

ANNUAL REPORT

Head Start

2025-2026



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Introduction

MOC Child Care and Head Start are both federal and state funded programs that promote school readiness and provide quality comprehensive services to enrolled children and families. Head Start Preschool and Early Head Start services are provided in Northern Worcester County.

During the 2025-26 school year MOC operated 6 facilities for Head Start Preschool and Early Head Start. There were 19 preschool classrooms, and 3 Early Head Start classrooms. In addition to Head Start and Early Head Start programming, Moc operates child care programming in center-based classrooms, family child care homes and a large school age center.

Early Head Start classrooms serve children 15 months to 3 years of age in groups of 8 children. Our Head Start classroom serves children ages 3 to 5 years of age in group sizes of 17 to 18 children. Our full day preschool and Early Head Start classrooms have 3 teachers and part day rooms have 2. Floater Aides are assigned to the larger sites for additional support.

Community Needs Assessment

A full community needs assessment was completed in 2024. An update was completed in 2026. Below is a summary of any significant changes:

Summary:

- Population: All three communities continue slow, steady growth
- Housing: Ongoing affordability pressures and production planning across the region.
- Diversity: Increasing linguistic and cultural diversity across communities.
- Early Education: There was not a significant increase in early education programming.
- Special Needs & ASD: K–12 Students with Disabilities comprise 24% of enrollment in each district (Fitchburg 24.0%, Leominster 24.1%, Gardner 24.8%); ASD identification is rising nationally and statewide.
 - Families have more access to free public transportation services.
 - Families are in need of full time early childhood programming

Program Goals

New goals were developed for the 25/26 school year. It is the first year of the five-year grant. Goal 1 - Health and Safety MOC Child Care and Head Start will implement a system of health and safety practices that ensure children are kept safe at all times.

Goal 2 - Wellbeing/Healthy Communities MOC Child Care and Head Start will promote wellbeing for children, families, and staff.

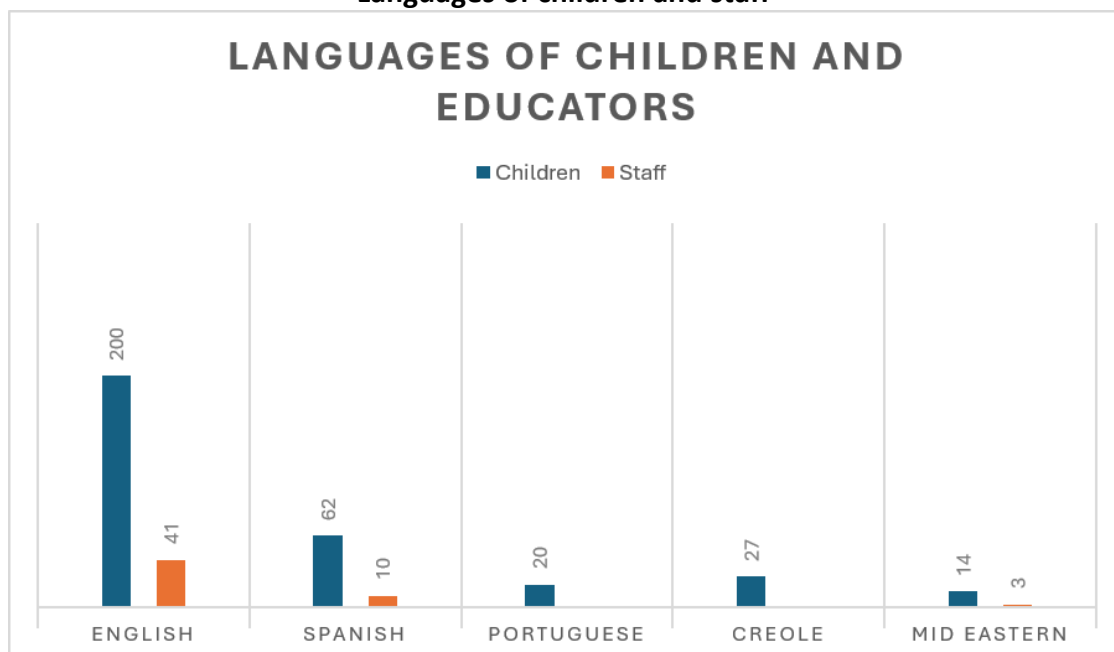
Goal 3: Positive, Supportive Work Environment, MOC Child Care and Head Start will ensure a positive and supportive work environment that encourages employees to stay with the program.

Goal 4: Social emotional development MOC Child Care and Head Start will support children's social emotional development and reduce undesirable child behaviors by building the capacity of the adults in a young child's life.

Teacher Credentials

There are currently 55 educators (46 Head Start, 9 Early Head Start) in our program. Qualifications include: 7% master's degree, 44% bachelor's degree, 35% have an associate degree, and 7% have a Child Development Associate. An additional 7% are enrolled in either a CDA program or are pursuing a degree. Head Start is utilizing Early Learning Coaches to complete program orientation with each newly hired staff and to follow them throughout their first year of employment to train them in curriculum, assessment, classroom routines and management and our child data system. This is above the on-going regular observations and feedback provided by the on-site education managers.

Languages of children and staff



Locations

Centers are in Fitchburg, Leominster, Gardner, Winchendon, and Clinton. Family Child Care Homes are in Fitchburg, Leominster, Ashby and Gardner. Early Head Start in Leominster and Gardner.

Actual Enrollment (% of Funded Enrollment)

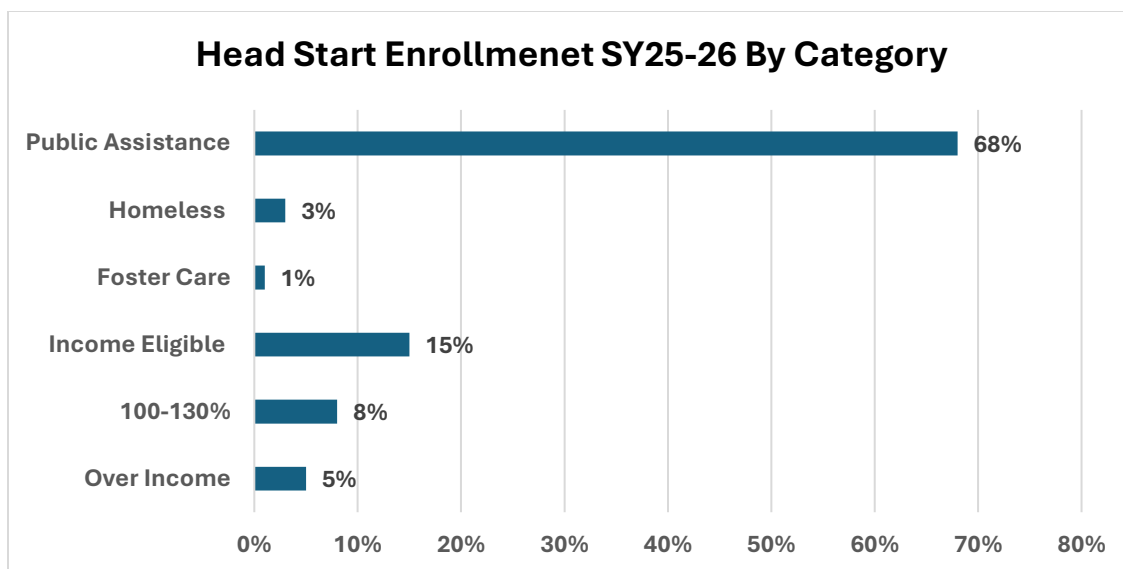
The program began with 92% enrollment in September 2025 for Head Start Preschool, with a total of 282 children out of the 308 contracted slots. The school year ended with 99% enrolled; however, the average monthly enrollment percentage was 97% for the 2025-2026 school year.

For Early Head Start (EHS), the program began and ended with 100% enrollment with 24 slots filled out of the 24 contracted slots. The average monthly enrollment percentage was 100%.

The yearly attendance average was 84% for Head Start Preschool and 87% for Early Head Start.

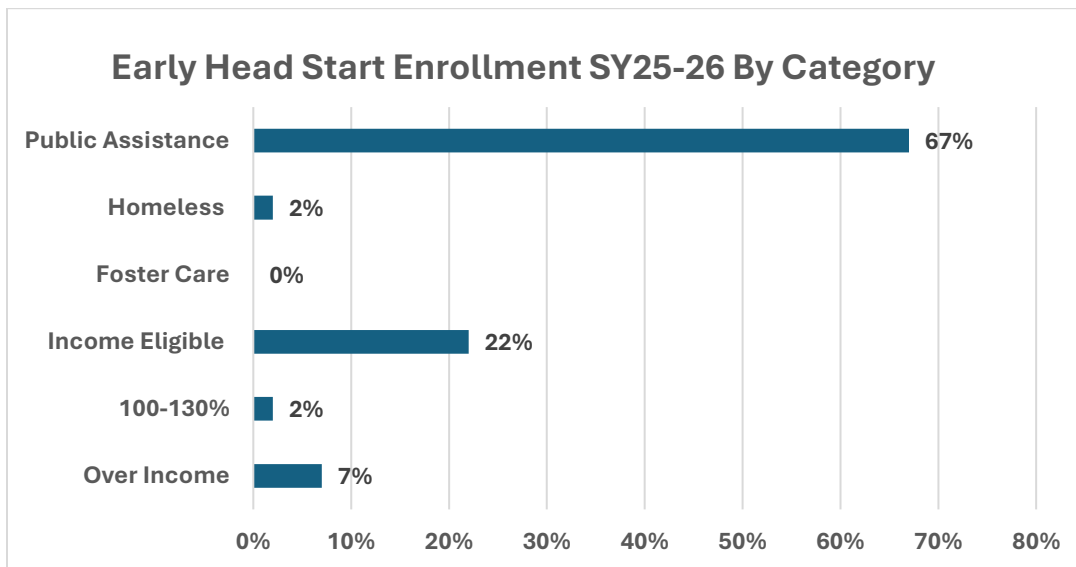
Children Eligible and Children Served

Head Start accepted and serviced 333 children of which a total of 226 children were considered as being Automatically Qualified for OHS because they receive Public Assistance such as SSI, TANF and/or SNAP benefits. Other children who were automatically qualified for OHS were 10 as Homeless and 4 as Foster Care. The remaining 51 were considered income eligible, 25 were in the 100-130% income range, and 17 were over income.



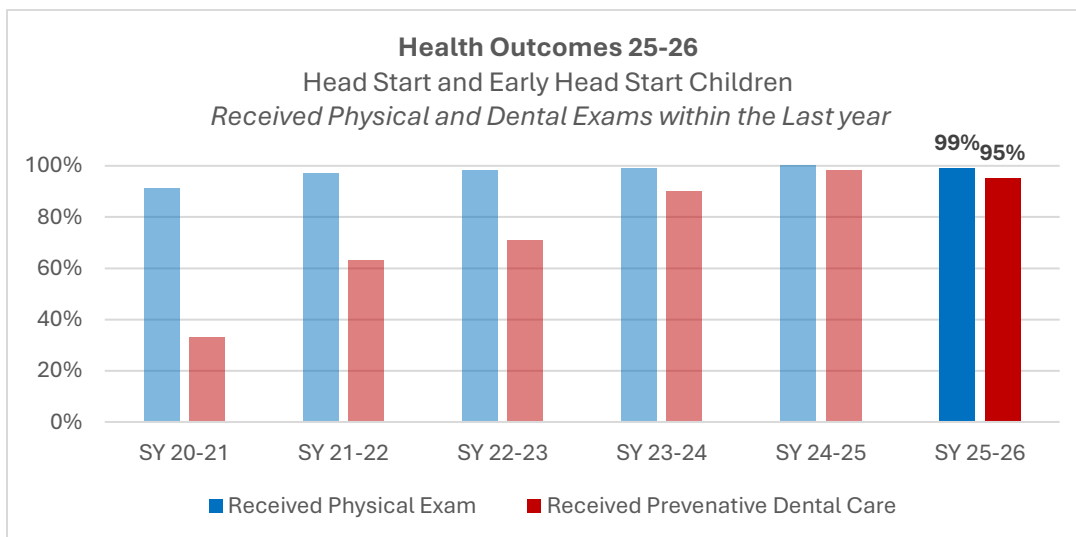
In the EHS program a total of 45 children were accepted, of which a total of 30 children were considered as being Automatically Qualified for OHS because they receive SSI, TANF and/or SNAP benefits. One other child was automatically qualified for OHS because they were

in Homeless and none were qualified as Foster Care. Ten children were considered income eligible; 3 children were over income, and one was in the 100-130% income range.



Medical and Dental Exams

99% of children enrolled in Head Start and Early Head Start received a medical exam within the last year, and 95% of enrolled children received preventative dental care within the last year. Our dental partner Caring for Kids provided onsite preventative dental care to 108 enrolled children this year. Family service and health staff continue to assist families with obtaining health insurance, finding medical and dental homes, and staying up to date with immunizations, exams, and follow-up care.



Mental Health

MOC Child Care and Head Start uses a multidisciplinary approach to promote the mental health and social-emotional development of all children by building nurturing and responsive relationships and creating positive learning environments. Families and staff are provided with information to improve their understanding of mental health and to access mental health interventions or supports, if needed. The Second Step social-emotional curriculum is used to help children develop these important school readiness skills.

The Mental Health Specialist is a licensed mental health clinician that serves as the program's early childhood mental health consultant. The Mental Health Specialist works to build the capacity of adults in a young child's life (educators and parents) to strengthen and support the child's mental health and social and emotional development. The Mental Health Specialist conducts general classroom observations, child-specific observations, and makes referrals for further evaluation or services. 36 referrals were placed for child specific observations, 26 of these observations have been completed, and individual guidance provided to the educator and family on the child's needs.

MOC CCHS continues to facilitate access to additional mental health resources and services. Our program has memorandums of understanding with five mental and behavioral health providers in our service area, including MOC's Counseling Center. 17 children have been referred externally for therapeutic services; eight of those children have received mental health services. Children's behavioral health needs continue to surpass the available community resources. When families are willing to engage with mental health services, they often experience long wait times for evaluations and therapy. These unmet mental health needs often correlate with child behavior that can pose a challenge to classroom management. The Mental Health Specialist and Early Learning Coaches provide behavioral intervention support to the classroom educators and children's families. These internal supports are essential to promoting child safety and social emotional development during the lengthy process of connecting the child and family to needed behavioral and mental health supports.

Program Governance

Program Governance is a formal structure established by Head Start and Early Head Start agencies for oversight and making operational decisions for quality services for children and families. MOC's governing body, the Board of Directors (BOD), has a legal and fiscal responsibility to administer and oversee the Head Start and Early Head Start program. The Policy Council (PC) is responsible for the direction of the Head Start and Early Head Start program. These entities are working in conjunction with the Management Staff to ensure that we are following federal and state laws, policies and procedures are in place, and that day-to-day services are delivered with quality. The BOD is comprised of community members with the expertise and knowledge to make informed decisions in areas such as fiscal management and early childhood education and have a licensed attorney. The Policy Council is comprised of parents and community members who assume specific responsibilities designated by Head Start Performance Standards, such as recruitment and enrollment, budget planning, and parent

engagement activities. 51% of the Policy Council membership must be current parents. Shared Governance practices include having 2 Policy Council representatives serve on the Board of Directors and assist in communication between Board, Policy Council, and staff. An impasse policy is in place to resolve internal disputes in a timely manner.

Budget

Year	Federal or State	Description
2024-20245	Federal	Department of Health and Human Services \$6,286,531.
2024-2025	State	Massachusetts Head Start State Supplemental Grant \$651,700.
2024-2025	United Way	\$25,000.
2024-2025	USDA	\$367,000.
2024-2025	State	C3 funding \$1,051,090.80
Year	Federal or State	Description
2026-2027	Federal	Department of Health and Human Services \$6,286,531.
2026-2027	State	Massachusetts Head Start State Supplemental Grant \$651,700.
2026-2027	United Way	\$25,000.
2026-2027	USDA	\$367,000.
2026-2027	State	C3 funding \$1,051,090.80

Results of Financial Audit

The most recent financial audit for the program contained neither findings nor non-compliances for the Head Start program.

Results of Federal Review

During the monitoring event that occurred in February of 2024, the OHS monitoring team observed several strong practice(s). There were 2 areas identified as non-compliant. The dental exams completed were below expectations and there was one non-compliance in the human service area. Both areas of non-compliance were resolved promptly.

Classroom Assessment Scoring System (CLASS)

The Office of Head Start's minimum expectations for all Head Start grantees regarding the quality of the classroom learning environment are: Emotional Support-5, Classroom Organization-5, and Instructional Support-2.3.

M.O.C. completed 2 Class Observations by an outside reliable rater during the school year. The scores exceed the Office of Head Start's minimum expectation as seen below:

Emotional Support: 6.38 Classroom Organization: 6.00 Instructional Support: 5.75

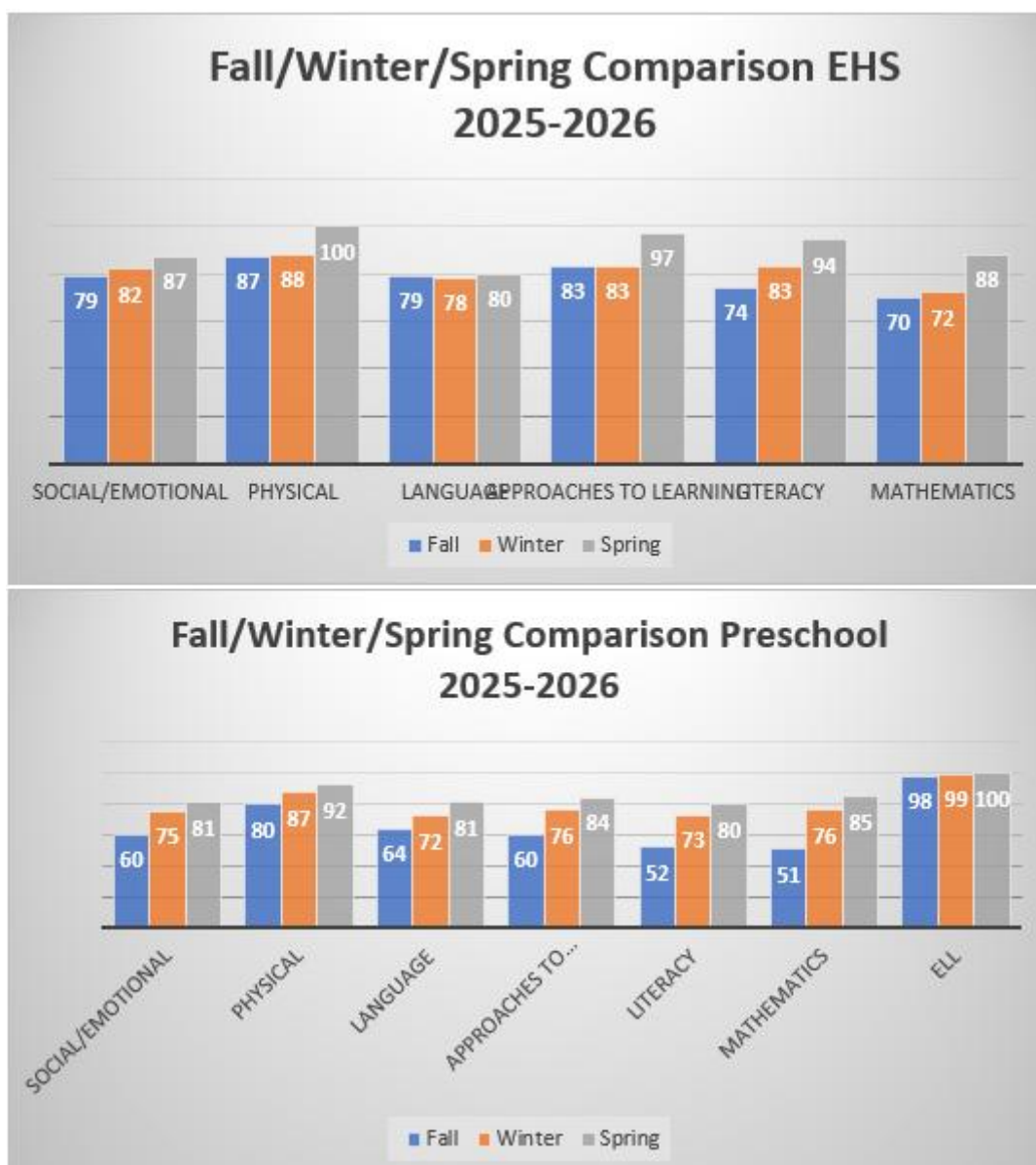
Curriculum

Classrooms use *The Creative Curriculum for toddlers and preschoolers* to support children's development and learning. Teachers have access to digital curriculum resources that provide study topics to explore over time with children. The program uses this curriculum to develop lesson plans and small group activities that are individualized according to each child's developmental progress. All children's progress is tracked using the Smart Teach Assessment system aligned with the *Head Start Early Learning Frameworks* and *MA Early Learning Framework for toddlers and preschool-aged children*.

As a secondary curriculum to support social and emotional development, our program implements the *Second Step Early Learning Program*. This curriculum program teaches preschool-aged children core social-emotional and self-regulation skills, including executive function skills, skills for learning, empathy, emotion management, problem-solving skills, friendship skills, and transitioning to kindergarten. In addition to the Second Step Early Learning program to further address the increased social emotional needs of our enrolled students, our program participates in the *Pyramid Model*. The *Pyramid Model* is a comprehensive, multi-tiered framework of evidence-based practices that promotes the social, emotional, and behavioral development of young children. The emphasis of this framework is to support all children at the universal level, thereby decreasing the need for more intensive intervention. The *Pyramid Model* represents a comprehensive effort to provide teachers, caregivers, and families with the tools and strategies needed to promote and support positive behavior, prevent challenging behavior, and address the social needs of all young children.

School Readiness Skills

Our school readiness plan includes how we assist with preparing children, parents, schools, and the community in improving outcomes for children. We developed this plan with input from local public schools, parents, and members of the MOC Board and Policy Council. Based on our outcomes data, our focus is Language and social emotional skills. The charts below indicate the progress of children's school readiness skills from fall, winter, and spring.



Transition to Kindergarten

Our centers sponsor on-site Kindergarten registration for children transitioning into the public school system. Two sites took a field trip to the Public Schools to visit the kindergarten classrooms and meet the teachers. Another site hosted public school students on-site who presented a skit to our students about entering kindergarten. Two sites hosted public school personnel to conduct on-site kindergarten screenings with all children entering kindergarten this fall. With parental permission, pertinent information such as progress reports and health records, including physical health, mental health and disabilities, are sent to the child's school before the fall. Both education and family service staff worked together with parents to ensure registrations were completed. With parental permission, Education Specialists engage with

public school staff to share information and suggestions on transitioning children to ensure a smooth entrance into public school.

Transition plans for Early Head Start children begin 6 months before moving into Head Start or other early childhood programs. Program staff meet with parents to discuss the child's current progress and what the transition plan is; children complete a classroom visit, and pertinent information is shared (with parent's permission) between educators or other receiving programs to support a seamless transition.

Parent, Family, and Community Engagement

MOC Child Care and Head Start staff recognize that strong partnerships between staff and families are rooted in mutual respect. Building positive relationships plays a key role in supporting family well-being, strengthening parent-child connections, and promoting continuous learning and development for both parents and children.

The Head Start Parent, Family, and Community Engagement Framework is integrated into both Head Start Preschool (HSP) and Early Head Start (EHS) through activities such as home visits, parenting classes, financial literacy education, leadership opportunities, father engagement, family literacy initiatives, school readiness efforts, and community connections.

Our staff connect with families daily during drop-off and pick-up times and communicate in ways that best meet each family's needs. Whenever possible, they speak with families in their preferred language or use interpreters to ensure families feel comfortable sharing personal information in a safe and supportive environment. Staff work one-on-one with families to address individual and family needs, while also encouraging participation in events and making thoughtful efforts to engage those who would benefit most.

Staff presented the *Positive Solutions for Families* curriculum, which focuses on building children's social-emotional skills, understanding challenging behavior, and using positive parenting strategies. Four sessions replaced regular parent meetings, with some sites offering both in-person and virtual evening options. About 60 of 220 invited families participated, resulting in a 27% participation rate. Family Services staff followed up with those who did not attend by providing one-on-one support and sharing materials for those who needed it. Families completed pre- and post-tests as part of the program. In the pre-test, parents identified challenges such as maintaining routines, aligning parenting approaches, and managing multiple children's behaviors. Many expressed a need for more patience and support in addressing strong emotions. Post-test results showed improvement, with no parents selecting "disagree" or "strongly disagree." Between 90% and 95% reported a better understanding of routines and how to respond to challenging behaviors. Overall, families valued the opportunity to learn together, connect with others, and gain practical tools. Many found strategies such as getting on their child's level, using eye contact, increasing praise, and applying Second Step and Backpack Connection resources especially helpful.

Staff provide families with opportunities to also participate in other social groups and/or evidence-based curriculums with our partners such as the Family Resource Center, the Spanish American Center and House of Peace & Education Inc (HOPE). Curriculums such as Father's Support Groups, Women's Wellness Café, Parenting Journey and many more. Families are encouraged to attend the ones that are right for them. Monthly Parent Meetings are held at each site, many of which include visits from our partners. Topics for our Parent Meetings are guided by parent interest and parent needs.

The Parent Satisfaction Survey for 2025-2026 was given to all families. Families had the option to select a response of All the Time, Most of the Time or Sometimes to the questions shown in the graph below. Most of the survey responses selected the option of "All of the Time." Overall, families identified that they felt their child was safe and were in an environment where their child could learn, have fun, and have a meaningful connection with at least one staff member. These results reflect how well staff connect with families and provide positive family engagement. The data can be seen in the chart below as well as the word cloud that was created using the positive feedback provided by parents at all sites.

