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Head Start Performance Standards

1302.11 Determining community strengths, needs, and resources

https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-11-determining-community-strengths-needs-resources

- (b) Community wide strategic planning and needs assessment (community assessment). (1) To design a program that meets community needs, and builds on strengths and resources, a program must conduct a community assessment at least once over the five-year grant period. The community assessment must use data that describes community strengths, needs, and resources and include, at a minimum:
- (i) The number of eligible infants, toddlers, preschool age children, and expectant mothers, including their geographic location, race, ethnicity, and languages they speak, including:
- (A) Children experiencing homelessness in collaboration with, to the extent possible, McKinney-Vento Local Education Agency Liaisons (42 U.S.C. 11432 (6)(A));
- (B) Children in foster care; and
- (C) Children with disabilities, including types of disabilities and relevant services and resources provided to these children by community agencies;
- (ii) The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
- (iii) Typical work, school, and training schedules of parents with eligible children;
- (iv) Other child development, child care centers, and family child care programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of eligible children served;
- (v) Resources that are available in the community to address the needs of eligible children and their families; and,
- (vi) Strengths of the community.
- (2) A program must annually review and update the community assessment to reflect any significant changes including increased availability of publicly-funded pre-kindergarten-(including an assessment of how the pre-kindergarten available in the community meets the needs of the parents and children served by the program, and whether it is offered for a full school day), rates of family and child homelessness, and significant shifts in community demographics and resources.
- (3) A program must consider whether the characteristics of the community allow it to include children from diverse economic backgrounds that would be supported by other funding sources, including private pay, in addition to the program's eligible funded enrollment. A program must not enroll children from diverse economic backgrounds if it would result in a program serving less than its eligible funded enrollment.

Executive Summary-Overview

A complete in-depth Community Assessment referred to as "CA" is required by Head Start Performance Standards 1302.11 (b). The CA is to be performed on a 5 year cycle with updates to the assessment completed on the off years. The overall purpose of the CA is to gather data regarding services that are available to children and families in the communities, determine gaps in services, and provide guidance for program planning. Once gathered, the information is then utilized to determine appropriate operation of the Head Start Program and it is included in the grant application (ACYF-IM-HS-00-12). This is an annual update to the Community Assessment.

Based upon our surveys, statistical data, and collaborations with our community partners, we have determined the following issues to be of the greatest need or have found them to be an on-going concern and have developed plans to address each point:

- 1. Data shows there is a continuous need for affordable, quality infant/toddler care. This is also supported by the high rate of teen pregnancies.
- 2. Our families have many needs that we will continue to address. Those needs are education/training on employment skills, financial planning, language barriers, mental health/medical/dental care support. The program Family Service Specialists work closely with the families, through individual interactions, Family Progress Meetings, and Parent Cafe's. During the COVID pandemic they also communicated using ZOOM, Class DOJO, and e-mail to ensure training, education, and support was provided to help families achieve their goals. If families need additional information, referrals are made or partnerships with other community agencies are provided to for skill development, training, and classes. Some of the training we provide, but are not limited to are:
- -Advocacy/Transitioning
- -Medical/Dental
- -Mental Health
- -Parenting
- -Personal Growth

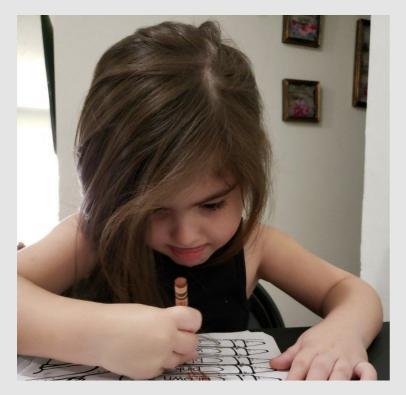
Family Resource Agency of North Georgia-National Goals and Objectives



Parent, Family, Community Engagement: Family goals are categorized into 7 family outcomes identified by the Parent, Family, Community Engagement Framework:

- 1. Family Well Being
- 2. Positive Parent-Child Relationships
- 3. Families as Lifelong Learners
- 4. Families as Learners
- 5. Family Engagement in Transition
- 6. Family Connections to Peers and Community
- 7. Families as Advocates and Learners

Successful Family Outcomes support each child's school readiness. Family Service Specialists engage parents in ways that assist them in achieving their goals and outcomes. The program reviews progress of goals and outcomes 3 times per year.

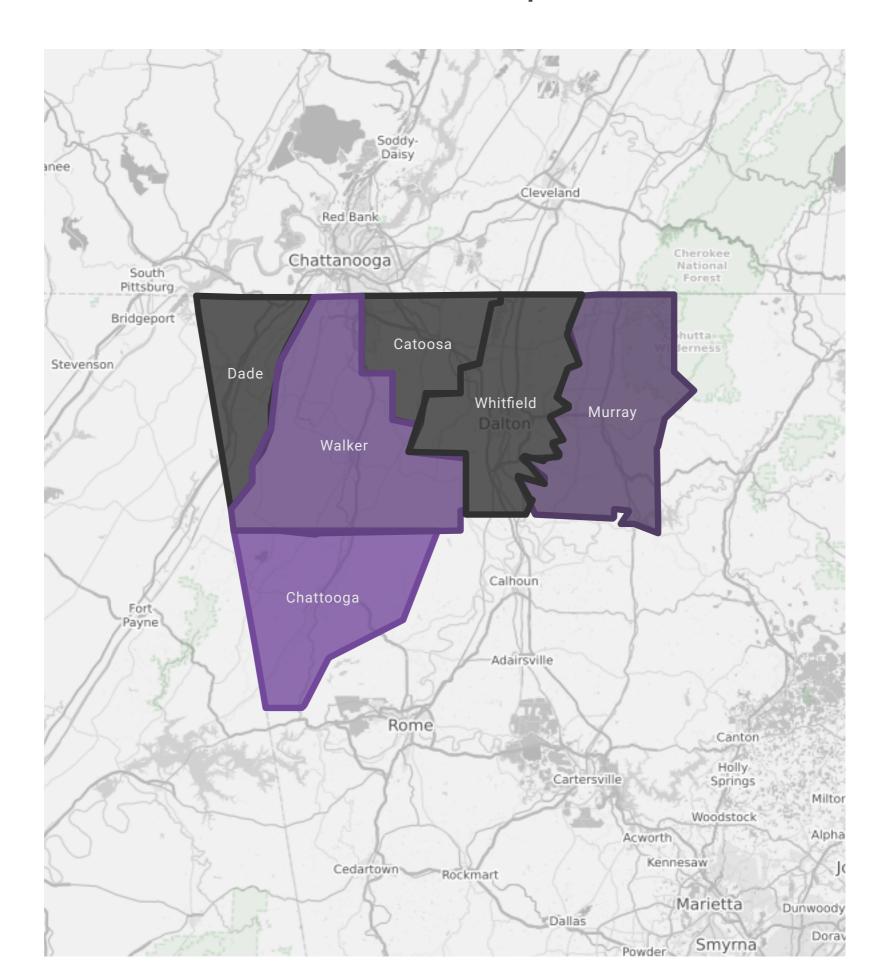


Teaching Staff Education Mandates-Supporting staff in completing degrees and meeting mandates ensures the program meets education requirements.

School Readiness: The Head Start Early
Learning Outcomes Framework, Parent- FamilyCommunity Engagement Framework, Georgia
Early Learning and Development Standards
(GELDS), and requirements/expectations of local
schools were used to guide our program
curriculum implementation, ongoing assessment
of children's progress, and preparation for school
success. We have adopted the following as our
definition for school readiness:

School Readiness means that each child will enter school ready to learn based on early learning experiences received in Head Start/Early Head Start/Pre-K that best promotes each child's success in all areas of development as identified in the Head Start Early Learning Outcomes Framework.

Service Area Map



County Characteristics

Family Resource Agency of North Georgia is funded to provide Head Start, Pre-K, Early Head Start, and Childcare Partnership services to 941 children and their families in the six northwest counties of Georgia. These counties are in the extreme northwest corner of the state and are bordered by Tennessee to the north and Alabama to the west (See Service Area Map-page 5). Geographically, the counties cover an area of 1,725.1 square miles of rural and mountainous (Chattahoochee National Forest) terrain as follows:

	•	
County	Square Miles	Distinguishing Characteristics
Catoosa	162.7	Shaped somewhat like an upside down isosceles triangle. Is in the northern sector of the service area and borders the State of Tennessee to the north, Walker County to the south and west, and Whitfield County to the south and east. This county is the smallest geographically, covering only 162.7 square miles. 49% of the land is forest land (Chattahoochie National Forest).
Chattooga	314.0	Somewhat triangular in shape and is located in the southern-most sector of the service area. Borders the state of Alabama to the west, Walker County on the north, and Floyd County to the south. Third largest geographically, covering 314 square miles. 71.7% of the county is forest land (Chattahoochie National Forest.
Dade	174.1	Somewhat triangular in shape and is located in the northwestern most sector of the service area. Borders the state of Alabama to the west, the state of Tennessee to the north, and Walker County on the east. Second smallest geographically, covering only 174.1 square miles. Bordered on both the east and west by mountains-Lookout on the east and Sand on the west. 70.1% of the county is forest land.
Murray	336.9	Second largest of our counties with 336.9 square miles. Located in the northeastern most sector of the service area. Borders the state of Tennessee to the north, Whitfield County to the west, Fannin and Gilmer Counties to the east, and Gordon County to the south. Very mountainous and contains the western edge of the Chattahoochie National Forest-Blue Ridge Mountain Area. 73.9% of the county is forest land.
Walker	446.7	Shaped like an isosceles triangle and is the largest county in our service region with a total of 446.7 square miles. Borders the state of Tennessee to the north, Dade County to the west; Catoosa and Whitfield Counties to the east, and Chattooga County to the south. At the very southeast tip, Walker County also intersects with Floyd and Gordan counties. Characterized by rural and rural mountain areas and encompasses a portion of the Chattahoochie National Forest and is 64.6% forest land.
Whitfield	290.7	Irregularly oblong-shaped, mountainous county. Borders the state of Tennessee to the north, Murray County to the east; Catoosa and Walker Counties to the west, and Gordon County to the south. Ranked fourth in size with 290.7 square miles. Chattahoochie National Forest covers much of the county and is 53.4% forest land.



Population Centers

The service counties consist of small towns and villages. Dalton, within Whitfield County had a 2020 population of 33,921 and the combined Rossville-Fort Oglethorpe areas of Catoosa and Walker Counties had a 2020 estimated population of 13,849.

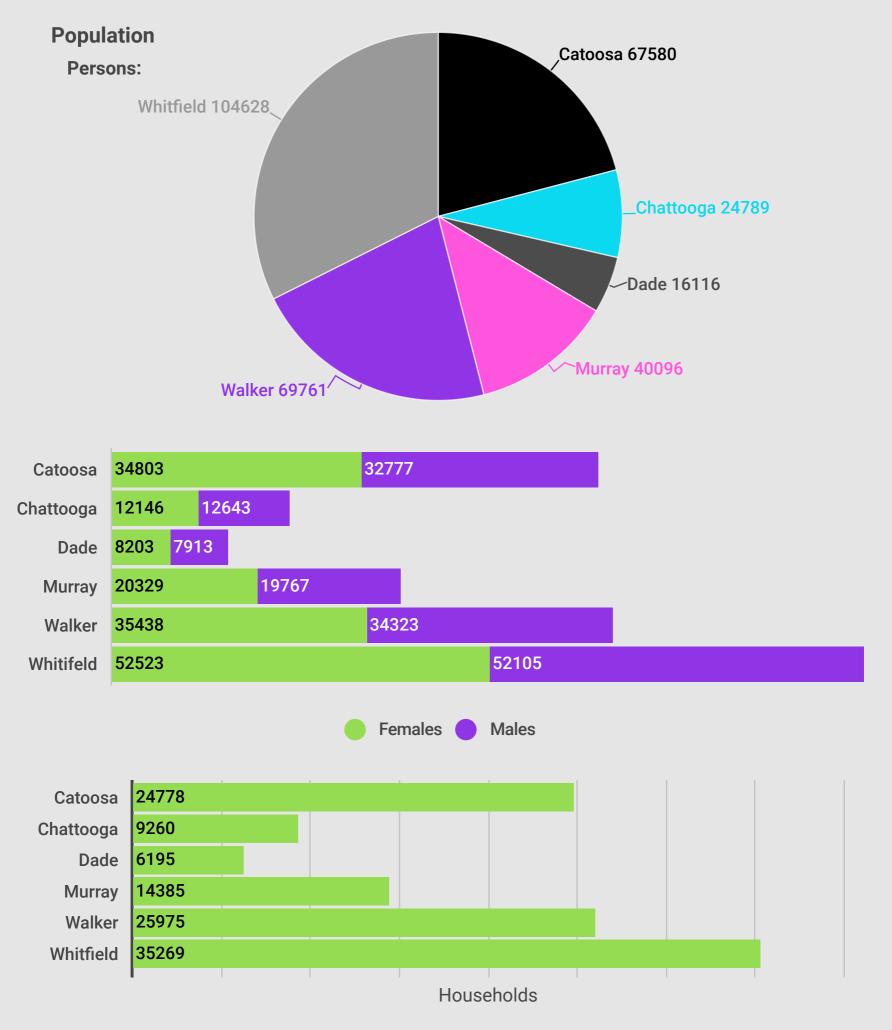
The largest populations are in Trenton of Dade
County with 2,159; Summerville of Chattooga
County with 4,159; and Chatsworth of Murray
County with a population of 4,264.

Our six county service area is also home to many undocumented children and families who may live in the metropolitan areas. The counties have a total population of 322,970.

County Governing Authorities

County	Governing Authority
Catoosa	County operates under a 5 member Board of Commissioners that are elected by the voters. Commissioners are elected by specific districts and the chairman is elected at-large. The Board, as the county's governing authority, is responsible for establishing policy for county operations, enacting ordinances and resolutions to promote the county's health, safety, and welfare (www.catoosa.com)
Chattooga	County operates under a Sole Commissioner. The Sole Commissioner is the chief legislative and executive government officer in the county. The Commissioner's office handles roads and revenue, and is available to answer citizen's concerns on a host of county government issues. The commissioner is not chief of all other local government offices. The commissioner works in close collaboration with other governmental agencies and community groups to ensure a safe and prosperous county (chattoogacounty.org).
Dade	County operates under a 5 member Board of Commissioners. The Board has the power to adopt ordinances, resolutions, or regulations relating to county property, county affairs, and the operation of local government. Constitutional officers also have governing powers; these positions include the: sheriff, tax commissioner, Clerk of the Superior Court, and the Probate Court (dadecounty-ga-gov).
Murray	County is led by a sole commissioner who holds all the legislative and executive powers (and responsibilities) in the county and who oversees a county staff of employees charged with providing services to the the citizens of Murray County (murraycountychamber.org).
Walker	County is led by a Sole Commissioner. The commissioner is responsible for public works, finance, administration, purchasing, fire, rescue, emergency management, planning, economic development, and public health and welfare. The commissioner's staff help carry out these functions (walkercountyga.gov).
Whitfield	The Whitifeld County Commissioner makes policy for Dalton, including setting long-term goals and evaluating outcomes. He adopt Dalton budgets, approvetaxation and financial decisions, adopt ordinances, and make land use decisions. Commissioners play multiple roles in Daltonan Whitfield County government (whitfieldcountyga.com).





Racial and Ethnic Composition

Racial make-up of County-wide Population, Percentages

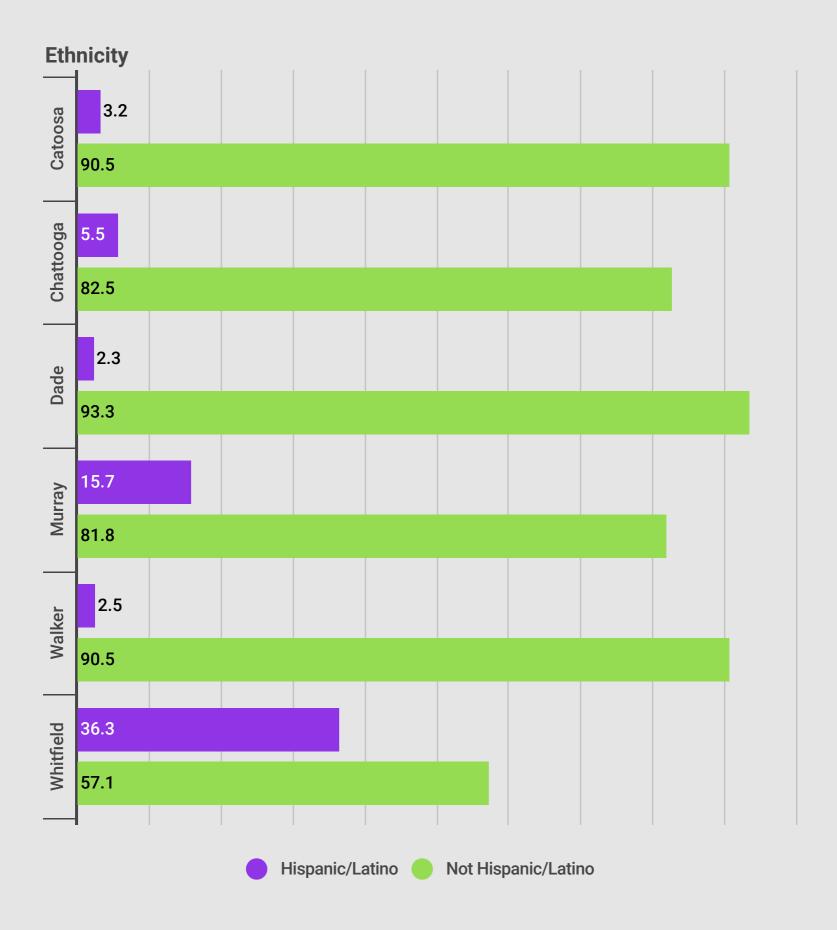
	Asian	Bi-racial	Black	Caucasian	Hispanic/Latino	Other
United States	5.9	2.8		76.3	18.5	1.5
Georgia	4.4	2.2	32.6	60.2	9.9	0.6
Catoosa County				93.1	3.2	2.30
Chattooga County	0.6	2.1	9.8	86.8	5.5	0.8
Dade County				95.3	2.3	0.7
Murray County	0.5	1.3	1.2	95.7	15.7	1.3
Walker County	8.0	1.7		92.7	2.5	4.5
Whitfield County	1.6	1.7	4.4	90.6	36.3	1.6
Service Area Avg.	1.0	2.70		92.37	10.92	1.87
Service Area %	1	2	4	82	10	2











Languages Spoken

	English	Spanish	Other-Indo-European	Asian & Pacific Island	Other
Catoosa	95.1%	4.1%	0.5%	0.1%	0.2%
Chattooga	95.1%	4.1%	0.5%	0.1%	0.1%
Dade	96.4%	2.0%	1.2%	0.4%	0
Murray	88.1%	11.4%	0.2%	0.3%	0
Walker	97.7%	1.4%	0.4%	0.6%	0
Whitfield	68.4%	30%	0.9%	0.5%	0.2%
Total for Service Area	90.13%	8.83%	0.62%	0.20%	0.5%

Of service area residents 90.13% speak English only. The non-English language spoken by the largest group is Spanish which is spoken by 8.83% of the service area. In Whitfield County there is a high concentration, 30% that speak Spanish. The public schools in Whitfield County indicate that as many as 26% of school age children are of Hispanic/Latino origin.

Data obtained from American Community Surveys 2015-2019

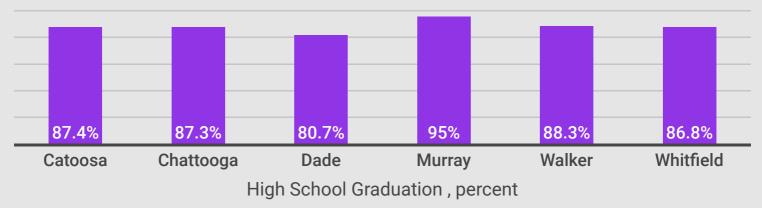


Socioeconomic Status

Education

High School

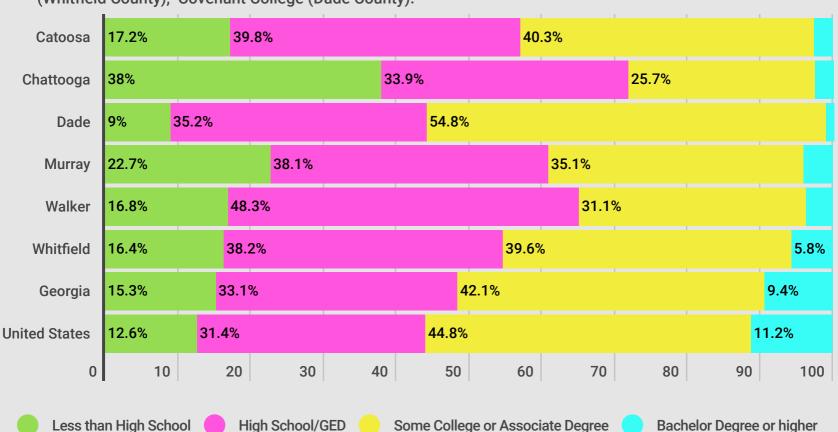
Georgia's high school graduation rate increased in 2020, rising to 83.8%-an all time high since the state began using the adjusted cohort calculation now required by federal law. Georgia's graduation rate increased from 82% in 2019 to 83.8% in 2020.



Data obtained from the Georgia Department of Education, 2020 Graduation Rate Report by county and state-accessed Feb. 2021

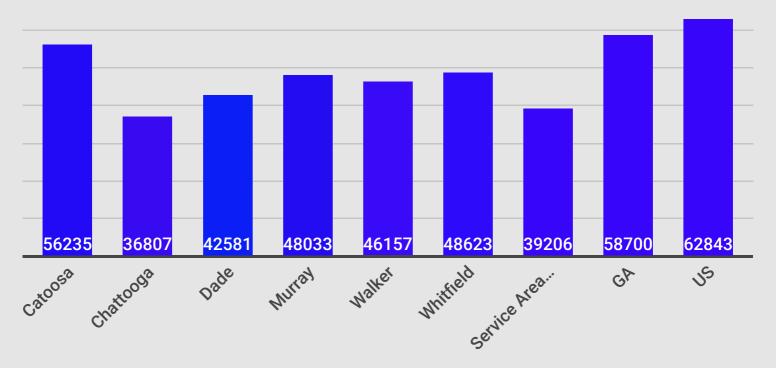
College

Degree attainment: 37.77% of the population 18-24 years old within the service area have some college or an associate degree, which is lower than the GA average of 42.1% and the national average of 44.8%. Populations within the service area having a bachelor degree or higher are 3.33% percent which is lower than the GA average of 9.4% and the national average of 11.2%. Colleges available in the service areas are: Georgia Northwestern Technical College (Catoosa, Walker, Whitfield-Murray Counties), Dalton State College (Whitfield County), Covenant College (Dade County).

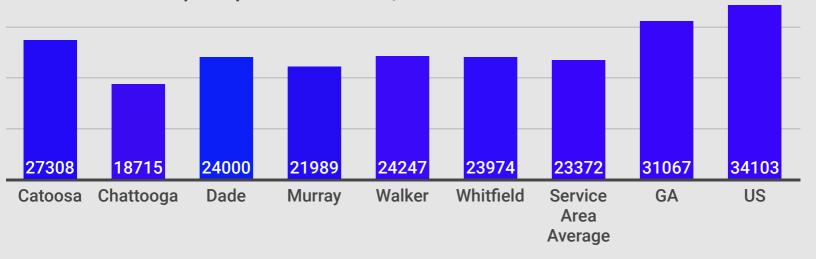


Income and Poverty

Average Median Household Income: amount that divides the income distribution into two equal groups, half having income above the amount, and half having income below the amount: The Average Median Income in the service area is \$39,206 which is lower than the GA median income of \$58,700 and also lower than national median income of \$62,843.

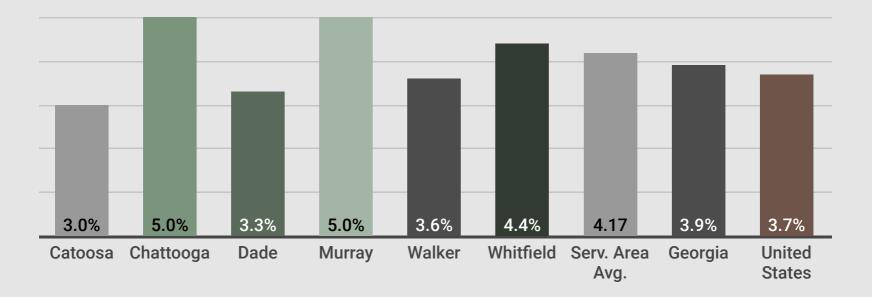


Per Capita Income/Average income earned per person: average income per person in each county of the service area ranges from \$18,715 to \$27,308. The average per-capita income for the service area is \$23,372 and is lower than the Georgia per capita income of \$31,067 and the national per capita income of \$34,103.



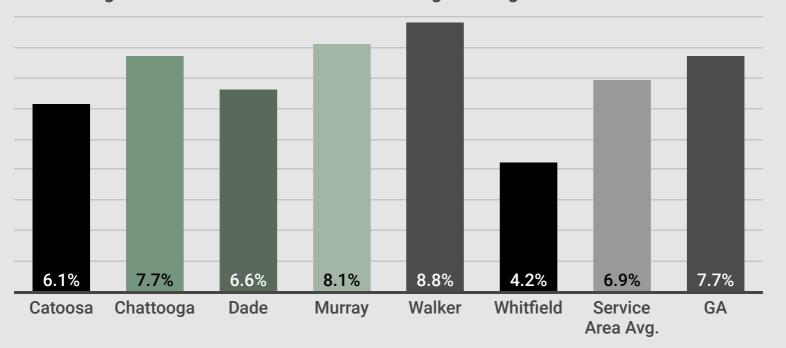
Unemployment

Georgia Kid's Count Data Center reports unemployment rates that vary from 3.0% (Catoosa) to 5.0% (Murray) in the counties served. Our 6 county service area has an average unemployment rate of 4.17% which is higher than the 3.9% unemployment rate for Georgia and higher than the national rate of 3.7%



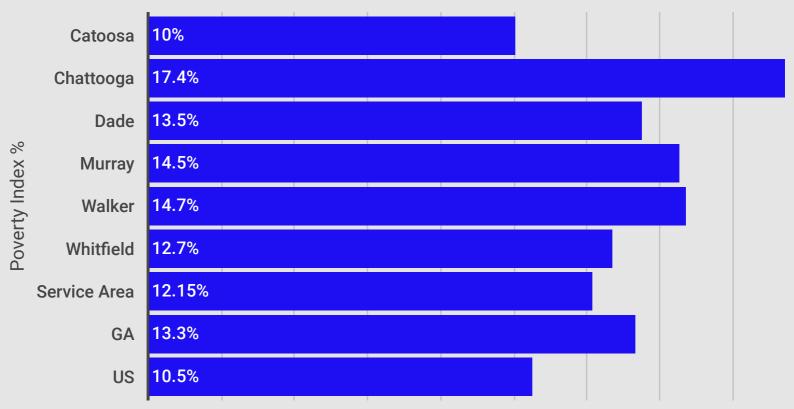
Children Whose Parents Lack Secure Employment

Georgia Kid's Count Center data ranges from 4.2% (Whitfield) to 8.8% (Walker). The service area average is 6.9% which is lower than the Georgia average of 7.7%



Poverty

The poverty rate in the service area ranges from 10% to 17.4%. The average poverty rate for the service area is 12.15% which is lower than the GA poverty rate of 13.3% and higher than the national poverty rate of 10.5%



Data obtained from US Census Quick Facts 2019-accessed Feb. 2021

Children under 6 Years Old: below:	100% Poverty	150% Poverty
Catoosa	813 or 18%	1,510 or 34%
Chattooga	489 or 29%	886 or 52%
Dade	104 or 12%	357 or 41%
Murray	646 or 23%	1,221 or 43%
Walker	1,024 or 23%	1,887 or 42%
Whitfield	2,247 or 27%	3,581 or 43%
Georgia	24%	37%

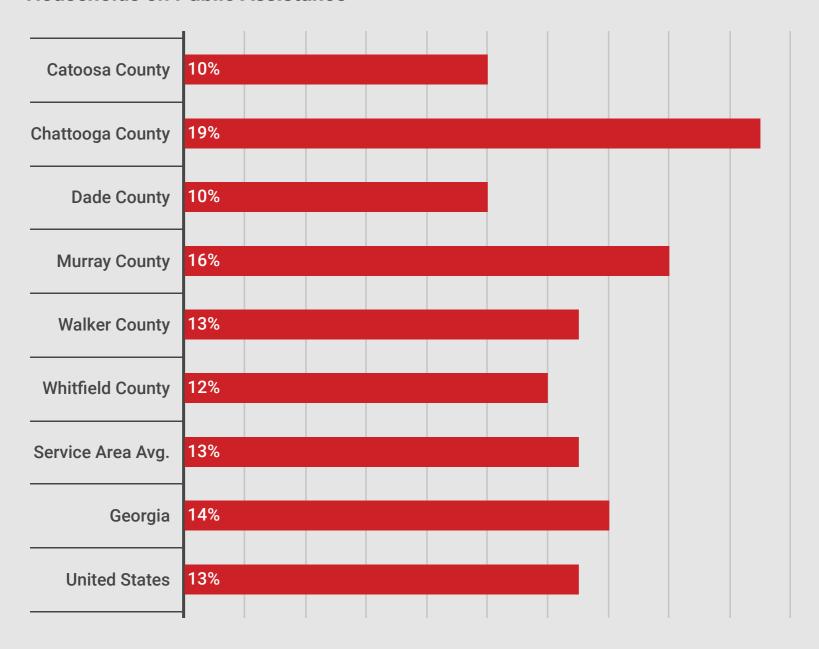
Eligible Infants/Toddlers/Preschool Age children

Estimate of Eligible Children	Catoosa	Chattooga	Dade	Murray	Walker	Whitifled
# of 0-5 year old children	3,708	1,487	811	2,595	3,887	6,764
X Poverty Rate	12%	19.5%	15.2%	15.2%	15.5%	14.2%
Number in Poverty	445	290	123	394	602	960
Divided by # of age groups (1-5 yrs. old)	5	5	5	5	5	5
# eligible by age group	89	58	25	79	120	192
X # of age groups served	2	2	2	2	2	2
# 3 and 4 year old's eligible for HS	178	116	50	158	240	384
X # of age groups served	3	3	3	3	3	3
# 0-3 year old's eligible for EHS	267	174	75	237	360	576

50% of the three and four year old's were served and 33% of the eligible infants and toddlers were served in the service region. This data shows the extreme need for more infant/toddler slots.



Households on Public Assistance

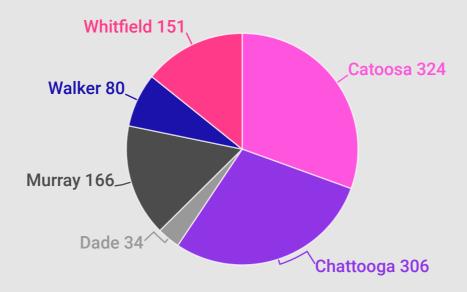


Households on public assistance include federal aid such as Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), Medicaid, PeachCare, Supplemental Nutrition Assistance Program (SNAP), Supplemental Nutrition Program for Woman, Infants, and Children (WIC), and public housing assistance. Percentages range from 10% to 19% of households in the service area. The service area average of 13% is sightly lower than the Georgia percentage of 14% and equal to the United States percentage of 13%.

Housing and Homelessness In Service Area

Homeless Children Under 18 Years Old in Georgia

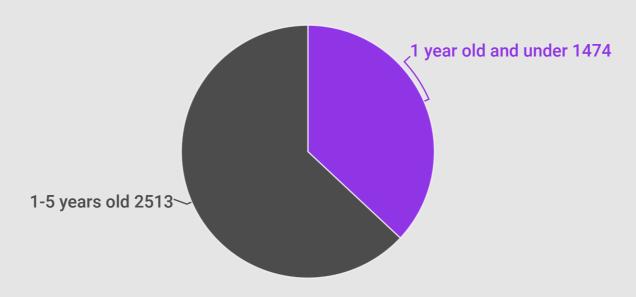
Total Number of Homeless Children in the Service Area counties vary in the number and range from 34 homeless children in Dade County to 324 homeless children in Catoosa County per the definition provided in the McKinney-Vento Homeless Assistance Act,



https://www.gadoe.org/School-Improvement/Federal-Programs/Documents/McKinney-Vento/2019EHCY_DataReport.pdf

Foster Children in Georgia

There are a total of 8,082 foster children in Georgia. 3,987 foster children are under 5 years old.



Health, Dental, Mental Health in Service Area

Health

Georgia has over 300 hospitals/medical centers throughout the state. There are seven hospitals located within our six-county service area, with four of those in Whitifeld County, two in Murray County, and one in Catoosa County. In addition, there are several hospitals located in the Chattanooga, Tennessee area that are within 50 miles of our furthest county and within 10 miles of our closest county; this includes T.C. Thompson Children's Hospital which is well known in the area.

Within our service area, over 600 doctors accept Medicaid and PeachCare for kids. The largest concentration of doctors is located in Whitfield with over 300 and Catoosa with over 22, these range from general and family practitioners to Specialists. In addition, each of our six counties has a local health department. This information would indicate that there are sufficient medical resources available to our families within close proximity. According to the 2019 America's Health Ratings from the United Health Foundation, Georgia is 40th in overall health rankings (1=best/50=worst). The analysis shows that Georgia's challenges are: low percentages of prenatal care before the 3rd trimester and high numbers of uninsured woman. Access to secure and affordable housing, safe neighborhoods, good paying jobs and quality early childhood education are examples of important factors that can put people on a path to a healthier life.

The Georgia Department of Public Health website states "Asthma is a high priority health condition among Georgia children. Nearly 9% of Georgia's children have asthma, and many more are not diagnosed. Asthma is found often among children who live in households with lower incomes. Many of the triggers that cause asthma are found in older housing.

In 2017, there were 2,614 asthma-related hospitalizations among children 0-17 years of age in Georgia. The total cost of asthma-related hospitalizations among Georgia children amounted to \$37.4 million.

Dental

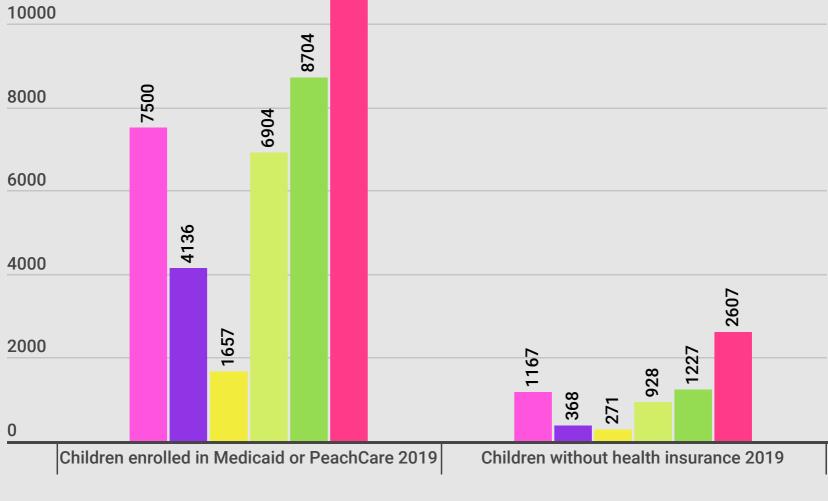
Service area has over 40 dentists available. There has been an increase in the total number of dentists as well as, those who accept Medicaid and PeachCare. In addition, more dentists are seeing children under age 3.

County	# of Dentists	Medicaid or PeachCare accepted	Head Start Payment Accepted	Accepts Children under age 3	Accepts Children under age 5	Accepts Pregnant Moms
Catoosa	7	1	1	1	4	6
Chattooga	8	5	4	1	6	7
Dade	2	2	2	0	2	2
Murray	2	2	2	0	2	2
Walker	4	2	4	0	4	4
Whitfield	22	3	3	4	16	18
Totals	45	15	16	6	34	39

Mental Health

Our six counties are supported by the Region One Mental Health, Developmental Disabilities and Addictive Diseases (MHDDAD) Office. THE MHDDAD Office plans and oversees a network of public mental health, developmental disabilities, addictive disease and prevention services for 25 counties. There is a regional office contact and then all six counties have access to 24 hour emergency assistance. They provide a Georgia Crisis and Access Line, a non-emergency mental health and addictive diseases service line, and a non-emergency developmental disabilities services line. In addition, locally there are 7 other agencies who will provide mental health services. We currently contract with Georgia HOPE and Sharen Narey, Mental Health Consultant, to provide services to our children, families, and staff.





Dade

Murray

Walker

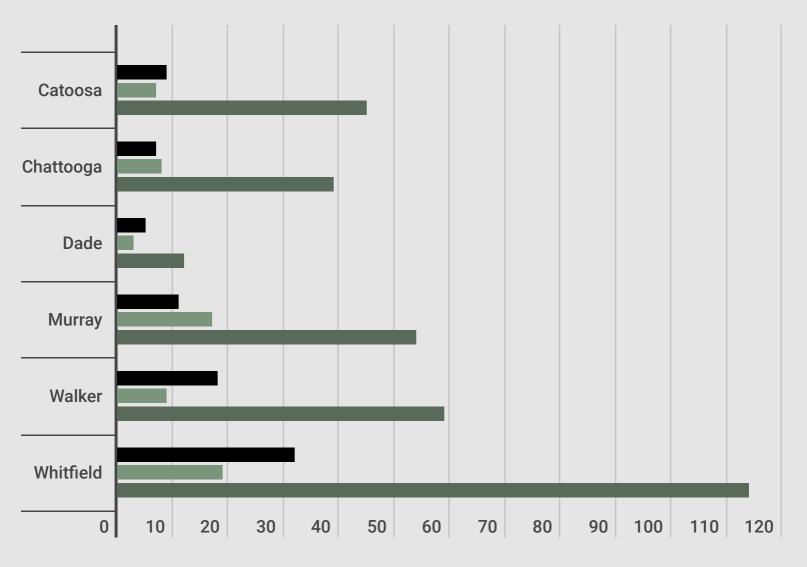
Whitfield

Chattooga

Catoosa

Teen Pregnancy in Service Area Counties (2019)

The state average of teen pregnancies ages 15-17 years old is 11.1; all counties we serve except for Catoosa County are above the state average. The state average of teen pregnancies ages 15-19 is 19.6; all counties we serve are above the state average. According to the National Center for Health Statistics, Georgia's national teen pregnancy rating was 19.7 in 2020.



- Teen Pregnancies, ages 15-17 (2019)
- Teen Mothers giving birth to another child before age 20 (ages 15-19) 2019
 - Teen Pregnancies 15-19 Years Old (2019)

Family Resource Agency of North Georgia Service Area

Service Area

Currently the program is funded to provide Head Start, blended Pre-K/Head Start, Early Head Start, and Childcare Partnership services to 941 children and families in the six northwest counties of Georgia. Currently the program operates 82 classrooms in 26 centers located in 6 counties. The current 941 total funded enrollment slots are divided between 4 separate programs: Head Start (HS) with 453 slots, Blended Pre-K/Head Start with 80 slots, Early Head Start (EHS) with 312 slots, and Childcare Partnerships (CCP) with 96 slots. The slots are divided into the 6 counties as shown in the table below:



	Total Slots	HS Slots	Blended Pre- K/HS Slots	EHS Slots	CCP Slots		
Catoosa	185	101	20	48	16		
Chattooga	90	34	0	56	0		
Dade	66	34	0	16	16		
Murray	74	34	0	24	16		
Walker	205	85	40	64	16		
Whitifeld	321	165	20	104	32		
Total Children	941	453	80	312	96		
Total Classes	82	27	4	39	12		
Total Staff 253	Total Staff 253						

Pre-K/HS at Risk Served in Georgia

	Approx. # of Pre- K Slots	Actual Pre-K Enrollment	Approx. # At-risk Served by Pre-K	Approx. # Served in Head Start
Catoosa	506	494	229	676
Chattooga	242	231	28	384
Dade	132	127	58	148
Mountain View	440	381	276	628
Murray	484	474	263	868
Whitfield	1056	989	575	1764

Data Obtained by Kid's Count Data center 2019

Number of Children and Pregnant Moms on Waiting Lists by County

	1 yr. olds	2 yr. olds	3 yr. olds	4 yrs. olds	5 yr. olds	Pregnant Moms
Catoosa	6	20	28	16	3	0
Chattooga	14	28	26	38	1	0
Dade	6	28	6	5	1	1
Murray	2	10	11	8	0	0
Walker	7	31	23	17	2	1
Whitifeld	11	52	55	24	3	7

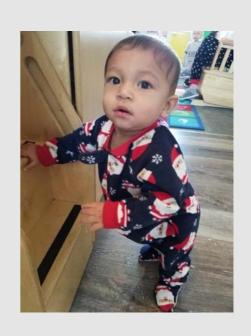
Data Obtained from 2019-20 ChildPlus Report 2025-Enrollment Priority List

Pregnant Moms Served 2019-20

Enrolled 1st Semester	3
Enrolled 2nd Semester	12
Enrolled 3rd Trimester	4
Pre-Natal Health Care	20
Postpartum Health Care	20
Infant Enrolled after Birth	10

















Centers and Family Care Homes in Service Area

	Learning Centers	Serves Infants	Serves Toddlers	Serves Preschoolers	Quality Rated	Family Childcare	Other
Catoosa	16	56%	63%	100%	80%	0	6
Chattooga	6	67%	67%	100%	62%	1	4
Dade	4	100%	100%	100%	38%	2	2
Murray	4	100%	100%	100%	98%	1	1
Walker	13	100%	100%	100%	85%	1	9
Whitfield	17	82%	88%	100%	70%	9	16

Program Enrollment in Service Area

	Kindergarten	Lottery Funded Pre-K	-At Risk Served (Pre-K)	Head Start/Early Head Start
Catoosa	726	470	44%	169
Chattooga	301	194	44%	90
Dade	155	108	31%	50
Murray	427	302	63%	58
Walker	747	375	50%	189
Whitfield	1,443	862	45%	292

Licensed Capacity

	Total Licensed Capacity/Slots	Learning Center Slots	Family Childcare Slots
Catoosa	2,026	2,026	0
Chattooga	414	408	6
Dade	207	285	12
Murray	380	374	6
Walker	1,457	1,451	6
Whitfield	1,968	1,914	54

Race and Ethnicity

PIR 2019-2020	HS	EHS	ССР	Average
Asian	1.31%	0	0	0.44%
Black or African American	8.67%	7.92%	6.8%	7.8%
Native Hawaiian/Pacific Islander	0.16%	0.26%	0	0.14%
White	80.85%	77.57%	89.32%	82.58%
Bi-racial or Multi-racial	8.51%	13.98%	3.88%	8.79%
Other Race	0.49%	0.26%	0	0.25%
Total				100
Hispanic/Latino	20.79%	23.48%	26.21%	
Non-Hispanic/Latino	79.21%	76.52%	73.79%	
Total	100	100	100	

Data Obtained from ChildPlus Archives Report 9803/Accessed April 2021



Head Start Eligible Families Demographic Data

PIR 2019-2020

Percent of Children by Parent's Work Status	Number of families	Average
2 Parent Families in which both parents work	71	32%
2 Parent Families in which only one parent works	129	58%
2 Parent Families in which neither parent works	24	10%
Total	224	100%

Percent of Children by Parent's Work Status	Number of Families	Average
1 Parent Families in which the parent works	219	65%
1 Parent Families in which the parent does not work	118	35%
Total	337	100%
	Number of Families	Average
Total Number of Families Enrolled in Head Start	561	100%

The economy had moderate impact on the percentage of adults who worked in the service region as indicated by the PIR 2019-2020 data and is shown in the data table above. The percentage of Head Start two parent families in which both parents worked is 32%, two parent families in which one parent worked is 58% and in 2 parent families in which neither parent worked is 10%, for single parent families the PIR indicates that 65% of Head Start single parents were employed and the other 35% were not.



Early Head Start Eligible Families Demographic Data

PIR 2019-2020

Percent of Children by Parent's Work Status	Number of families	Average
2 Parent Families in which both parents work	36	34%
2 Parent Families in which only one parent works	59	56%
2 Parent Families in which neither parent works	11	10%
Total	106	100%

Percent of Children by Parent's Work Status	Number of Families	Average
1 Parent Families in which the parent works	117	53%
1 Parent Families in which the parent does not work	104	47%
Total	221	100%

	Number of Families	Average
Total Number of Families Enrolled in Early Head Start	327	100%

The economy had moderate impact on the percentage of adults who worked in the service region as indicated by the PIR 2019-2020 data and is shown in the data table above. The percentage of Early Head Start two parent families in which both parents worked is 34%, two parent families in which one parent worked is 56%, and the percentage in which neither parent worked is 10%. For single parent families, the PIR indicates that 53% of Head Start single parents were employed and 47% were not.



Childcare Partnership Eligible Families Demographic Data PIR 2019-2020

Percent of Children by Parent's Work Status	Number of families	Average
2 Parent Families in which both parents work	18	19%
2 Parent Families in which only one parent works	17	18%
2 Parent Families in which neither parent works	1	.01%
Total	36	38%

Percent of Children by Parent's Work Status	Number of Families	Average
1 Parent Families in which the parent works	43	47%
1 Parent Families in which the parent does not work	14	15%
Total	57	62%

	Number of Families	Average
Total Number of Families Enrolled in CCP	93	100%



The economy had moderate impact on the percentage of adults who worked in the service region as indicated by the PIR 2019-2020 data and is shown in the data table above. The percentage of CCP two parent families in which both parents worked is 19%, two parent families in which one parent worked is 18%, and two parent families in which neither parent worked is less than 1%. For single parent families, the PIR report indicates that 47% of Head Start single parents were employed and 15% were not.

Parent Education Level-HS, EHS, and CCP

Job Training/School at Enrollment	Head Start	Early Head Start	Childcare Partnerships
Less than High School	119	87	19
High School Graduate/GED	401	194	50
Associate/Vocational/Some College	76	37	20
Advanced or BA Degree	18	10	4

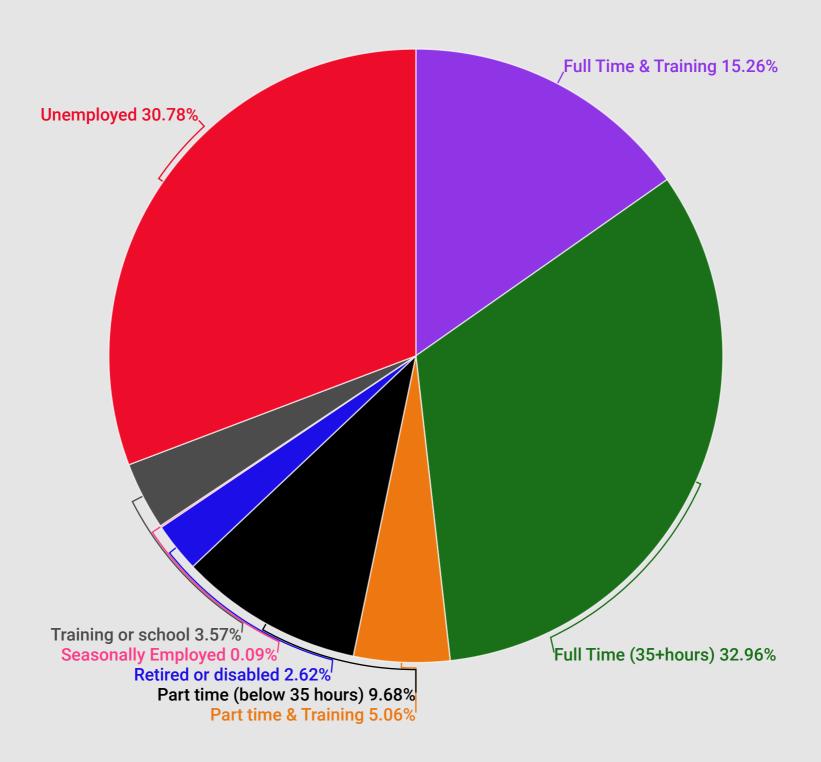
Employed/Attending Job Training/School at Enrollment/1 Parent Family

	Head Start	Early Head Start	Child Care Partnerships
Parent/guardian employed	217	212	43
Parent/guardian in job training/school (GED, AS, BA, Advanced	79	94	18
Parent/guardian not employed (retired, disabled, unemployed, job trng./school	143	68	14

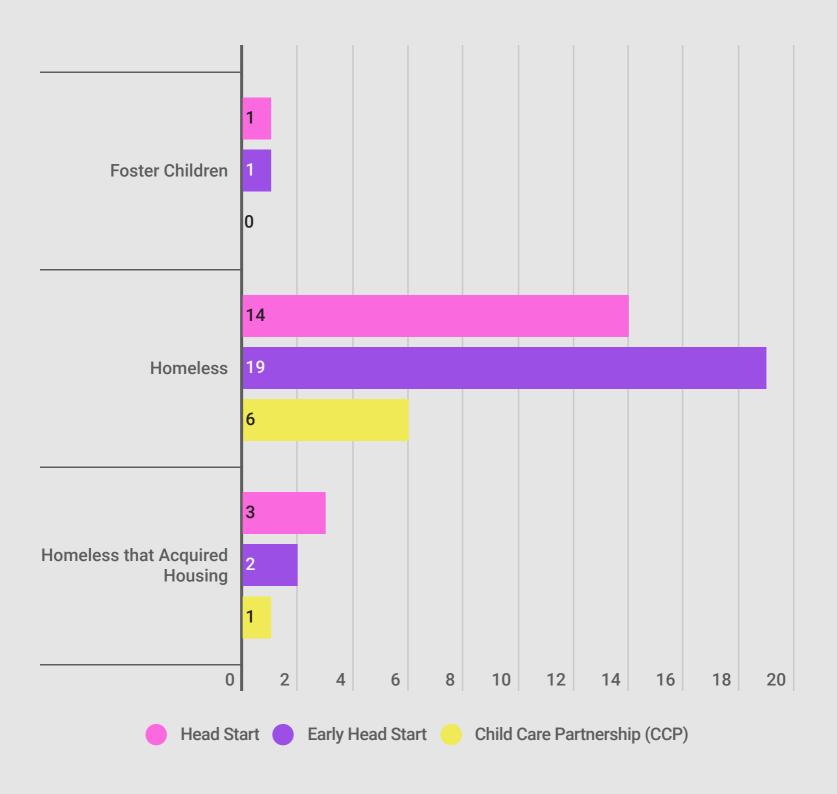
Employed/Attending Job Training/School at Enrollment-2 Parent Family

	Head Start	Early Head Start	Child Care Partnerships
1 parent/guardians employed	153	75	17
2 parents/guardians employed	75	25	18
1 parent in job training or school (GED, AS, BA, or Advanced)	63	26	10
2 parents in job training or school (GED, AS, BA, or Advanced)	22	9	2
2 parents unemployed (retired, disabled, unemployed, job trng./school	25	11	1

Work, School, and Training Schedules of Parents



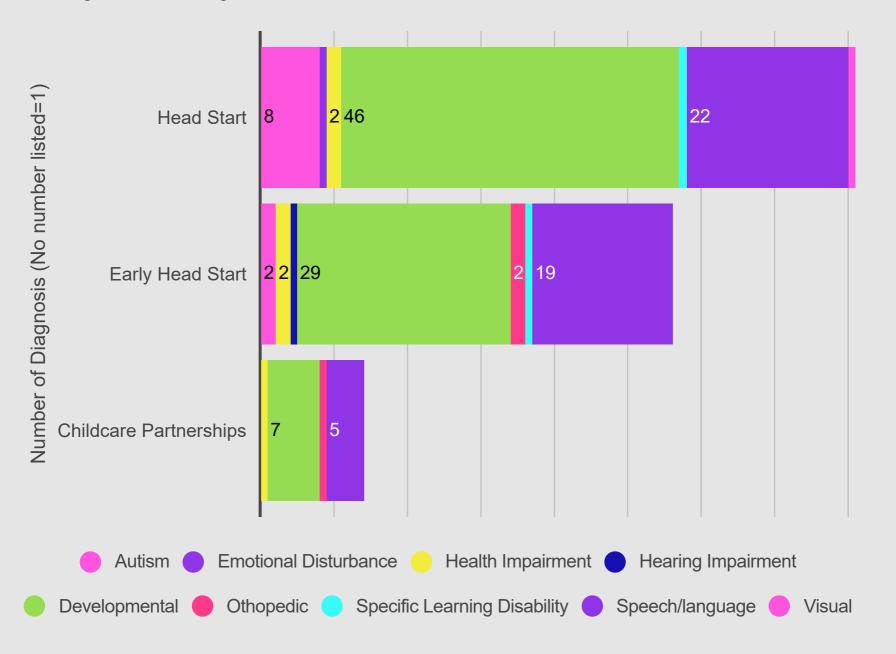
Homeless and Foster Children Served

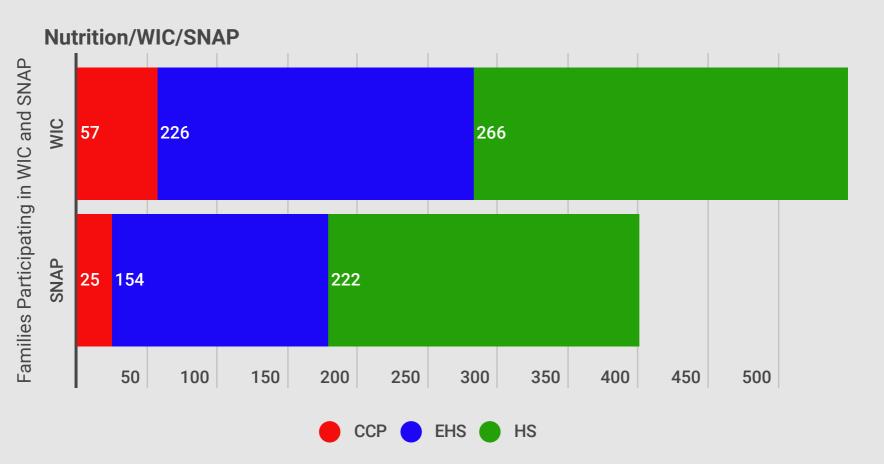


Disabilities

The program has made a strong commitment to children with special needs. The agency has exceeded the requirement to have at least 10% of enrollment with a diagnosis at some point during the year. During the 2019-2020 year, we had an annual total of 525 enrolled in Head Start and 60 or 11% with a diagnosis. In Early Head Start, the agency had an annual total of 351 enrolled and of those 46 or 13% had a diagnosis. In our CCP classes the agency had an annual total of 114 enrolled and 11 or 10% with a diagnosis. The program wide total of enrolled children with a diagnosis was 11%. Recruitment efforts and inclusive classrooms have been outstanding at welcoming and providing services to children.

The state of Georgia also develops a plan for services to undiagnosed children, aged 3 years old and older, potentially needing a diagnosis. This is labeled "Response to Intervention" and they determine if a child is disabled or just needing enrichment through those interventions, evaluations, and services.





The chart above shows the number of families of children attending the program who receive WIC and/or SNAP. In an effort to educate families about the importance of nutrition, a newsletter developed by Primary Healthcare titled "Nutrition and You" is shared with staff and families. The newsletter covers a variety of nutrition topics, healthy tips, and recipes. Information/Links are provided on the agency web page at https://www.fragahs.com/that parents can use as a resource: "Fruit & Veggies Matter" sponsored by Produce for Better Health includes recipes that are child and budget friendly. "My Plate" sponsored by the USDA has healthy recipes, calorie counters, food information, daily food planning, dietary guidelines, and eating healthy on a budget. The classrooms utilizes nutrition resources such as "I am Moving, I am Learning" and implements nutrition activities into lesson plans/classroom activities.

















Family Surveys

















Family Survey Results:

Participating Families:

Survey Monkey was used to gather information from families about our program. 850 surveys were distributed and 805 responses were received. The families are given the opportunity to express opinions in a variety of areas that help to improve the services we provide.

In the 2020-2021 school year, the majority of surveys indicated the services provided are excellent or satisfactory. The highest score for an area needing improvement was, "How would you rate how well the schedule meets your needs?" 6.37% indicated this was an issue.

The main results were:

*Question-Our goal is to provide a safe and learning filled classroom environment with staff who are concerned about each child. Tell us how well you think we did on accomplishing that goal?

99% scored this as excellent or satisfactory.

*Question-Regarding the process for enrolling your child in this program, how would you rate your experience?

98% scored this as excellent or satisfactory.

- * Question-In regard to how much learning or progress your child has made this year in the program, how would you rate your satisfaction level?

 94% scored this as excellent or satisfactory.
- * Question-How would you describe the communication between the staff and parents? 97% scored this as excellent or satisfactory.
- * Question-How satisfied are you with your overall experience with the program? 98% scored this as excellent or satisfactory.

* Additional Comments:

Children attend class every day (instead of staggered or distance learning/COVID), extended hours, transportation.

















Program Staff Surveys













Program Staff Survey Results:

Microsoft Forms Surveys were used to gather information from program staff. Family Service Specialists (FSS) work with families throughout the year as they develop Family Partnership Agreements, assist parents in meeting their personal, family goals, and make referrals for other needed services; they can gain a good perspective of the needs of our families and communities. In addition, the Center Managers (CM) and Center Supervisors (CS) often build strong relationships with families. Therefore we requested information from Family Service Specialists, Center Managers, and Center Supervisors in a variety of areas.

The main results were:

Communities with greatest number of Head Start eligible children?

Summerville, Linwood, Rossville, Lafayette, Trenton, Trion, Chatsworth City, Spring Place, Eton, Downtown Ringgold.

What are ways that Head Start services to families could be improved?

Transportation and extending hours

Challenges for families?

Transportation, hours of service, COVID Pandemic

Biggest challenges with parent involvement?

Work, COVID Pandemic, Stress/no time, transportation issues

What are strong points of Head Start services provided?

Services for Special Needs and Babies Can't Wait

Diapers, wipes, meals provided during COVID pandemic.

Vision and dental screenings

What are strong points of families receiving Head Start services?

Patient, understanding, and cooperative during COVID Pandemic

Attendance and bring children on time

Flexibility and communication with staff

Use Head Start services to work and provide for family

Analysis

The information gathered from this community assessment is analyzed in order to:

- identify community needs and make decisions regarding services provided by Head Start and Early Head Start.
- determine where services for Head Start and Early Head Start should be located and model options that would best serve the needs of the families.
- identify service gaps in the communities.
- identify issues that can be addressed in other groups, such as the County Collaborative Councils.

This process has allowed Family Resource Agency of North Georgia to reflect and re-examine purpose and goals to insure services provided meet the needs of children and families in the communities. In conclusion:

1. Head Start families have many needs that the program will continue to address. These needs are education, employment skills, setting and achieving goals, and quality childcare so parents/guardians can attend school, job training, or work.

Additionally, in order to provide services to Spanish-speaking families, Family Resource Agency will continue to give priority in hiring practices to bilingual staff. Hiring bilingual staff ensures that children's developmental screenings and assessments are completed in the native language as needed. Families also receive assistance, as necessary, when communicating with other community agencies and service providers. Bilingual classroom staff support children transitioning to English-speaking environments without eliminating the children's native language.

2. In some of the counties, data indicates close to 100% of eligible children are being served through HS and Pre-K. There is no need to expand Head Start services in these areas. However, additional services are needed for pregnant woman, teen moms, and infants/toddlers (birth-3) as there are eligible infants/toddlers not receiving services and high pregnancy rates in the 15-19 year old.

In addition, childcare costs for very young children are out of financial reach of many families in the service areas. Family Resource Agency will continue to work with the public school system, collaborative agencies, and other community partners to determine available funding sources and programs designed to assist young children.

3. Based on information from the program staff and families is a need for children to resume attending the classroom everyday (rather than staggered days/distance learning), extended hours and transportation.

Resources:

CDC https://www.cdc.gov/

US Census Bureau Quick Facts https://www.census.gov/

American Community Surveys https://www.census.gov/programs-surveys/acs/

Kid's Count Data Center https://datacenter.kidscount.org/data/#USA/1/0/char/0

ECLKC https://eclkc.ohs.acf.hhs.gov/

Georgia Department of Public Health https://dph.georgia.gov/

Georgia Department of Education http://www.gadoe.org/

https://www.gadoe.org/School-Improvement/Federal-Programs/Documents/McKinney-Vento/2019EHCY_DataReport.pdf

GEEARS: Georgia Early Education Alliance for Ready Students, http://geears.org/