

Self-Assessment Protocol 2020-2021

LEAP Head Start

The annual self-assessment is conducted to evaluate the program's progress toward meeting goals, compliance with regulatory requirements, and the effectiveness of professional development and family engagement systems in promoting school readiness.

Approved by Policy Council: 10/26/21
Approved by Board of Directors: 11/1/21

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Context for Self-Assessment

1. L.E.A.P. Head Start / Early Head Start conducts self-assessment activities annually in accordance with Head Start Performance Standard 1302.102(b)(2) to evaluate service quality and work performance as well as influence continuous quality improvement.
2. Monthly Ongoing Monitoring meetings are scheduled to review and monitor data reports on the delivery and effectiveness of program services. As a result of these Ongoing Monitoring Meetings (OMM), areas will be identified to be further analyzed by the self-assessment team.
3. Administrative Staff present these areas of focus to the self-assessment planning team to provide the context in which to conduct further analysis.
4. The Self-Assessment team, comprised of management, staff, Policy Council representatives, parents, and community partners, is tasked with evaluating the program in these targeted areas using a strength based approach and collaborative inquiry to further analyze the data collected during Ongoing Monitoring.

5. Data sources reviewed by the Self-Assessment team include child and family outcome data, professional development data, ongoing monitoring data, as well as, other applicable program data.
6. Discoveries and recommendations from the Self-Assessment team will be used to inform program planning and continuous improvement.

I. Methodology

The Self-Assessment is a five phase process, encased by a pre and post phase.

1. Pre-Phase – Review of Program Data
2. Phase 1-Design the Process
3. Phase 2-Engage the Team
4. Phase 3-Analyze & Dialogue
5. Phase 4-Recommendations
6. Phase 5-Prepare the Report
7. Post-Phase-Program Planning

Pre-Phase - Review of Program Data

Date	Action	Purpose
9/17/20; 10/8/20; 11/5/20; 12/10/20; 1/14/21; 1/28/21; 2/4/21;	Self-Assessment Planning Meeting	Review program data and determine focus areas for Self-Assessment

The pre-phase consists of the review of program data that is collected during Ongoing Monitoring, progress on program goals and objectives, and other program data to support compliance in order to identify focus areas for the annual Self-Assessment. During the pre-phase, the management team in conjunction with their service area staff will review program data from their respective service areas and identify areas of strength and concern. As a result those identified topics will be proposed to the Self-Assessment Planning Team as

topics for Self-Assessment. The topics that are chosen for review by the Self-Assessment team are as follows:

Focus Area Concern/Consideration

I. School Readiness- Disabilities Services-	-Impacts of staff turn- over and staff recruitment on school readiness. -Ability to provide PD for teachers -Program's ability to integrate services and meet standards
II. Health Services- Safety, Wellness Active Supervision Emergency Preparedness	-Ability of program to support staff wellness -Assess health/safety procedures and protocols. -Ability of staff to practice active supervision -The programs preparedness response to potential emergencies.
III. Human Resources -Staff Retention & Recruitment	- Assess ability to provide Staff Professional Development to staff -Impacts of vacancies on program services -Onboarding and job orientation -Assess retention efforts -Impacts on Data Reliability
IV. Program Management & Quality Improvement	-Ability to provide coordinated services -Ability to provide ongoing monitoring for improving Program services -Assessing program goals to meet community needs. -Reliable data for continuous improvement
V. ERSEA Enrollment & Recruiting	-Assess enrollment plan -Review data re enrollment drops and reasons -outreach efforts with community partners -effectiveness of existing recruitment strategies
VI. Fiscal Budget Impacts on services	-Impacts of budget constraints to program services And staff recruitment and retention.

Phase One- Design the Process

Date	Action	Purpose
PC Meeting: 1/22/21 BOD Meeting: 2/1/21	Review of SA process to Policy Council	Review and approve the Self-Assessment Plan and invite representatives to participate on the Self- Assessment team

During phase one, the Self-Assessment plan and timeline will be established and approved by the Policy Council and BOD. Once approved, team participants will be selected based on their area of expertise and ability to analyze data. The team's composition will include key management and service area staff, Policy Council representatives, parents and community partners.

Phase Two- Engage the Team

Date	Action	Purpose
2/10/21	Self-Assessment Team Orientation	Orient team members to the Self-Assessment process and focus areas

During phase two, the Self-Assessment team participants will be brought together for an orientation of the self-assessment process, which will also provide an overview of the program's structure, services provided, and the results of the previous year's Self-Assessment.

Phase Three- Analyze & Dialogue

Date	Action	Purpose
2/10/21	Data Analysis-Work Session	Review, discuss and analyze program data

Immediately following phase two, the Self-Assessment team will be divided into sub-groups and assigned a focus area topic. Each member will receive a packet of information including a Focus Area Summary Sheet providing additional context for their assigned task. The latter portion of the morning and the entire afternoon will be spent analyzing the data provided.

Phase Four- Recommendations

Date	Action	Purpose
2/10/21	Recommendations and Debriefing	Make recommendations based on discoveries and report to the large group for discussion.

Phase four requires each sub-group to come up with recommendations based on their discoveries. Team leaders for each sub-group will be instructed to complete a Summary of Recommendations form. Once completed, a debriefing occurs in which each sub-group will report discoveries made to the large group. The large group will make connections between discoveries across the various sub-groups in order to consolidate discoveries and identify final recommendations to inform program planning. Feedback will be gathered to improve the next year's Self-Assessment process.

Phase Five- Prepare the Report

Date	Action	Purpose
2/13/21	Draft Self-Assessment Report	Discoveries and recommendations from the Self-Assessment team will be compiled into a comprehensive report
3/19/21	Review of DRAFT SA Report	Review report draft for content and understanding of discoveries to Policy Council & Board HS Committee

Phase five is the writing of the final Self-Assessment report, which will include a compilation of all the discoveries and recommendations from the Self-Assessment team, as well as, any identified program strengths within one or more of the focus areas, areas for improvement to address potential risks to compliance, opportunities to enhance management systems and ensure progress on program goals and objectives.

Post Phase- Planning

Date	Action	Purpose
8/26/21-	Strategic Planning	Make programmatic decisions, complete program planning and develop relevant improvement plans
10/26/21	Review of SA Plan by Policy Council	
11/1/21	Approval at BOD meeting	

Results from the Self-Assessment will be reviewed by the Administrative Team to inform programmatic decisions and guide program planning for continuous quality improvement. Program performance will also be communicated during this time and will continue to be communicated throughout the next program year as plans for program improvement are implemented.

II. Self-Assessment Results

Discoveries and recommendations made during the Self-Assessment will be delineated under the six focus areas. Management will utilize the information to make decisions about program operations that will seek to improve service delivery and close any identified gaps in the program's overall performance.

COVID-19 Pandemic: As a result of the COVID-19 pandemic, the LEAP HS/EHS program closed for in-person services in March of 2020, shortly after the program's 2019-2020 self-assessment event. The program remained closed for in-person services until July 20, 2020 when Early Head Start classrooms reopened. Throughout the "pause" in in-person services the program continued to maintain meal delivery, virtual lessons via Google Classroom and case management services. On September 8, 2020, Head Start services resumed but with reduced in-person capacity and physically distanced, outdoor home visits. Remote services were provided to the remaining children and families. By November 30, 2020, the program paused in-person services and provided 100% remote service delivery. On February 22, 2021, the program resumed reduced-capacity, in-person services. On March 15, 2021, in-person slots were increased by two. The 2020-2021 Self-Assessment Event was conducted virtually on February 10, 2021. Focus Groups assigned to areas met virtually in teams, presenting data on shared screens and documenting results/findings into a Self-Assessment ChildPlus Module. At the close of the day, the teams joined together to debrief and share their findings.

EDUCATION AND CHILD DEVELOPMENT

Focus:

- **How can we ensure the program is meeting its school readiness goals?**

Strengths Identified

- The program utilizes a variety of assessment tools.
- The program completes a DECA annually on all children; including children who return for a second year.
- The program changed child assessment tools this year and is now utilizing DRDP (**Desired Results Developmental Profile**) which is fully integrated into ChildPlus. DRDP demonstrates child progress and development in all learning domains and aligns with the program's chosen curriculum: Creative Curriculum, the ELOF and NYS Early Learning Standards.
- CLASS scores indicate that CB classrooms are high in Emotional Support.
- HB has strong relationships with families, LEAP provides strong supports to families.
- The program facilitates visits to public schools; helps to provide parents the skills needed to navigate communication with the public schools.
- Teachers use assessment data to track growth and to develop individual learning goals and lesson plans.
- Support families of children that receive disability services and to assist in their transition to kindergarten.
- Emphasis on individualization.
- Early Head Start to Head Start transition activities and supports for families.
- Teachers provide homework activities
- Teachers sharing goal progression to parents.
- Home Visiting Rating Scale is completed 2x per year.

Areas Identified for Improvement

1. Curriculum modifications for children with disabilities to support skill development.
2. Learning activities should be linked more intentionally to the curriculum based on child assessment reports.
3. Improve collaboration with local school districts and service providers.
 - a. Collect data from K-3 teachers on progress of Head Start children?
 - b. Develop relationship to figure out ways to close the gap on school districts' expectations regarding school readiness and what is developmentally appropriate.
4. Improve approach to parent education related to understanding school readiness and the developmental learning domains.

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- a. Develop ways to improve parent's ability to adapt to virtual learning and training participation.

Improvement Plan

- ❑ Curriculum modifications for children with disabilities: Teachers will consult with disabilities manager, practice-based coach, families, and assigned therapists for suggestions and training
 - Teachers will outline modifications on lesson plans that are reviewed by Education Coordinator. Practice to be implemented by Nov. 1, 2021.
 - Professional Development opportunities for teaching and home visiting staff to increase opportunities for skill development and support for children receiving Occupational/Physical/Speech/Language Therapy.
 - The program will identify and provide training opportunities and resources for teachers- for January 2022 Professional Development Day
 - **Staff Responsible:** Education Coordinator, Teachers, Disabilities Manager, PBC, Assistant Director
 - **Timeline:** Ongoing throughout the year
- ❑ Learning activities to be linked more intentionally to the curriculum based on child assessment reports.
 - G GK (Growing Great Kids: HB curriculum) needs to be aligned to DRDP by June 2021
 - Teachers and Home Visitors will receive training on how to fully utilize ELOF.
 - Teachers will outline creative curriculum objectives and outline DRDP measures on Homework activities. Education Coordinator will monitor progress during PD meetings.
 - Update children's library - scholastic book order
 - Home visitors will align and connect G GK activities with the corresponding DRDP measures effective July 1, 2021.
 - Home Based Coordinator and Manager monitor activities and assessment reports during case management & PD meetings.
 - **Staff Responsible:** Education Coordinator, Teachers, Disabilities Manager, PBC, Assistant Director, Center Coordinator, HB Coordinator & Manager.
 - **Timeline:** Ongoing throughout the year and by above deadline dates.
- ❑ Improve collaboration with local school districts and service providers.

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- Collect data from K-3 teachers on progress of Head Start children by contacting local school district principals and CPSE chair people to share school readiness data.
 - Share Kindergarten Transition Summary form with local school districts by June 2021- Asst. Director and Center Coordinators
 - Schedule meeting with local school district principals and teachers to determine how best to exchange assessment data
 - **Staff Responsible:** Education Coordinator, Teachers, Assistant Director, Center Coordinator
 - **Timeline:** Fall 2021
- Develop relationship to figure out ways to close the gap on school districts' expectations regarding school readiness and what is developmentally appropriate.
- Contact local school district principal, UPK and Kindergarten Teachers to set up transition meetings and/or school readiness event
 - **Staff Responsible:** Assistant Director, Education Coordinator, Center Coordinator
 - **Timeline:** Fall 2021 and ongoing communication
- Develop resources to provide support and increase communication to bilingual and immigrant children and families.
- Work with Immigrant Services Program to reduce barriers with immigrant families and help meet their needs.
 - Set up a billing system with a Language Translation Services to translate forms.
 - **Staff Responsible:** Director, Assistant Director, Home-Based Coordinator/Manager, Education Coordinator
 - **Timeline:** Summer 2021
- Develop creative, virtual experiences to engage parents and to help them adjust to the virtual education setting.
- Offer parenting classes that will focus on understanding their child's school readiness skill and the ELOF
 - Offer a monthly newsletter to parents
 - **Staff Responsible:** Assistant Director, Family Services Coordinator, Home-Based Coordinator/Manager, Education Coordinator, Technology Manager, Teachers and Home Visitors.
 - **Timeline:** Fall 2021

HEALTH SERVICES

Focus:

- **How effective are the program's safety, security and supervision procedures and protocols?**
- **Are program staff demonstrating consistent active supervision protocols?**
- **How prepared is the program in the event of an emergency?**

Strengths Identified

- Physical safety and maintenance of building
- Child supervision procedures for classroom and playground are efficient
- Safety procedures are reviewed often and presented to new staff / substitutes
- A/I's are typical for ages and stages of children we serve.
- CPR / First Aid training and application found it to be efficient.
- New Onboarding Position provides weekly wellness activities to staff these are reported to be helpful and enjoyable.
- EAP services are available
- Sanitation and hygiene procedures are proficient.
- Strong protocols in place to guide decisions related to COVID-19
- Health requirements and screening deadlines are met.
- Classrooms have high standards for cleaning and sanitizing of materials, toys, and equipment.
- Nutrition policy that focuses on healthy eating; no junk food policy for children, staff and visitors.
- All safety drills are conducted in a complete and timely manner.
- The Quality Assurance Review (QAR) is extensive. It is completed monthly at each center; comprehensive in its review of health and safety protocols followed by staff.
- New staff training is extensive, covering several components.
- Resources available to help families provide health and safety in their own homes (thermometers, fire/smoke and CO2 detectors, face coverings).
- A new system is in place for regularly checking car seats for safety and expiration.
- The program completes a playground safety inspection prior to taking children outside.
- Classrooms are monitored informally for active supervision and safety procedures. Coordinators complete a visual check to verify that everything is in compliance with procedures and standards. These are conducted on an unscheduled and informal basis.

- Wellness: The program has hired an Onboarding Coordinator who is offering weekly wellness check-ins and support groups.
- EAP is available for staff with MH concerns.
- Sick time is available for staff to utilize for mental health struggles.

Areas Identified for Improvement

1. **Playground Safety:** The EHS playgrounds, River Street in particular, were identified as needing a solid surface absorbent fall zone. The ground frequently has construction waste (nails or screws) rise to the surface following rain.
 - The program completes a playground safety inspection prior to taking children outside and it was during these inspections that construction waste was found.
 - Despite clean-up efforts and loads of top soil brought in over the years, the ground still releases construction waste.
 - The playground safety checklist was found to not be used during summer months when the playground was used by Home-Visiting staff.
2. **Active Supervision:** Currently classrooms are monitored visually for active supervision and safety procedures. These are conducted on an unscheduled and informal basis. When something is observed that falls outside the safety and supervision expectations, it is verbally brought to the attention of the classroom staff.
 - This needs to be re-addressed and ensure that formal checklists are implemented. This is a carry-over from last year. Due to COVID this needs to be re-emphasized. RE-Implement in March 2021.
 - Active supervision is the responsibility of all staff, if the buses had a system of verification that was visible to all who passed a parked bus indicating that the bus was inspected prior to driver parking and exiting.
 - Child behaviors occurring on the bus can become a distraction for the driver and bus monitors are unsure how to redirect. We suggest aide reads a story or play song games. Also suggest providing aides with childcare education and de-escalation techniques.
3. **Building Security:** The Program Director met with local Public Safety officers, Sheriff and local police to tour our buildings and identify safe shelter-in-place locations for every room in each building. Recommendations were provided on installing a panic button, intercom notification system, locking doors to bar access to floors, and to limit public access to buildings. Many of our buildings have multiple

entrances that create a security risk. Classrooms have limited ability to lock down and shelter in place safely.

4. **Emergencies:** The program does not have an Emergency Preparedness **Manual**. Emergency Preparedness plans and procedures exist as separate documents making it difficult to train staff and parents.
5. **Traveling throughout the County:** In the course of providing services, Home Visitors, Family Advocates and other Program staff are often out on country roads with no cell service or access to nearby supports. During the winter, country roads can be hazardous and private roads to homes receiving HB services are often icy and snow covered; making driving difficult and unsafe. Staff injuries have occurred as a result of staff falling or vehicles sliding off the road or becoming stuck.
6. **Parking Lot Safety:** With limited seating on program buses, more parents are transporting their children to school. Parking lot safety is a concern at many of the centers. Parents driving too fast, not stopping when bus lights are on, leaving cars running unattended, leaving children in their cars, not holding their children's hands while walking to the building.

Improvement Plan

- ❑ **River Street Toddler Playground:** The agency will look for grant opportunities and donations from local foundations to assist with the cost to renovate and upgrade the Early Head Start playground.
 - All Program Staff will be retrained and required to complete the playground checklist prior to use. These completed checklists will be turned into the Center Coordinator who will follow up with any needed repairs or action items. Action items related to playground safety will be included on the monthly CC report and tracked on the Building and Grounds report.
 - Signage needed on all program playgrounds to indicate the age groups for play equipment and that the playgrounds are not intended for public use.
- **Staff Responsible:** Program Directors, Outreach Coordinator, Administrative Staff, Service Area Coordinators, Center Coordinators and all program staff
- **Timeline:** Complete by June 2022

❑ An **Active Supervision** Checklist & On-the-Spot Observation form will be used by CC on a daily basis. Random observations will be conducted by CC daily. All aspects of the Arrival Departure routine both in and outdoors as well as classroom active supervision practices will be randomly observed and recorded. Staff will receive immediate feedback. Corrective Action will be required immediately and reported to staff supervisor for further professional development.

- **Staff Responsible:** Program Assistant Directors, Education Coordinator, Center Coordinator, Component Area Supervisors, and all program staff.
- **Timeline:** Complete in March 2021 and utilize weekly.

❑ **Building Security**

- All visitors to buildings are currently required to sign in and will be required to wear a “Visitor” badge.
 - In addition to signing in and wearing an ID badge, all visitors will be escorted while in the building by a staff member. Visitors will also be escorted to the exit, sign out and return their ID badge.
- We have a need for an intercom/announcement system so we have a way to alert all staff at once of an intruder or lock down request. Program staff will work together with the Outreach Coordinator to raise funds to offset the cost related to the purchase and installation of such a system.
 - Each center will utilize a phone intercom to announce an emergency. Center staff should practice this notification method during emergency drills.
- Surveillance cameras for centers without this level of security will be needed. The Dix Avenue Center has a busy parking lot and is frequently used by drivers for U-Turns and strangers pulling off to park.
 - The program will work with the Buildings and Grounds crew to develop a plan for reducing traffic through the parking lot. We will look at increasing signage regarding Speed, No U-Turns, Private Property, etc.
 - Outreach Coordinator will look for safety grants that we can apply for to off-set the expense related to installing security cameras.
- Managing the Parking Lot during Arrival and Departure- Staff will continue to conduct health entry checks at arrival for families who self- transport. Children will be escorted safely inside by a staff member.

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- **Staff Responsible:** Program Directors, Education Coordinator, Center Coordinator, Component Area Supervisors, Building and Grounds Crew, and all program staff.
 - **Timeline:** Complete by Fall/ Winter 2021

❑ **Emergencies:** An Emergency Preparedness Manual will be developed to consolidate all emergency plans and procedures. All staff will be provided with a manual and trained on the procedures.

- All health and safety procedures and plans need to be included in a specific **Emergency Preparedness Plan** to clearly identify action plans related to safety and security.
- QAR process will evaluate the safety of evacuation/fire drill gathering locations. The QAR should identify safe locations to practice various evacuation routes. These need to be included in the Emergency Preparedness Plan. Observations of evacuations need to be recorded and a debriefing to occur among program staff.
- When Therapists are assigned to work at a center they should receive directives on what to do and where to go with the child currently in their presence at the time of an emergency.
- First aid kit maintenance an issue. First Aid kits will be the responsibility of the health staff and should be checked monthly and during QAR.
- A first aid kit is needed at the front of each building.
- Enhancing CTP to cover safety topics. - Center Coordinator to provide staff with training on how to use a fire extinguisher.

- **Staff Responsible:** Program Directors, Education Coordinator, Health Coordinator, Component Coordinators, Transportation Coordinator, and all program staff.
- **Timeline:** Completed by September 2021

❑ **Traveling Throughout the County:** Program vehicles need to have a safety kit in the event of an emergency. All program vehicles will be equipped with a jack and spare tire or donut tire, flare and flashlight, seat belt cutters. A First Aid kit must be included in all vehicles along with a CPR mask, blanket, emesis bags, and water. A window scraper/snow brush, fold up shovel and bag of ice melt for travel during winter months.

- Buses will be equipped with a “This bus has been inspected- all children are unloaded.” This sign will be stored at the rear of the bus and will be placed in the windshield prior to driver exiting the bus.

- Transportation staff will participate in training on how to redirect children's behavior on the buses.
 - Program will budget for the addition of snow tires so that vans are equipped for winter travel
 - **Staff Responsible:** Program Director, Health Coordinator, Nurses, Transportation Coordinator, Practice-Based Coach/Behaviorist, and all program staff.
 - **Timeline:** Completed by September 2021
- Parking lot safety is an ongoing concern. Since COVID-19 all of our parking lots are marked with cones and staff are outside conducting daily entry health checks. The buses have dedicated unloading zones. When drop off routines resume, the program will continue to monitor parking lot safety by assigning staff to patrol the lot and direct traffic flow. Increased signage and safety cones has helped.
- The Parent Handbook will be revised to include educational information about the importance of entering and exiting our parking lots safely and revisiting the pedestrian safety curriculum more than once per year.
 - Signage needed in drop off / pick up areas to turn car engine off during drop off and pick up.
 - Staff will continue to escort children inside the building to maintain center security.
 - **Staff Responsible:** Program Director, Center Coordinator, Health Coordinator, Transportation Coordinator, and all program staff.
 - **Timeline:** Ongoing

HUMAN RESOURCES

Focus:

- **Staff Retention & Staff Recruitment & Professional Development**
- **What are the impacts of staff vacancies on program services? School Readiness?**
- **Assess the program's ability to provide ongoing professional development to staff when key positions are vacant.**
- **How effective are onboarding and job orientation.**

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- **How does staff turnover affect accuracy and reliability of program data?**
 - **Assess the program's efforts at retaining and recruiting program staff?**
 - **How effective are current staff wellness initiatives?**

Strengths Identified

Staff Recruitment / Retention / Professional Development

Recruitment

- LEAP Head Start / Early Head Start now has an online presence: website, Facebook, Indeed to post job openings.
- Advertising, marketing and rebranding strategies have increased our visibility in the community; LEAP has new signage, banners, radio advertising talking about the benefits of working for LEAP.
- Internal postings for open positions, FB, Indeed
- Upon hiring, all staff must be cleared and vetted before starting in their job.

Retention

- Staff attendance is consistent; after reviewing staff attendance data, absences of staff were lower than expected.
- A culture of respect among co-workers, trust and support is offered; team work is valued; all contribute to a positive work environment.
- Opportunities to advance; education is valued. T/TA, Continuing Education opportunities (CDA, AA, BA/BS) through tuition assistance and education release time.
- An improvement since last year, the formation of a Hiring Committee that developed a new procedure of onboarding staff. This structure includes a consistent process of job orientation and training with follow up meetings established after the initial two week training period.
- Supporting Staff Wellness: Formation of the Wellness Committee, each month there is a different wellness topic along with educational materials, there are fun activities to engage staff and build employee spirit and morale. Ongoing efforts to develop a supportive culture of staff wellness. COVID restrictions and challenges have created a stressful work environment.
- Program Leadership participated in the UCLA Trauma Informed Care Training. The focus of the training is staff wellness and reducing burnout and supporting staff who are experiencing secondary traumatic effects.

Professional Development

- The program has consistently committed to training staff on the curriculum: DRDP, Creative Curriculum and Growing Great Kids.

- There is a consistent structure for providing Professional Development to all staff; it's scheduled regularly and is individualized for the staff person.
- Integrating ChildPlus Documentation Procedures consistently across components. This included intensive staff training across service areas, spear-headed by a committee. Program Goal was to be paperless by Sept 2021.

Areas Identified for Improvement

1. High Staff Turnover and Long-term Vacant Positions: This year LEAP Head Start / Early Head Start had a high turnover of staff and many positions remained vacant for long periods of time, particularly in teaching positions. This is a continuation from last year's self-assessment.
 - a. Staff Retention & Wellness: Need funds for staff wellness activities and incentives.
 - b. Time is short: How to engage staff in committees, training and meetings and still meet expectations of their job when turnover is high and there are long term vacancies. Staff burnout is a concern.
2. Communication: Direct, clear messages to staff. Consistency with chain of command communication is needed. Staff need to be directed clearly on how to get their needs met.
3. Training for staff Ongoing training to support staff's use of technology and software is needed to ensure, that as new staff are hired, they are supported with documentation expectations in ChildPlus.
 - a. Training related to program goals and performance standards.
 - b. Training on agency and program design.
4. Pay Raises for positions requiring qualifications. Salaries are not in alignment for the work load and responsibility
5. Lack of Qualified Applicants: Despite a variety of advertising methods; we received very few responses from qualified candidates. The program needs to attract qualified candidates to ensure that services are being provided and to reduce the strain and pressure on existing staff. This is a continuation from last year's self-assessment.
6. Recruiting Efforts: The Indeed website attracts candidates who are not qualified, or who are non-responsive when contacted. Time to sort through resumes that are not applicable to the positons posted is inefficient. This is a continuation from last year's self-assessment.
 - a. Need to identify ways to attract and keep qualified teaching and home visiting staff.

Improvement Plan

Staff Recruitment and Retention

High Staff Turnover and Long-term Vacant Positions

- ❑ The program will continue to track and monitor the reasons staff are leaving.
 - Reports will be shared with Administrative Team and Policy Council on a monthly basis during Ongoing Monitoring Meetings.
 - Current data will allow the program to be more responsive and examine ways to make mid-course corrections.

- **Staff Responsible:** Program Director, Onboarding Coordinator, Human Resources Manager, and all administrative staff.
- **Timeline:** Beginning September 2021; and Ongoing

- ❑ Focus on Staff Retention and Wellness: The program will provide Trauma Informed Care training to all agency staff. The goal is to be more trauma informed and to develop a culture of support and wellness.
 - Develop a Policy and a budget for wellness activities and incentives. Work with Policy Council and the Board of Directors to recognize the importance of staff wellness and the need to develop an agency culture.
 - Enhance staff wellness activities; staff appreciation day, Wellness topics during PD, use of “sick” time to maintain “wellness,” walk/run activities, etc.

- ❑ Work on applying COLA throughout the wage scale to increase program staff salaries.
 - Investigate ways to provide merit raises to reward high performing staff.

- **Staff Responsible:** Human resources staff, Administrative Staff, Service Area Coordinators, Onboarding Coordinator, Members of the Orientation / Training / Professional Development Committee.
- **Timeline:** Completed by Dec. 2021

Lack of Qualified Applicants & Recruiting Qualified Candidates for Vacant Positions

- ❑ Investigate other avenues for posting or advertising open positions: Research additional online job search engines.
 - Increase partnerships with local colleges; posting in their Career Centers.

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- ❑ Conduct job fairs to get the word out about our program and the benefits of being part of the LEAP family.
 - ❑ Offer sign-on bonuses and retention bonuses for new and existing staff.
- **Staff Responsible:** Human resources staff, Administrative Staff, Onboarding Coordinator, Members of the Orientation / Training / Professional Development Committee.
 - **Timeline:** Ongoing

Professional Development

- ❑ Provide Leadership Training to program coordinators and supervisors.
 - Provide training to the Management Team so that they can enhance staff professional development plans, conduct open and reflective supervision and to develop performance improvement plans.
 - Monthly Leadership training to support the practice of ongoing program management and oversight to lead to individualized professional development plans.
 - Professional Development plans must be objective and collaborative.
 - Develop SMART goals
- ❑ Reduce burnout and stress; improve communication and support to staff by identifying a clear chain of command. Include training on policy and procedures to be sure all staff understand policies, procedures and expectations.
 - Clear and consistent messages from program leadership is expected. Program leaders will participate in monthly supervisory training. Leadership training and TIC training will provide skills in addressing issues and maintaining communication.
 - Eliminating silos among service area leaders by following uniform sets of guidance and procedures for all staff regardless of service area or program option. Program Administrators will meet monthly to discuss issues and program data at OMM. Reducing confusion may lead to greater job satisfaction and lead to less turnover.
- ❑ Teaching staff trainings to ensure consistency.
 - Provide more time for development of training to ensure it is more intensive and effective and aligns with school readiness goals and the needs of staff.
 - Identify learning styles of staff and limit group sizes for trainings.

- **Staff Responsible:** Program Directors, Practice-based Coach, Education Coordinator, Administrative Staff, and Onboarding Coordinator.
- **Timeline:** Completed by September 2021
- ❑ Embed into procedures the intentional use of the *Professional Development Plan* form to document training needs of staff.
- ❑ Align professional development trainings with the ELOF and school readiness goals.
- ❑ Use child outcomes data as a data source for training needs of staff. Child outcomes data can be used to determine which specific skills the children are not meeting the program's performance objectives for school readiness and train teachers on how to teach these specific skills.
- ❑ Track staff turnover to identify the number of new staff in the classroom in need of training in effective teaching practices.
 - Ensure new lead teachers are trained on effective teaching practices in ECE and CLASS.
- **Staff Responsible:** Human resources staff, Education Coordinator, Administrative Staff, Practice-based Coach, Onboarding Coordinator, Members of the Orientation / Training / Professional Development Committee.
- **Timeline:** Completed by Dec. 2021

Family Engagement & Family Outcomes

Focus:

- Evaluate the program's ability to effectively establish relationships with families that assist in development of family goals.
- Assess the program's ability to engage families and the impact this has on family outcomes.
- How can we better utilize transportation service resources to improve family engagement?
- How can we strengthen our connections with community partners?
- How can we ensure families are receiving the resources they need?

Strengths Identified

- Staff relationships with families is strong and overall families are comfortable with staff. Staff and parents have good relationships.
- A strength-based approach is used when working with families.
- DRDP Reports provide to parents a more visual representation of their child's developmental assessment.
- The program is utilizing research based curriculum for center and home-based options: Creative Curriculum/TS GOLD (CB) & Growing Great Kids (HB).
- The program implements two research based parenting curriculums: STEP & Growing Great Kids.
- The program has relationships with multiple community partners and coordinates services as per 1302.53. Relationships with Salvation Army, area dentists, DSS, WIC, Public Health, Berkshire Farms, County Children's Committee.

Areas Identified for Improvement

1. Offering services to families in their primary language when they are English Language Learners has been a challenge for our program. Recruiting staff to fill vacancies has been challenging for all positions; we currently have no Spanish speaking staff to work with our Hispanic families.
2. Parent Communication: Parent data indicates that they would like to see improved information regarding program closure and staff changes.
3. Approach to Family Engagement: Expand pathways to increase parent engagement and reduce barriers.

Improvement Plan

- ☐ The Family Services and Home Visiting staff will focus more intentionally on parent/family strengths. They will engage parents by helping them to lead home activities, socializations, and parent cafés.
 - Continuation from last SA: The program will develop a "Parent Engagement Committee" to work on developing parent engagement events around the strengths and interests of parents and volunteers.
 - Provide Homework incentives- bottle drive donations, sunshine fund donations.
 - Parent Engagement Committee to develop activities that are age appropriate for EHS children, as well as, HS children.

- Ensure that Parent Engagement activities are not scheduled during times that conflict with another agency event. Offer events on different days and times to meet the needs of parents who work.
 - HCI Events: For the big event offer it in the southern and northern part of the county.
- Start a “Mentor” program between parents who have been in the program and new parents to help build a connection.
- Work on developing ways to assist parents with transportation to attend events. Provide babysitting.
- Case Management meetings will focus on family’s strengths and build on these strengths.
- Provide family engagement services in family’s preferred language. Events may have greater turnout if this were provided.
 - The program will seek resources for recruiting and hiring an interpreter, community volunteers/partners who can assist with translation, engaging other parents who are bi-lingual, or provide education to staff to learn a second language.
- The program will continue to find new ways to develop communication with parents. Many parents are engaged in social media or text messaging. Program staff need cell phones that allow them to text and message parents. Many of our families do not have internet service, so staff will need access to a hot spot or cellular phone coverage.
 - All Family Service, Education and Home Visiting Staff will be issued a smart phone for communicating with families.
 - The program will enhance its visibility on social media by developing its Facebook and website.
 - Enhance staff ability in using ChildPlus features to communicate with families through mass emails when there are school closures.
 - **Staff Responsible:** Program Directors, Family Services Coordinator, Home-Based Coordinator, Education Coordinator, and all program staff.
 - **Timeline:** September 2021

ERSEA

Enrollment, Recruitment and Attendance

Focus:

- **How can the program maintain full funded enrollment?**
- **Assess the program’s ability to implement the existing enrollment plan.**
- **Analyze data related to reasons for enrollment drops.**
- **Evaluate the program’s success with existing recruitment strategies.**

➤ **Evaluate outreach effort with community partners.**

Strengths Identified

- Individualized services; goals and plans for children and families.
- Virtual applications and learning environments were offered to children and families: Google Classroom, Virtual Parent Café, Socializations scheduled during times that were convenient to parents.
- Increased access to technology for staff: smart phones, laptops, internet access, portable scanners.
- Increased use of social media platforms: Facebook with testimonials from parents and videos about program activities.
- Use of CP system for data entry and monitoring services.
- Community partners reach out to program staff to refer families.
- The program has been tracking the effectiveness of recruitment efforts and found that the efforts that produced the best results were Promotional Lawn Signs and Word of Mouth- referrals by friends and family members.

Areas Identified for Improvement

1. The program is under-enrolled and needs to increase recruitment and enrollment activities to maintain funded enrollment.
2. Family Service staff need training in eligibility completion.
3. Program has identified that parents will inquire or start an application and often abandon the process. Staff will make follow up calls to schedule an appointment and parents do not respond. Abandoned enrollment applications is an ongoing trend over the last several years.
4. Transportation challenges for families, impacts their ability to transport child to school. Program has limited bus transportation. Challenges in hiring CDL Drivers to add additional buses to the transportation pool.

Improvement Plan

- ❑ **Recruitment:** The program will increase its efforts to identify how families heard about our program. This information will allow us to better track the effectiveness of our recruitment efforts.
 - The program will increase its efforts to recruit and enroll pregnant women by continuing to maintain relationships with partners at Wait House, BOCES, Glens Falls Hospital Snuggery unit, local High School Guidance Counselors and OB/Gyn. offices.

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- The program will form a Recruitment Committee. The committee will assign groups of staff to regularly participate in monthly recruitment events.
 - The committee will develop a “Recruitment Action Plan.”
 - Calendar & track success of recruitment events in CP.
 - Recruitment efforts will focus on businesses and partners but door to door efforts, as well. Targeting neighborhoods in communities throughout the county.
 - Monitor recruitment data during monthly ongoing monitoring meetings.
 - Create a module in ChildPlus to monitor recruitment activities.
 - **Enrollment:** Improve Staff training on the entire eligibility process.
 - Staff need training on how to follow up with non-responsive families. These are families who put in an application and then are not reachable for completion of the enrollment process.
 - Supervisors will monitor the enrollment process and to ensure that the process has not stalled.
 - Track referral sources and follow up with a thank you.
 - **Attendance:** The program will provide families with more information about the importance of good attendance.
 - Provide resources and training during parent cafés to educate parents on why good attendance is important to school readiness.
 - Incentives to reward good attendance.
 - The program will work on improving access to transportation; how to increase transportation services.
 - **Staff Responsible:** Program Directors, Family Services Coordinator, Home-Based Coordinator, Education Coordinator, and all family services staff.
 - **Timeline:** September 2021

Fiscal

Focus:

- **Impacts of budget constraints to program services and staff recruitment and retention.**

Strengths Identified

- The agency has skilled finance staff.
- Engaged Board participation.
- Staff are mindful of costs and budget; compliant programming.
- Clean fiscal audits.
- A fund development person on staff.
- Professional Development training budget
- Competitive health insurance benefit for individual staff
- Agency routinely assesses contracts to ensure that services are being provided in the most efficient manner.

Areas Identified for Improvement

1. Personnel: Currently underfunded. Staff from the administration level down are required to do more with less. Many positions are being covered by a one person.
 - a. Although we apply for and are grateful for the annual COLA provided through additional funding from OHS, it does not make up for:
 - i. Personnel requirements: Educational Qualifications for positions, Comprehensive Background Checks, increases to NYS minimum wage, NYS Paid Family Leave.
 - ii. Increases to wage scale to attract and retain qualified staff.
 - iii. These over burdens directly affect staff retention. Minimum wage increases are difficult to manage and maintain equity on our wage scale.
2. Quality programming costs money. Salaries need to increase to attract and retain qualified staff. Staff turnover is expensive.
 - a. The cost of advertising and recruiting for open positions is prohibitive.
 - b. Long term vacancies increase staff burnout and turnover and affect quality of services.
3. RFP Process for Contracts is lengthy: The RFP process restricts work with new businesses. Expenses versus quality year over year. New administrative team needs OMB training.

4. Need to Increase Non-Fed Share: The program must generate 20% or 1.1 million dollars in additional funds to compensate the program. Any additional funding awarded also needs the 20% match. Year over year, a waiver has been needed.
 - a. How to manage the donations: gifts, cards, cash donations?
 - b. Are we capturing all volunteer hours through virtual contacts; how to capture signatures to attest to participation?
 - c. How do we utilize volunteers safely? Challenges- Background checks, supervision?
 - d. Need to increase non-fed share.
5. Supplies / Equipment: Budget is created with wish lists, prioritized by Program Administrators. Upcoming identified needs are buses, technology/intranet, and River Street Playground renovation, update security systems at centers. These items are costly.
 - a. Transportation is an identified need on the CNA.

Improvement Plan

- ☐ The agency hired Delark Agency to review and study the wage scale to examine how the agency may be able to provide staff with merit raises to provide an additional benefit, in addition to COLA. Program leadership will work on a process for identifying criteria to evaluate performance objectively and consistently across programs and service areas.
- ☐ The leadership staff will look at positions that have been difficult to hire and retain, and identify ways to increase the base salaries; teachers, home visitors.
 - **Staff Responsible:** Executive Director, Finance Director, Head Start Program Director, HR Director, Program Administrative Staff (ASM), Board of Directors and Policy Council
 - **Timeline:** Identified as an area for Strategic Planning of LEAP- Work Group to begin Spring 2021; plan and implementation Spring 2022.
- ☐ The agency is evaluating all contracts for services to ensure they are cost efficient and meet the needs of the program. The program will utilize revised fiscal policies to allow more flexibility without compromising compliance. The Admin team needs to attend training to ensure a concrete understanding of OMB.
 - **Staff Responsible:** Finance Director, Executive Director, Head Start Program Director, WIPFLI
 - **Timeline:** Fall/Winter 2021

- ❑ Continuation from last year's SA: Community Engagement efforts is the overarching solution for all fiscal needs. The agency will increase its outreach efforts with the goal of raising funds and will plan an annual fundraiser. This was planned for this program year but needed to be canceled due to COVID. Fundraising needs to focus on grant writing, events and an exploration of other ways to generate funds (fee for service training opportunities or services). Program has a position dedicated to doing this paid for with other funding sources other than Head Start. The program will develop an outreach and fund development plan and execute the plan.
- ❑ The agency will review in kind procedures and how donations are accounted for.
 - **Staff Responsible:** Board of Directors, Outreach Coordinator, Executive Director, Finance Director and Program Directors.
 - **Timeline:** Ongoing
- ❑ The program will budget one replacement bus per year to phase out older fleet of buses. Fund raising and other funding opportunities to raise funds for the RS playground, and security upgrades.
 - The CNA will evaluate the current transportation needs in our communities
 - **Staff Responsible:** Finance Director, Executive Director, Program Director, Outreach Coordinator, Board of Directors.
 - **Timeline:** Ongoing

Program Management and Quality Improvement (Remote Service Delivery)

Focus:

- **How effectively did the program manage the delivery of services?**
- **How effective are the program systems in ensuring quality and adherence to program standards and policies?**
- **Pandemic Impacts: How effective was the program's response to providing remote services to enrolled families?**

Strengths Identified

- Services continued throughout remote periods or classroom closures. In person services for EHS and HS are offered through a hybrid model. A reduced number of children received in person services while others received services remotely.

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- Decisions for services were based on a set of selection criteria based upon need: working parents, ability to transport, need for respite, essential worker.
 - Remote services included case management, weekly meal, hygiene and activity deliveries, Google Classroom, Parent Café & Training.
 - Management staff followed all recommended guidance received from CDC and the State Health Department documenting protocols for all component service areas and centers; this was ongoing due to changing guidance.
 - Safety plans & protocols evolved and changed as needed; staff received comprehensive training on all safety protocols; this was ongoing due to changes in guidance.
 - Fall: Head Start reopened providing a hybrid model of service delivery. Depending on the size of the classroom up to 10 children enrolled in person with remaining children receiving remote services. Teachers provide 3 remote lessons via Google Classroom. Materials for the lessons are delivered once a week.
 - All program services provided to families receiving remote services....screenings, meals, hygiene supplies, educational materials, participation in Parent Café, HB services conducted outside or socially distanced.
 - In the spring of 2021, all classrooms were at full capacity.
 - Daily Entry Health checks continue at building with staff screening and escorting children inside.
 - Transportation provided: Children receiving transportation services are all enrolled in the same classroom to maintain a “pod.”
 - Daily Tracking and communicating all exposures, symptomatic children and adults. Closing classrooms or pausing transportation per Public Health guidance.
 - Policy Council met remotely throughout the year. Board meetings conducted remotely.
 - Dental records are up to date and timeliness has improved.
 - The amount of parents consenting to dental van has tripled since last year.
 - Some Staff are interested in learning Spanish
 - The Practice-based Coach supporting teachers with challenging behaviors and increasing utilization of DECA.
 - Onboarding Coordinator in process of revamping PD system connected to CP personnel tab.
 - Staff wellness activities started. More awareness of well-being and establishing a healthy culture of wellness.
 - Program Calendar keeps the program on track, informational and sets expectations for staff.

Areas Identified for Improvement

1. Communication to staff: Improve the regularity with which staff receive communication. Be clearer and more consistent with how information is shared; such as provide clearer guidance related to winter travel.
2. Professional Development process. Needs to be more consistent across supervisors. Supervisors need to more closely monitor staff work and use real examples for setting professional development goals. Develop improvement plans that include concrete training on how they can improve their skills.
3. Staff Wellness: Checking in regularly with staff. Provide support that is directly related to skill development.
 - a. Review agency personnel policies to examine ways in which they can be more focused on wellness.

Improvement Plan

- ☐ Consistent Communication: Need to work on how messages and procedures are shared with staff.
 - Supervisors and program leaders need to participate in review and discussion about new Policies/Procedures/Guidelines to fully understand new/existing expectations.
 - Add this to the ongoing agenda for all administrative staff meetings.
 - Share program data and information regularly with staff through monthly emails and virtual staff meetings.
- ☐ Professional Development needs improving; documentation of PD will be done in the Personnel tab of CP. Contacts with staff will be documented, performance improvement plans will be documented and P.D. goals and plans will be completed jointly by staff and supervisor.
 - All supervisors will utilize the Professional Development module under each staff member's personnel tab.
- ☐ To improve skills in staff and ensure that program services are being monitored effectively and timely; Professional Development for the program coordinators and managers will be provided on a monthly basis to improve consistency and follow up and to support leadership as they work with staff to develop their PD plans.
 - **Staff Responsible:** Program Directors, All Program and Service Area Coordinators, All Program Managers, All program staff.
 - **Timeline:** September 2021
- ☐ To establish a "culture" of wellness, the agency needs to identify agency policies and procedures that conflict with these efforts. The Executive Leadership Team

will review the staff handbook for policies to ensure that there is a focus on wellness and support, e.g. Sick time that can be used for wellness/mental health days.

- Ways of recognizing the hard work and efforts of staff who go above and beyond.
- **Staff Responsible:** Executive Leadership Team, Program Directors, All Program and Service Area Coordinators and Managers, Board of Directors, Policy Council.
- **Timeline:** September 2021

IV. KEY INSIGHTS

Discoveries: Management Systems

Technology & Information Systems

Discovery:

- *Since the pandemic the program has increased its reliance on the internet and electronic documentation, reporting, meetings. Despite an upgrade to internet accessibility in all program buildings, staff continue to be challenged with connectivity issues. This is due to old equipment and devices.*
- *ChildPlus training was implemented all year with the intention of going completely paperless by Sept. 2021. This has been a yearlong effort and it will continue to be necessary to maintain a CP committee. Ongoing training and oversight is necessary to ensure there is program wide consistency in documentation and that services are being implemented to standards.*

Recommendations:

- ☐ Track all devices with age and performance status. Replace aging equipment so staff have the appropriate tools they need to complete their work.
- ☐ ChildPlus Training in service area modules. Consistency in documentation is needed to ensure reliability of data.

Ongoing Monitoring & Continuous Improvement

Discovery:

- *Program Managers need to move toward a more visual means of reporting program data.*
- *Regular monitoring of ChildPlus files is needed to identify errors in documentation and data entry and to identify staff training needs.*

Recommendations: Carried over from last SA.

- ❑ Program Managers and Coordinators will receive training on how to create visual representations of their program data. Program managers and coordinators will demonstrate monthly data with a more visual representation capable of comparing data from month to month.
- ❑ Ongoing monitoring of PIR data needed to ensure oversight of data accuracy and documentation. CP PIR Service Area Reports will be reviewed monthly during Ongoing Monitoring Meeting.
- ❑ Supervisors will schedule regular times for monitoring and supervising staff documentation. Supervisors will use monitoring in developing professional development and corrective action plans for staff.
- ❑ Implement a monitoring protocol to complete file reviews monthly and to ensure corrective action.

Strengths & Opportunities to Improve

The self-assessment results delineated in Section III of this report provided details on the discoveries and recommendations from the team. The team identified many areas in which the program excelled. These identified areas will allow management opportunities to build on our successes. Many of the discoveries identified an opportunity for the program to enhance and streamline service delivery to children and families. In addition to service delivery, the discoveries were also observed to be associated with several management systems. A few of these management systems were also identified in last year's Self-Assessment as ones to focus efforts for improvement. Strong management systems are vital in ensuring effective and high-quality delivery of services.

V. Conclusion

High-quality service is important to LEAP Head Start / Early Head Start. The program continues to strive to improve the delivery of services to children and families by utilizing program data to inform the decision making process and continuous quality improvement efforts. The insight received during this past year's Self-Assessment will be used during the planning process to assist the management team in determining appropriate actions to include in the program's improvement plan. The improvement plan devised will be implemented within the next program year to enhance program performance and increase

the probability of the program achieving established performance objectives. The success of the improvement plan will be tracked and monitored to measure progress during monthly monitoring and quarterly progress reviews.