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Step Forward Public Comment on Proposed Rule: Reducing Federal Burden for Head Start Programs

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Office of Head Start
Administration for Children and Families
U.S. Department of Health and Human Services

Head Start works because it does more than prepare children for kindergarten. It supports the whole family. It helps children get the health, developmental, nutritional, and social-emotional support they need while giving parents trusted partners as they work toward greater economic stability. For many families, Head Start also makes it possible for parents to pursue an education, participate in job training, enter or remain in the workforce, and build a stronger economic future for their families. Those benefits extend beyond the individual household. When parents can work, build skills, and increase their earning potential while their children are safe, supported, and learning, Head Start strengthens communities and contributes to the local economy.

That comprehensive approach is not a burden. It is the work.

Step Forward appreciates the opportunity to comment on the proposed rule *Reducing Federal Burden for Head Start Programs*.

We welcome efforts to eliminate unnecessary paperwork, duplicative reporting, and requirements that consume staff time without improving services. Local programs also need reasonable flexibility to respond to the communities they serve.

Our concern is that several provisions in this proposal go much further. They would reduce or remove federal requirements tied directly to staffing, family engagement, health, mental health, oral health, nutrition, and the infrastructure needed to operate a safe and accountable Head Start program.

There is an important difference between reducing unnecessary process and reducing the people, services, and protections available to children and families. There is also a difference between reducing paperwork and reducing the people and services available to children and families.

Step Forward is the State of Ohio's designated anti-poverty agency for Cuyahoga County. We have served this community since 1964, and Head Start has been part of our work for generations. Our mission is to propel educational attainment and economic self-sufficiency for multiple generations throughout Cuyahoga County.

During the 2024-2025 academic year, Step Forward Head Start and Early Head Start served 2,040

children and 1,915 families, with 99 percent of enrolled children meeting income-eligibility requirements.

Our work goes far beyond enrollment. During the year, 1,866 children received at least one well-child check, 1,871 received at least one immunization, and 1,126 completed at least one dental exam. We also provided 76,033 breakfasts, 86,422 lunches, and 67,790 snacks.

We saw strong developmental outcomes as well. All infants from birth to age one met or exceeded expectations in early thinking skills, and all children ages one to two met or exceeded expectations in cognitive development. Among children ages three to four, 94 percent met or exceeded expectations in early math, 86 percent in cognitive development, and 88 percent in early literacy. By the end of the academic year, 802 children successfully transitioned to kindergarten.

Those are the results behind our enrollment number.

We want more children to have access to Head Start. We cannot measure progress by the number of children who walk through the door if we weaken what is waiting for them on the other side. Every child who enters Head Start deserves the quality, support, and comprehensive services that make these outcomes possible.

Administrative Cost Cap

Step Forward strongly opposes reducing the administrative cost cap from the current 15 percent to 5 percent. Head Start programs operate under extensive requirements related to compliance, monitoring, fiscal oversight, data management, staff development, program evaluation, and continuous quality improvement. A 5 percent cap is not a workable standard for a program as complex and highly regulated as Head Start.

Head Start cannot operate on classroom staff alone. Teachers and family service workers need clean and safe buildings, functioning technology, classroom supplies, qualified employees, accurate payroll, reliable data systems, timely communication with families, and strong fiscal oversight. They need people behind them making all of that happen.

That means custodial and facilities staff keeping centers clean, safe, and operational. It means Information Technology staff maintaining systems and protecting sensitive child and family information. It means Human Resources recruiting, screening, hiring, and supporting employees. It means Finance and procurement making sure classrooms can get the materials, equipment, repairs, and services they need while properly accounting for federal funds. It means Communications staff helping programs reach eligible families, promote enrollment, and keep parents informed. It also means the people responsible for data, compliance, governance, contracts, audits, insurance, monitoring, program evaluation, and continuous quality improvement. Many of these employees work in the background, but their impact is felt in every classroom, every day.

Consider something as ordinary as a heating problem on a January morning in Cleveland. Keeping that center open safely may require Operations and Facilities to respond, Finance and procurement to help authorize and pay for an emergency repair, staff to communicate with families, and program leadership to determine whether and how children can safely be served. None of those employees is teaching the lesson that morning. Every one of them is helping make that lesson possible.

The same is true when a teacher needs classroom materials, an employee needs technology support, a position needs to be filled, a family needs urgent information, or a building needs a repair. A 5 percent administrative cap does not make any of that work disappear.

The Department estimates current Head Start administrative spending at approximately 11.2 percent and projects a roughly \$754 million annual reduction in allowable administrative expenditures under the proposed cap. The significance of those figures is not simply the amount of money involved. It is the scale of the operational change programs would be expected to absorb.

If programs cannot maintain enough administrative and support capacity, the work will move somewhere else. Program directors will do more of it. Education staff will do more of it. Family service workers will do more of it. That takes their time away from children and families. Moving administrative work to frontline employees does not eliminate administrative burden. It simply moves the burden.

There is also a basic accountability issue here. Head Start programs are expected to protect federal dollars, maintain strong financial controls, safeguard confidential information, maintain safe facilities, recruit and screen employees, monitor program quality, evaluate performance, and demonstrate results. Those responsibilities do not disappear because the allowable administrative percentage changes. HHS should want grantees to have the organizational capacity to do those things well.

Reducing unnecessary bureaucracy can create efficiency. Reducing the people and systems needed to run the program creates risk. Step Forward urges HHS to retain the current 15 percent administrative cost cap. Programs should be expected to justify administrative expenses and use federal funds responsibly. They also need enough capacity to operate Head Start safely, responsibly, and well.

Family Engagement and Family Partnership Services

Step Forward opposes changes that weaken the family engagement and partnership requirements in **45 CFR §§1302.50-1302.53**. These standards recognize something Head Start programs have understood for decades: parents are their children's first and most important teachers, and strong relationships with families are central to helping children succeed.

The Department has described this proposal as an effort to empower parents. We share that goal. In our experience, parents are empowered when they have information, choices, meaningful opportunities to participate in their child's education, and trusted relationships with people who can help them navigate systems that are often difficult to navigate alone.

For some Head Start families, that person is their family service worker. A family service worker may help a parent find stable housing so a child can remain consistently enrolled. They may connect a parent with job training or employment resources, help a family access food assistance, follow up on a developmental referral, connect someone with health or mental health care, or help find another resource when the first referral goes nowhere. For some families, that employee becomes a lifeline.

A referral alone is not always enough. Giving a parent a phone number does not mean the family received the service. The provider may not call back. Transportation may fall through. There may be a waiting list. A parent may need help understanding what paperwork is required or where to go next.

Family service workers follow through.

Family engagement is also about more than responding when a family is in crisis. Family service workers build relationships with parents, help families identify and work toward goals, and strengthen the connection between what happens at home and what happens in the classroom. That partnership supports family well-being, meaningful parent engagement, and a child's school readiness. All of that takes time, and that is why caseload matters.

Removing reasonable caseload protections creates a real risk that family service workers will simply be responsible for more families. The needs of those families do not become less complicated because one employee has more of them. The Department itself acknowledges that removing the caseload requirement could affect the intensity or frequency of individualized support provided to families.

That is exactly what concerns us. A parent is not empowered by a service that no longer has enough capacity to respond to them.

Head Start has always understood that helping a child often means helping the family around that child. Stable housing, employment, education, health care, food security, and family well-being all affect what happens in a child's life and what that child brings into the classroom.

Local programs need room to structure their teams in ways that work for their communities. There should still be a reasonable expectation that family service workers have enough time to know their families, follow through, and provide meaningful support. Step Forward urges HHS to preserve strong federal family engagement requirements and reasonable family service worker caseload protections.

Child Nutrition

Step Forward opposes changes that reduce requirements under 45 CFR §1302.44, Child Nutrition. Head Start's nutrition services support healthy growth and development while helping children arrive in the classroom ready to participate and learn. For many families, the meals children receive through Head Start are also an important and dependable source of nutritious food.

During the 2024-2025 academic year, Step Forward provided 76,033 breakfasts, 86,422 lunches, and 67,790 snacks to children in our Head Start and Early Head Start programs. That is more than 230,000 meals and snacks in one year.

Parents bring their children to Head Start knowing they will receive nutritious food during their program day. Nutrition services also give us an opportunity to introduce children to healthy foods and help them develop healthy eating habits at an age when those habits are beginning to form.

Feeding young children is not one-size-fits-all. Head Start serves infants, toddlers, and preschoolers. We serve children with allergies, disabilities, medical conditions, feeding concerns, and special dietary needs. A meal that works for one child may not work for the child sitting beside them.

In fact, HHS Secretary Robert F. Kennedy Jr. said it himself that children's nutrition deserves greater attention. HHS has made improving childhood nutrition and preventing chronic disease a national priority. Secretary Kennedy said that when schools serve healthy food, they teach healthy habits and give children the fuel they need to grow and thrive. HHS has also invested more than \$61 million

specifically to strengthen nutrition services in Head Start, including access to nutrient-dense foods, nutrition education, staff training, kitchen improvements, and consultation with nutrition professionals.

We share those goals. Our concern is that weakening the federal requirements that have made nutrition a meaningful part of Head Start works against them.

Good nutrition in Head Start is more than what appears on a menu. It is knowing the children we serve, recognizing individual dietary and health needs, educating children and families, and building healthy habits during some of the most important developmental years of a child's life. A meal can meet a general standard and still not meet the needs of the child sitting at the table.

If we are serious about improving the health of America's children, Head Start should be one of the places where we strengthen that work. These are children at a critical stage of growth and development, and we have an opportunity every day to give them nutritious food, expose them to healthy choices, and help establish habits that can last well beyond their time in our classrooms.

We should build on that opportunity, not weaken it.

Mental Health and Social-Emotional Wellbeing

Step Forward opposes proposed reductions to 45 CFR §1302.45, Child Mental Health and Social and Emotional Well-Being. Access to mental health consultation, behavioral supports, and resources for families is critical to helping young children develop socially and emotionally and to helping the adults around them respond when a child is struggling.

The need for this support is something our staff see firsthand. Young children do not always have the words to explain what they are feeling or what they have experienced. It often comes out through behavior. A preschooler may begin hitting other children. A child may withdraw, struggle to regulate their emotions, have difficulty separating from a parent, or repeatedly disrupt the classroom.

A teacher should not have to manage the rest of the classroom while also trying to figure out alone what that child is trying to communicate.

That is where early childhood mental health consultation matters. Mental health professionals give teachers another set of trained eyes. They help staff understand what may be behind a child's behavior and identify strategies that can help. They help programs recognize concerns early, provide behavioral supports, and help families connect with additional mental health resources when needed.

This support can make the difference between treating a child's behavior only as a problem and recognizing it as a sign that the child may need help.

Families need support navigating these issues too. Finding appropriate mental health care for a young child can be difficult. Providers may be limited. Waiting lists may be long. Families may face insurance, transportation, scheduling, or other barriers. Head Start is often in a position to identify a concern and begin helping a child and family before they could navigate those systems alone.

That is why projected savings tied to reducing health and mental health requirements concern us. If

those savings come at the expense of consultation, behavioral supports, specialized staff, or assistance for families, children and teachers will feel the difference.

The Department has emphasized local flexibility throughout this proposal. Flexibility cannot create an early childhood mental health provider where one does not exist. It cannot shorten a waiting list or eliminate the barriers families face when trying to access care. Flexibility without capacity is not empowerment. It is responsibility without resources.

Programs need room to determine how mental health services are delivered in their communities. Children and families still need strong federal standards that ensure meaningful mental health consultation, behavioral support, and family mental health resources remain part of Head Start.

Oral Health

Step Forward opposes changes to the oral health requirements under 45 CFR §1302.42, Child Health Status and Care. Head Start has long played an important role in connecting children with preventive dental care, identifying unmet oral health needs, reducing untreated dental disease, and helping children develop healthy habits early in life.

Daily toothbrushing may look like a small requirement on a page of federal regulations. For a child with limited access to preventive dental care, it is not small.

Think about a four-year-old who comes to Head Start with a toothache. They may not be able to tell their teacher exactly what hurts. Instead, they may refuse breakfast, become irritable, have trouble concentrating, or stop participating in activities they normally enjoy. What looks like a behavior problem or a difficult morning may actually be a child in pain. Head Start's oral health practices help us prevent problems where we can, recognize concerns when they arise, and connect families with dental care before a treatable problem becomes a larger one.

During the 2024-2025 academic year, 1,126 children in Step Forward Head Start and Early Head Start completed at least one dental exam. We know not every family has consistent access to preventive dental care, which makes prevention, early identification, and connection to dental services especially important.

Daily toothbrushing at Head Start gives children a consistent opportunity to practice good oral hygiene with adult support while developing habits that can follow them home and, hopefully, stay with them as they grow.

It is simple. It is inexpensive. It is preventive. Daily toothbrushing with fluoride toothpaste is a basic health practice that supports children now and helps build habits they can carry with them.

Removing the requirement weakens a clear, consistent protection for young children, including those who may not have reliable access to preventive dental care outside of Head Start. Not every requirement is unnecessary simply because it is specific. Some requirements are specific because the practice matters.

Step Forward urges HHS to preserve strong oral health requirements, including daily toothbrushing with fluoride toothpaste, preventive dental care, and the connections to dental services that help

address oral health needs before they interfere with a child's health, development, and ability to learn.

Insurance and Risk Protection

Step Forward opposes proposed changes to the insurance requirements under 45 CFR §1303.52. Current requirements help protect children, families, employees, governing bodies, grantees, property, and the federal investment in Head Start from operational and financial risk.

Insurance is not the part of Head Start most families see. It becomes very important when something goes wrong.

Head Start programs care for infants and young children. We employ staff, operate facilities, work with volunteers, manage federal resources, and, in some communities, transport children. Those responsibilities carry real risk.

Clear insurance requirements provide certainty about the protections programs are expected to maintain. Weakening those requirements can create uncertainty around liability and financial protection at precisely the moment when clarity matters most.

Programs should not have to discover after an accident, claim, property loss, or other serious event that coverage was insufficient. Children, families, employees, governing bodies, and grantees should not bear unnecessary risk because minimum protections were unclear.

Risk does not disappear when a federal requirement does.

Step Forward urges HHS to retain clear federal insurance requirements that provide appropriate protection for Head Start programs, the children and families we serve, our employees and governing bodies, and the public resources entrusted to us.

Taken together, these proposed changes raise a broader concern about what local flexibility should mean in a national program. We understand the Department's argument that local programs know their communities better than Washington does, and we agree. That is also why HHS should listen closely to the people who operate Head Start when we explain what it takes to do this work.

Flexibility is useful when it gives programs room to determine the best way to meet a strong standard. It becomes something very different when the standard itself disappears. A program cannot use flexibility to make an unmanageable caseload manageable. A director cannot use flexibility to create a mental health provider where none exists. A teacher cannot use flexibility to replace the staff and organizational support needed to operate a safe classroom. Flexibility without capacity is not empowerment. It is responsibility without resources.

Local flexibility and strong federal standards can and should exist together. Head Start can establish what every child is entitled to receive while allowing communities to determine the best way to provide it. A child in Cleveland should not receive fewer protections than a child somewhere else because their state requires less. There should be room for local decision-making and innovation, but there should also be a strong national standard beneath which no Head Start program falls.

We also share the goal of reaching more children. There are eligible families in Cuyahoga County and

across the country who could benefit from Head Start, and we would welcome the opportunity to serve more of them. What would help us do that is more qualified teachers and staff and greater workforce capacity, not a reduction in the quality of what children and families receive. Head Start programs cannot open classrooms without the people needed to safely staff them. If the goal is to expand access, we should be focused on how to recruit, prepare, pay, and retain the early childhood workforce needed to serve more children. A Head Start slot means something because of what comes with it: a qualified teacher, meaningful family support, nutritious meals, health and mental health services, parent engagement, safe facilities, and the people working in the background who make all of that possible. We should not redefine Head Start so that it takes less to provide it. We should build the workforce and capacity needed to provide more of it.

Step Forward is not asking HHS to preserve every requirement simply because it exists today. There are rules that can be simplified, paperwork that can be eliminated, and places where local programs should have more flexibility. We are asking the Department to distinguish between requirements that create unnecessary work and requirements that protect the work. A duplicative report may be a burden.

A process that takes staff away from families without improving quality or accountability may be a burden. A family service worker having enough time to help a parent is not a burden. A mental health professional helping a teacher support a struggling child is not a burden. Making sure a young child receives appropriate nutrition and preventive health care is not a burden. The people who keep our centers clean and safe, recruit and pay our employees, protect our data, communicate with families, manage federal funds, and keep the program running are not burdens. Those are services, safeguards, and people. These are not costs around the edges of Head Start. They are part of what makes Head Start work.

For more than 60 years, Head Start has understood something fundamental about young children: they do not leave the rest of their lives at the classroom door. Hunger comes with them. Dental pain comes with them. Behavioral and emotional needs come with them. The stress and instability a family may be experiencing come with them. Head Start was built to respond to the whole child and the family around that child, and that comprehensive approach is what makes this program different.

This is also about the future of our communities. The children entering our classrooms today will become the students, workers, parents, business owners, caregivers, and community leaders of tomorrow. Helping a child arrive at kindergarten healthy and ready to learn is the beginning of something much bigger. Helping a parent remain employed, complete an education, or build new skills strengthens that family today and builds greater economic stability for the future.

Strong communities need healthy children, strong families, and people prepared to participate in the workforce. Head Start helps build all three. If we want a stronger workforce and a stronger economy in the years ahead, investing in children during the years when their development is most rapid is not separate from that goal. It is where that work begins.

Head Start can evolve. It can become more efficient, and we can find ways to open its doors to more children. We want that too. What we cannot do is lose the very things that have made families trust Head Start for generations.

The children we serve today are the future of Cuyahoga County and communities across this country. They deserve every opportunity we can give them to grow up healthy, learn, succeed, and build good

lives. Their families deserve that opportunity. Our communities deserve it. And our country's future depends on what we are willing to invest in its children today.

In reaching more children, we cannot give them less.

