirement. You have to keep in mind that when you subdivide space like that, you need 35 square feet of usable space per child.

You lose some even if you're putting up half-wall style barriers to divide space. The other thing that you really have to think about that is a very real concern with infants and toddlers is the cacophony of noise that can occur and the crying can be contagious.

If you are having even eight children together within a group and one or two children are crying and that causes other children to begin crying, that could become proportionately more difficult with a group that is really 12 even though they're separated. You know, there's a lot to think about up there. It's not impossible to do, but you are limited to a group size of no more than eight with two teachers for Head Start. I hope that's clear.

Lillian: Ok, anybody want to add? Now this next question comes from Diana in Ohio. And I don't know who wants to answer it, but you can't say, the answer cannot be it depends. Here we go. Including items like planning, staff, facilities, etc., how long would you anticipate that the conversion process would take?

Angie: Well, I'm not going to say it depends. Lillian: All right.

Angie: I'll start by saying as long as it takes to develop high quality, appropriate services that you know will meet all of the Early Head Start program performance standards. In fact, a program may want to move back from there and say this is what we know we need to do and this is what the standards are and how far back do we need to go to make sure it happens. We talked about a lot of things and one of the things that is so important is that you understand Early Head Start.

You know, if I were going to do conversion, the first thing I would do is go visit Mary Ann's program because she has given me a wonderful picture of what she has gone through. And so I know that that would benefit my development of a plan. I just think we can't mention planning enough in all of the time that it will take to do onsite visits, to bring community partners in.

The other thing we talked about was collaboration to make services for family for seamless in a community. That takes time. So I think you go out as far as you need to go and then you build steps every step of the way. I hope she's not -- I'm not going to give you a day. I'm not going to give six months. You are. I'm going to turn it over to Craig.

Craig: Just for a minute, clearly your success or not success in becoming an Early Head Start provider to my thinking will all hinge on how well you have planned to become an Early Head Start provider. Again, this is just not a matter of sort of serving smaller or younger children. We are talking about restructuring facilities. We are talking about getting staff you may well not have onboard who you need to be qualified to train Early Head Start.

We are talking about supplies. We are talking about equipment. We are talking about configurations. This is very different, I would argue, in many ways than serving Head Start. Having said that, however, I want to remind us in the mid 1990's when we implemented Early Head Start and we were fortunate enough in those years to have a significant amount of money to put into Early Head Start for several years, much of it went out competitively.

At that point in time, the rule of thumb that we proposed to programs was a one-year planning period. I'm not saying this is hard and fast, but I do think it sort of frames in some way a reasonable planning process.

It's not open-ended obviously forever. Many programs may well be able to do it in less time than one year, but more than anything else, it needs to be done carefully and thoughtfully or I promise you, you will have an Early Head Start program that will not run well. So to answer your question very generally, about 12 months.

Lillian: Ok, thank you, thank you. Mary Ann wants to share. Mary Ann: I just want to chime in with what Craig said, plan carefully. I think that there are a couple of advantages now when you're thinking about conversion, there are many successful Early Head Start programs nationally. So those that are considering conversion, talk with your neighbors.

Even just google Early Head Start and find out what comes up, you would be surprised. There are many lessons learned for those of us who converted or started Early Head Start programs sometime ago. But overall, I think that there are many successful programs out there that are probably in your neighborhood community, talk with folk at the regional office and just learn and listen about all of those lessons learned so that your program can be successful.

Lillian: And just one little thing to add. It reminded me hearing you say that, Mary Ann reminded me of the first program specialist I ever had when I was a Head Start director who told me, make sure you learn from the programs that are providing compliant, high-quality services, not from the ones that are deficient. So, just something to keep in mind as you proceed. The other thing I would say is that the planning should be strategic.

You're going to be looking not only at your immediate needs around the numbers of children in your community, but trends. Projecting what is happening, what is your state talking about doing with regard to preschool aged children, what's your local district looking like? How much is Head Start at the table in planning for the ongoing needs of the Head Start-eligible preschool children in your community?

Maybe part of your planning for eventual conversion of some slots is that you insert yourself in the local district's planning around providing Pre-K services so you can talk about the real, comprehensive needs that preschool children have. So getting away from the needs of the here and now and get into how is this looked over time, where are we going, what is the vision for this community for birth-to-five services?

Lillian: You know, as you all were responding to this particular question, I see that there is another question and it reminds me that the things you're recommending in the planning stage around visiting other programs and learning from programs that are in good stead is one way that people who are planning for converting and are looking for training can begin their training...

... because Angel writes to us and asks, if you want to convert and are in the process, should you and staff already be attending training? I think learning from one another in your community is a wonderful way to train. She asks, is the spring training in DC, I'm sure she means at the Institute in the summer, June 22, 2009, to be exact, is that an example of the type of training you would expect us to attend?

I may be biased in my answer, but of course, yes, I think that's a great training place, a very good way to get cutting edge information and hear from a lot of experts as well as colleagues in the field about their experiences. So I'll offer the opportunity to anybody else who wants to respond.

Amanda: I think that's exactly right, Lillian. In addition to getting kind of the state-of-the-art information about what where the field is going, what's emerging in infant-toddler care, you also will tend to encounter people who are operating programs, who are performing at very high levels.

We have found, and this is probably not going to be a tremendous surprise to anyone, but the programs that are out making presentations at conferences, participating, sending staff are often ones that are high performing, not always, but very frequently. So we certainly encourage people to take advantage of the Birth-to-three Institute as well as all of the resources through the Early Head Start National Resource Center which is, of course, funded by the Office for Head Start.

Lillian: Yes, thank you. And I want to add one more thing and that is at the Birth-to-three Institute programs, we'll have an opportunity to meet their federal program specialists very often and we have regional meetings so that people get to network within the region. So, ok, I think I got my PSA. Here we go with Julie from Virginia. Good question, do you need to be able to demonstrate that your new Early Head Start slots will be able to transition to your Head Start program?

Craig: The notion of transferring Early Head Start children into Head Start is spoken to in at least two places that I can recall. It's spoken to in the Head Start Act, and it's spoken to in one of our regulations.

And I'm paraphrasing here, but the requirement is that as the child leaves Early Head Start, a program must determine whether or not that child is still income-eligible, that is whether that child's parents have income below the poverty level, or that family is receiving public assistance. If that's the case, if the family is still Head Start-eligible, that program is obliged to make every effort to enroll that Early Head Start child in that child's Head Start program.

Again, we are only talking now of conversion of programs that have Head Start. So any of you that convert will now have both the Head Start and the Early Head Start program. It will be our expectation that except for some extenuating circumstances which we would ask you articulate, yes, you would arrange to transition that 3-year-old child from Early Head Start into a Head Start slot in your Head Start program.

Lillian: Thank you. Anybody else want to? Angie: Only one small comment. And that's that keep in mind what we have been talking about in terms of developing a birth-to-five program that's a seamless experience for children and families. Angie: Just to support what Craig was saying.

Craig: I would agree with Angie and the point to further make is that transition needs to be seamless and every Early Head Start grantee has to have well considered transition plans to move that child from Early Head Start into Head Start so that it's done in the right way for that child and for both programs.

Lillian: Great, thanks. Ok. Here is one from New York asks us, assistant teachers: are they also required to get a CDA? Amanda, you want to talk to us about the staffing in Early Head Start?

Amanda: Yeah, terrific question. It really gives me the opportunity to emphasize the point that there aren't assistant teachers in Early Head Start per se. Each group of up to four children, and in some states, that may only be three children and for example, in my home state of [inaudible], you only may have three infants per teacher.

So each group of three or four children may, must have their own teacher and so you can have a group size of up to eight with two teachers, each group of four has their own teacher which is considered important to support the development of those babies.

In exceptional cases be teacher assistants doing things like be assisting when their child has a particular special need that requires, for example, extra help to move from place to place. So I think the answer is everyone who is working with infants and toddlers must be a teacher with the appropriate background to be a teacher.

Lillian: Great, thank you for that. Anyone want to add to that? Ok. This question comes from Jacquelyn in Michigan. She asks will it be a requirement that building structures for infant and toddler services be one story as many preschool children are currently services in buildings requiring climbing stairs. What do you think? Angie, want it?

Angie: One story, that's an easy answer. It is a requirement that it be one story.

Amanda: To give you some...state licensing is often quite clear about that as well, hopefully always clear, but the way that you, typically in infant toddler curious evacuation cribs. You don't use an elevator during any kind of fire. We don't want any evacuation cribs bumping down the stairs. It does need to be on one floor. Again, it speaks to really how different services are for infants and toddlers.

I was having another little epiphany when talking to diapering areas, with regard to that sensitive time of life known as potty training, when children need easy access to a place to use the potty. In many states, potty chairs are not allowable.

Where they are allowable, you have to be very careful regarding the sanitation of those chairs. Even though the toilets you may have for preschoolers are small, they're not tiny enough for the needs of children who may be between two and three, or two and four and learning about using the potty. Just another consideration with regard to physical space.
New Speaker: Great.

Angie: And just to add a little bit, one of the things that we have talked about is it's so important to work with local code enforcement and to work with state licensing requirements and...requirements, other licensing requirements and communities that will talk about things like the infants and toddlers should be on the ground floor and that will be a requirement that you have to meet.

Lillian: Thank you. Lillian: Claudette from Ohio asks us this question. Are there any effort on the part of the Office of Head Start to engage colleges and universities in being more inclusive of infant-toddler teacher preparation courses since there is such a focus on the Early Head Start expansion?

Amanda: That's my favorite question yet. We're very proud to be able to announce that we recently funded a group of innovation and improvement grants and we included in the funding opportunity that we developed at the Office of Head Start, a category for someone to develop an online infant-toddler degree.

We're anxious for that to actually get off the ground and be accessible. But even more importantly, we hope that will stimulate the further development of infant-toddler teacher training programs, both online and at local higher education institutions.

Lillian: Great. Anybody want to add to that? Ok. The next question comes from Janet in the state of Washington. Will programs be able to request a delayed start-up time so that the program has time to complete staff training and complete facility improvements prior to the start of services to Early Head Start children? You want to i₆^{1/2}

Craig: We spoke to that, I believe, in an earlier answer. You have to have a delayed start-up time. If you don't, I really believe you will not be prepared, and you will not be in compliance with Early Head Start requirements. You can't turn around a Head Start to an Early Head Start program on two weeks' notice. All programs would be expected in their conversion proposals to articulate what sort of transition time that they would need, what they would be doing during that time.

I would suggest you need to develop milestones by which you will achieve certain places you need to get to before you can successfully operate an Early Head Start program. We are expecting nobody to not spend a reasonable amount of time thinking about and implementing a thoughtful conversion from Head Start to Early Head Start. It would not serve anyone well, not the least of which would be your infant and toddler aged children to try to become an Early Head Start provider too soon.

Amanda: Craig, to clarify earlier when we were talking about that we would expect a Early Head Start program to begin over the summer in kind of the fall of the program year, what that meant is that we would expect that you would begin perhaps, or you would be continuing to train staff over the summer into the fall and prepare the facility and that kind of thing, not necessarily that you would on September 1 have children enrolled and be operating the Early Head Start?

Craig: Again, so much of this, -- I don't think we can speak to any particular situation because everybody's timing and

everybody's needs is going to reflect the realities of their community.

But as you think of that, that you want to implement this expansion in a way that it doesn't leave Head Start slots unencumbered for long periods of time while you realize you do not want to do this in any way that would require turning away children that you have already enrolled, you need to sort of back into different dates.

If you're converting over the summer and you believe you're going to need a nine-month conversion process, roughly in my mind, I think you start sort of in November or October to begin that transition that takes eight or nine months and come let's say August, you have completed a successful, well conceived strategic transition and you're ready at that point in time to begin serving Early Head Start children. So yeah, I think so.

But they need to do it in the way that is going to best meet the particular needs they have for their particular conversion. Lillian: Go ahead.

Amanda: I would just like to add to that. It would seem if a program is considering converting spots, that there has already been a thorough analysis of what is going on in their Head Start program that would lead them to the decision to convert slots.

But I think it's just as important in preparing their discussion for the conversion that they also discuss how they've come to this decision so that there is not an empty classroom that once served Head Start and in the future will serve Early Head Start, but that will remain empty for a long period of time. That's certainly not what we're trying to say. So it would be important to see both the plan for Head Start as well as Early Head Start in this large conversion plan.

Lillian: Good. Anybody want to add to that? We're getting close to the end of our time. See if we can get one more question in because I think this one particularly must come from Diana who works in a delegate agency, I'm sorry Diana if I've put you in the wrong place. But the question is are conversion options only available to grantees or are delegates independently able to consider conversion of slots?

Craig: The authority to propose a conversion from Head Start to Early Head Start is for Head Start grantees. A delegate agency that believes its community assessment supports the need to serve additional infants and toddlers or any infants and toddlers ought to sit down and talk with its grantee agency about the reason it believes such a conversion is appropriate,...

... help the grantee understand what led them to that conclusion, and hopefully then, if it's the right way to go, work with the grantee to submit a conversion proposal to the regional office. But the proposal itself just as we only fund grantees, the only change we're going to make in funding is going to be to the grantee agencies.

Lillian: Ok. Well, unfortunately those are all the questions we have time for today. Please remember if you have questions in the future, we can still be reached at the address you see on your screen. EHSwebcast at esi-dc dot com. If you think of something later today or tomorrow that you want to ask, please feel free to e-mail us. As you can see, we have a wealth of information stored up in these guests today.

Answers to the questions we didn't have time for today will be posted on the ECLKC web site, along with an "on-demand" archive of the webcast. At the conclusion of the webcast, you will receive an evaluation by e-mail. We want to know if this webcast has been useful to you and what topics you would like to see covered in future webcasts, so please take a few moments and give us your feedback.

Thanks to everyone who joined us in the studio -- Frank, Craig, Angie, Amanda, Mary Ann, and thanks to everyone in our viewing audience for joining us today. And now I'm going to turn back to Amanda for some closing remarks. Amanda....

Amanda: Thank you for participating in today's webcast. We hope you have a better understanding of conversion and what it takes to operate a successful Early Head Start program. If you are considering applying for conversion, we urge you to carefully analyze your program services and your community. Think about how things look today, how they

might look in a year, and how they may be in five years.

Most importantly, consider the tremendous responsibility with which you have been charged, the many community resources that are available, and how you can have the greatest impact in meeting the needs of the most vulnerable families. We encourage you to use the resources you will find on the ECLKC, through the EHS NRC, And through your TA providers to learn all the unique aspects of serving infants and toddlers. Unitil next time.

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