

# Self-Assessment Protocol

## 2021-2022

---

### *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 LEAP Policy Council: 9/20/2022**  
**Approved by LEAP Board of Directors:**

## Contents

Context for Self-Assessment.....	2
I. Methodology.....	3
Pre-Phase - Review of Program Data .....	3
Phase One- Design the Process .....	5
Phase Two- Engage the Team .....	6
Phase Three- Analyze & Dialogue .....	6
Phase Four- Recommendations .....	6
Phase Five- Prepare the Report .....	7
Post Phase- Planning.....	7

## 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.

## II. 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
7/1/21; 7/22/21; 9/9/21; 10/7/21; 11/18/21; 12/9/21; 2/10/22	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

<b>I. School Readiness-</b>  <b>Disabilities Services-</b>	<ul style="list-style-type: none"><li>-Impacts of staff turn- over and staff vacancies on school readiness.</li><li>-Ability to provide PD for teachers</li><li>-Program's ability to integrate services and meet standards</li><li>-Data reliability: Curriculum Fidelity and effects of staff shortages to curriculum implementation and assessment reliability</li><li>-How does case management meet needs of children and families?</li><li>-Effectiveness of Parent engagement activities that support school readiness</li></ul>
<b>II. Health Services-</b> <ul style="list-style-type: none"><li>-Safety &amp; Security</li><li>-Active Supervision</li><li>-Emergency Preparedness</li> <li>-Health Protocols</li> <li>-Staff Wellness</li><li>-Parent Engagement</li></ul>	<ul style="list-style-type: none"><li>-Ability of program to support staff wellness</li><li>-Assess health/safety procedures and protocols.</li><li>-Ability of staff to practice active supervision</li><li>-The programs preparedness response to potential emergencies.</li><li>-Assess parent engagement activities related to health services for children and families.</li></ul>
<b>III. Human Resources</b> <ul style="list-style-type: none"><li>-Staff Retention &amp; Recruitment</li><li>-Attendance</li><li>-Professional Development</li><li>-Community Partners</li></ul>	<ul style="list-style-type: none"><li>- Assess ability to provide Staff Professional Development to staff</li><li>-Impacts of vacancies to program services</li><li>-Onboarding and job orientation</li><li>-Assess retention efforts</li><li>-Impacts to Data Reliability</li><li>-Efforts to engage community partners</li></ul>
<b>IV. Program Management &amp; Quality Improvement &amp; Program Structure</b>	<ul style="list-style-type: none"><li>-Ability to provide coordinated, comprehensive services</li><li>-Coordination of procedures; ensuring consistency in services delivery</li><li>-Ability to provide ongoing monitoring for continuous quality improvement: Types of reports, <u>quality</u> and regularity of monitoring.</li><li>-Reliable data for continuous improvement; is data reliable? What are the barriers to reliable data?</li><li>-Assessing program goals to meet community needs.</li></ul>

-Does current program structure meet the needs of the community?

<b>V. ERSEA Enrollment &amp; Recruiting</b>	<ul style="list-style-type: none"> <li>-Assess enrollment plan</li> <li>-Review data re: enrollment, drops and reasons</li> <li>-outreach efforts with community partners</li> <li>-effectiveness of existing recruitment strategies</li> <li>-Identify barriers and develop plans to address</li> </ul>
<b>VI. Fiscal Budget Impacts on services</b>	<ul style="list-style-type: none"> <li>-Impacts of budget constraints to program services</li> <li>-Staff recruitment and retention: How to improve salaries</li> <li>-Identifying current programmatic and agency budget....how to pay staff more and reduce overhead elsewhere?</li> </ul>
<b>VII. Parent and Community Engagement</b>	<ul style="list-style-type: none"> <li>-Identify impacts to parent and community engagement as a result of the pandemic.</li> <li>-Review current engagement activities, identify successes and develop plans for strengthening.</li> <li>-Identify roadblocks and barriers? Look for solutions.</li> </ul>

## Phase One- Design the Process

Date	Action	Purpose
<b>PC Meeting: 2/15/22 BOD Meeting: 2/7/22</b>	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
3/17/22	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
3/17/22	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
3/17/22	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
<b>3/31/22</b>	Draft Self-Assessment Report	Discoveries and recommendations from the Self-Assessment team will be compiled into a comprehensive report
<b>4/12/22</b>	Review of 1 <sup>st</sup> 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
<b>7/7/22</b>	Program Planning Session	Make programmatic decisions, complete program planning and develop relevant improvement plans

---

<b>10/3/22</b>	<b>Approval of Self-Assessment by BOD</b>
----------------	---

<b>9/20/22</b>	<b>Approval by Policy Council</b>
----------------	-----------------------------------

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.

### **III. Self-Assessment Results**

Discoveries and recommendations made during the Self-Assessment will be delineated under the seven 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 ongoing COVID-19 pandemic, the LEAP HS/EHS program has continued to pivot and respond to infection rates and conditions in our community. Effective September 7, 2021 all classrooms slots were offered in person at 100% capacity. Home visits were conducted in person when parents cooperated with mask wearing. In order to reduce contacts, center access was limited to staff who worked in the building. This made contact tracing more manageable when infections were identified. Each center developed a safe and manageable system for the arrival and departure of children. These systems included a health assessment to ensure that children were not symptomatic. Throughout the autumn of 2021 all Head Start staff were required to be fully vaccinated. This program requirement pre-dated the OHS Interim Final Rule. As a result of the vaccine



---

mandate LEAP did experience staff resignations. With the exception of classrooms closed, when necessary, for quarantining, the program continued to offer in person services to children. Parent engagement activities, however, were conducted primarily through virtual or outdoor events (weather permitting). In March of 2022, the program began to schedule in person staff and parent activities. These activities were managed by establishing an occupancy maximum based on the size of the room so physical distance and other protocols could be followed. The 2021-2022 Self-Assessment Event was conducted via a hybrid approach of virtual and in person groups meeting on March 17, 2022. Focus Groups assigned to areas met in teams, presenting data 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

- Google Classroom: many ideas posted for teachers and visitors to access
- Virtual platforms available
- Committee for Preschool Special Education annual transition meeting

- Teachers utilize I Pad, laptops, agency cell phone - exposure to technology, music, books, virtual field trips, virtual google meets with parents, text parents, send photos, videos, home visits, DRDP notes, virtual evaluations and observations-
- Building parent-teacher-school connections through a variety of means
- Prepare families to advocate for children – provide parent training, parent cafe, mental health resources; teacher share goals, strengths, and assist parents in how to register for kindergarten.
- Parent Survey indicates parents are pleased with the program
- Providing services to children with Individualized Family Service Plan/IEPs
- Attendance plans in place as needed
- Children are progressing with the DRDP measures within appropriate ranges even during COVID closures, teachers noted some children are progressing at a slower rate but moving toward kindergarten ready goals.
- Educational packets, information, health and food sent home during closures
- Coaching with Tyra - noted trend: promoting retention within teaching staff, opportunity to ask questions
- Developmental screenings - completed on time for center-based & home-based - this allows referrals to be completed on time
- Transition paperwork sent to Kindergarten
- Individualizing based on children's needs- group communication during Full team meetings. FST meetings
- 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.
- 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
- Teachers provide homework activities
- Teachers sharing goal progression to parents.
- Home Visiting Rating Scale is completed 2x per year.

### **Areas Identified for Improvement**

1. Improve curriculum and standard-based instruction. Focusing on ELOF standards

- 
2. Improve Teacher/New staff orientation. schedule -
  3. Provide more opportunity for staff to share what works, doesn't work or to share ideas. Mentorship program - "Coffee Break" meeting sessions within each center/ each component - time to share what works, doesn't, sharing of ideas; Scheduling time for teachers/components to meet
  4. Align GGK with ELOF and DRDP
  5. Edit/create a lesson plan that follows the day/curriculum - one of HS, EHS, HB - to focus on school readiness
  6. Improve relationships with local school districts and CPSE. Coaching - home base - currently working with HBC on training opportunities
  7. Increase "homework" participation outside of classroom hours.
  8. Program Quality Assessment tool to determine quality and comply with Performance Standards. Fidelity tool classroom checklist vs Quality Stars program
  9. Developing a schedule for "paperwork time;" lesson plans, DRDP, screenings, etc.
  10. Curriculum modifications for children with disabilities to support skill development.
  11. Learning activities should be linked more intentionally to the curriculum based on child assessment reports.
  12. 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.
  13. Improve approach to parent education related to understanding school readiness and the developmental learning domains.
    - a. Develop ways to improve participation and engagement of parents in learning and training opportunities offered by the program.

### **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
  - Continue developing resources and activities to provide for children who are receiving Occupational Therapy, Physical Therapy, etc.

- Disability Manager will order items based on needs/goals if not available; teachers will consult with current therapists for ideas and ways of modifying planned activities.
- Education Coordinator will plan “make and take” sessions for teachers, provide outlets through Share Point (folder to share ideas) among teaching staff.
- Teachers will outline modifications on lesson plans that are reviewed by Education Coordinator. Practice to be implemented by Nov. 1, 2022.
- 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 2023 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.

- GGK (Growing Great Kids: HB curriculum) needs to be aligned to DRDP by June 2022
- Teachers and Home Visitors will receive training on how to fully utilize ELOF.
- Teachers will work with their supervisor to schedule planning time for classroom staff.
- Create an editable lesson plan – for HS, EHS, HB - to focus on school readiness
- 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
- Teachers will focus on social cues, speech needs as the wearing of masks have impeded this.
- Home visitors will align and connect GGK activities with the corresponding DRDP measures effective July 1, 2022.
  - 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.
    - Reach out to local school principals to introduce program and rebuild relationship.
    - 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 2022- Asst. Director and Center Coordinators
    - Schedule meeting with local school district principals and teachers to determine how best to exchange assessment data
  
  - Develop relationship to determine 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
    - Develop a School District contact list.
      - Establish understanding between school district and Head Start teachers to build the bridge for communication between Pre-K, Head Start and Kindergarten teacher;
      - Schedule a meeting to transition children moving up to kindergarten; scheduling visits to kindergarten - in progress
    - **Staff Responsible:** Assistant Director, Education Coordinator, Center Coordinator
    - **Timeline:** Summer 2022
  
  - Develop creative experiences to engage parents in program activities and learning workshops.
    - Identify activities in which parents can participate in a variety of ways...in person, virtually, group socialization, etc.
    - Include questions on parent survey – How to meet their schedules? What types of activities would motivate their engagement? How to capitalize on child's excitement to motivate parent participation? - "remind me" app - text
    - Offer parenting classes that will focus on understanding their child's school readiness skill and the ELOF
    - Offer a monthly newsletter to parents
    - Create a separate quick reference guide for parents with defined roles: parent vs teacher/visitor - who will do what in terms of registering for kindergarten - separate from parent handbook
    - **Staff Responsible:** Assistant Director, Family Services Coordinator, Home-Based Coordinator/Manager, Education Coordinator, Technology Manager, Teachers and Home Visitors.

---

➤ **Timeline:** September 2022

- Develop a teacher/home visitor training and mentorship initiative to assist in reducing turnover and increasing retention and skill building.
  - Teacher/HV/New staff orientation schedule - being revamped - guidebook and orientation schedule
  - Onboard and orient new staff by placing in a classroom with current staff to be trained.
    - Increase the number of “Classroom Qualified” staff. The program will provide professional development to assist in providing the training and education needed to build a team of classroom qualified staff and home visitors.
    - Assign a mentor for hands-on training...pairing new staff with current staff in a similar position
    - Work with fiscal and Executive Leadership to offer stipends for mentor.
    - Continue to provide Coaching to teaching and home visiting staff.
    - The Teacher Guidebooks will be revamped so there are separate sections for Head Start, Early Head Start, Home Base to follow the flow of the program year with more focus on how to complete lesson plans, screenings, Creative Curriculum, DRDP objectives - Quick Reference activities for classroom and home base.
    - Provide Developmental Screening training for all new HS/EHS center-based teaching staff, home visitors.
    - ELOF Alignment tool training - DRDP Alignment with ELOF and Creative Curriculum Objectives - this tool is developed already-teachers & HBV need training; needs to be monitored - lesson plan review
    - Monitoring CLASS observations - develop a schedule to give timely feedback to classroom staff
- **Staff Responsible:** Assistant Director of Center Services and Education, Home-Based Coordinator, Education Coordinator, Teachers and Home Visitors, Practice-based Coach, Executive Leadership team.
- **Timeline:** September 2022 and ongoing

## HEALTH SERVICES

### Focus:

- **How well does the program support staff wellness?**

- 
- **How effective are the program's safety, security and supervision procedures and protocols?**
  - **Are program staff practicing consistent active supervision protocols?**
  - **How prepared is the program in the event of an emergency?**
  - **Assess the quality of parent engagement activities related to health services for children and families.**

### **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
- New Emergency Preparedness Plans for each center. 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 and to make security recommendations. All building were updated with new security systems and panic buttons.
- New fences installed at large playgrounds to separate groups of children.
- All agency vans have snow tires installed for winter month's vs all weather tires.
- New freezers and steam pans were purchased to ensure food storage safety.
- Nutrition Staff are Serve Safe certified.
- Oral Health- Families have dental homes; classroom dental health in good standing.
- 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

- **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.
  - This has been extended from 20-21 Self-Assessment.
- **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 2022.
  - 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.



- Teaching staff will receive training on how to implement active supervision strategies.
- Make Health Care Initiative topics annual parent training events.

### Improvement Plan

- ❑ **River Street Toddler Playground:** The program will utilize American Rescue Funds to cover the cost of renovation and updates to the EHS playgrounds, beginning with the River Street 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 2023
- ❑ 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.
  - Transportation staff will participate in training on how to redirect children's behavior on the buses.
    - **Staff Responsible:** Program Assistant Directors, Education Coordinator, Center Coordinator, Component Area Supervisors, and all program staff.
    - **Timeline:** Complete in March 2022

---

## ❑ 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.
- Will utilize ARP funds to install 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.
- 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.
  - **Staff Responsible:** Program Directors, Education Coordinator, Center Coordinator, Component Area Supervisors, Building and Grounds Crew, and all program staff.
  - **Timeline:** Complete by Winter 2022

## ❑ Emergencies: The Emergency Preparedness Manual must be used to train all center staff and frequent visitors.

- QAR process will continue to evaluate the safety of evacuation/fire drill gathering locations. The QAR should vary locations to practice various evacuation routes.
- Observations of evacuations need to be recorded and a debriefing to occur among program staff.
- When Therapists are first assigned to work at a center they must receive directives on what to do and where to go with the child currently in their care 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.
- Enhancing CTP to cover safety topics.
  - **Staff Responsible:** Program Directors, Education Coordinator, Health Coordinator, Component Coordinators, Transportation Coordinator, and all program staff.
  - **Timeline:** Completed by September 2021

- 
- ❑ **Building and Grounds Conditions:** The Whitehall, Dix and River Street centers are owned by Washington County. The buildings are old and require costly repairs and upkeep.

- Work with the county to resolve water issues in the Dix Avenue basement.
- All centers need an ansul system installed above the stove as the code has changed and the old ansul systems no longer pass inspection.
- Roof on the River Street Center needs replacing. Frequent water leaks during the winter due to ice jams. Bats have also been seen flying in the building.
- Work with the County to remediate any mold and replace sheetrock and ceiling tiles.
- Work with a pest control company to remediate bat issue.

- **Staff Responsible:** Program Directors, Center Coordinators, Executive Leadership, Finance Director and County leadership.
- **Timeline:** Projects to commence over the summer 2022
- Roof Completed by Summer 2023

- ❑ **Parking lot safety is an ongoing concern.**

- 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

- ❑ **Offer Comprehensive Child and Family Health Trainings annually.** Offer the comprehensive training series that the program implemented through the UCLA Health Care Initiative: Dental Health, Physical Health, and Mental Health.

- Training series will be added to the program calendar on an annual basis.
- **Staff Responsible:** Program Director, Assistant Directors, Health Coordinator, Family Services Coordinator, HB Coordinator, and all program staff.
  - **Timeline:** Include in Calendar Development Spring and Summer 2022. Implement as scheduled.

- ❑ **Staff Wellness.** Offer more opportunities to support the health and wellness of program staff.
  - Provide additional scheduled days to provide professional development.
  - Provide a training topics on:
    - Trauma Informed Care
    - Emotional Wellness
    - A.L.I.C.E Training
    - Bridges out of Poverty Trainings
  - Incorporate a Staff Newsletter to bring in wellness tips and staff spotlights.
    - Introduce new staff
    - DEI Topics
    - Changes in Staff positions/locations
    - Testimonials by staff
  - Provide more flexibility, as able, to modifying work schedules and work from home to help create a work: life balance for working parents.
- **Staff Responsible:** Program Director, Assistant Directors, Health Coordinator, Family Services Coordinator, HB Coordinator.
- **Timeline:** Include in Calendar Development Spring and summer 2022. Implement as scheduled.

## 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.**
- **How does staff turnover affect accuracy and reliability of program data?**
- **Assess the program's efforts at retaining and recruiting program staff?**
- **Assess the program's efforts at engaging with community partners?**

## Strengths Identified

---

## **Staff Recruitment / Retention / Professional Development**

### **Recruitment**

- LEAP Head Start / Early Head Start has an active online presence: website, Facebook, Indeed to post job openings.
- Continued use of advertising, marketing and being a presence at community events; utilized LEAP signage around the county, banners, and attending job fairs at local colleges to talk about the benefits of working for LEAP.
- Internal postings for open positions and promoting from within.
- Upon hiring, all staff must be cleared and vetted before starting in their job.
- Job postings include the necessity to wear a mask and to be fully vaccinated.
- Sign-on bonuses for new staff.

### **Retention**

- Staff wellness activities...monthly activities; staff are beginning to adopt practices to reduce stress; breathing exercises, yoga, walk challenges.
- Agency is offering Staff Wellness Activities, Staff Appreciation Days.
- 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).
- Implemented sign-on bonuses and retention bonuses for staff.
- Wellness Committee meets monthly; there are different wellness topics, along with educational materials. Fun activities to engage staff and build employee spirit and morale.

### **Professional Development**

- The program has consistently committed to training staff on curriculum and assessment: 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.
- Regular staff contacts with supervisor and the development of professional development plans and performance improvement plans.

## **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 were vacant for long periods of time, particularly in teaching positions. In order to provide the

- 
- coverage that classrooms needed, Center Coordinators and other administrative staff worked in classrooms or other roles to ensure that services were taking place.
2. Classrooms closed due to vacant teaching positions. 1 classroom was closed all year. 1 classroom had a modified schedule to maintain adult: child ratio.
  3. 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.
  4. Recruiting Efforts: The Indeed website attracts candidates who are not qualified, or who are non-responsive to efforts to contact. Time to sort through resumes that are not applicable to the positions posted is inefficient.
    - 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 examine the wage scale and work to increase the salaries of the teaching staff. Complete by summer 2022.
  - ☐ Incorporate an annual staff survey to identify ways in which the agency can support the ongoing wellness of staff. Complete by Oct. 2022
    - Survey staff about the effectiveness of Professional Development meetings; get feedback on what would make it more effective.
    - Strengthen Professional Development Plans for all staff.
  - ☐ Create a referral bonus for current staff referring a new employee.
  - ☐ Attend any local job fairs as well as any college fairs with education majors.
  - ☐ Participate in community activities.
  - ☐ Tracking system for staff who receiving tuition assistance from the program. Complete by Dec. 2022
    - How long did they stay with us?
    - Were they promoted as a result of their education?
- **Staff Responsible:** Human resources staff, Administrative Staff, Service Area Coordinators, Onboarding Coordinator, Members of the Orientation / Training / Professional Development Committee.
- **Timeline:** Completed by Dec. 2022

---

*Lack of Qualified Applicants & Recruiting Qualified Candidates for Vacant Positions- (Carried over from 2020-2021 Self-Assessment)*

- ☐ Develop the website to enrich the resources available to potential new candidates.
  - Investigate other avenues for posting or advertising open positions: Increase radio spots and add additional local radio stations.
  - Increase partnerships with local colleges; posting in their Career Centers.
  -
- ☐ Revise the hiring procedure to include asking candidates to provide a copy of their diploma and transcripts at their first interview.
  - Develop a system to track how candidates heard about job openings. The data collected will allow us to identify where we need to be applying our resources.
- ☐ Implement merit-based raises to reward high performing staff.
  - Develop a brochure that will attract potential candidates and outlines all the benefits of working for LEAP Head Start. This can be included on the website, attached to applications and available at community events and locations.
  - Promote the program's generous benefit time to attract candidates.
  - **Staff Responsible:** Human resources staff, Administrative Staff, Onboarding Coordinator, Members of the Orientation / Training / Professional Development Committee.
  - **Timeline:** Completed by Dec. 2022

### **Professional Development**

- ***Discovery:*** Due to high staff turnover there are many new staff working for the program who require a "back to basics" training for successful implementation of program services.
  - ☐ Teaching staff trainings covering topics: setting up the environment, implementing a classroom routine, curriculum implementation to fidelity, intention teaching strategies, time management, and team communication.
  - ☐ 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:** Practice-based Coach, Education Coordinator, Assistant Director of Center Services and Education, Administrative Staff, and Onboarding Coordinator.
  - **Timeline:** Completed by Dec. 2022

- **Discovery:** *A process is needed for identifying staff training*
  - ☐ Develop uniform training topics to provide opportunities for report filtering by training topic in ChildPlus. **\*\*Discovery/Recommendation also reported last year**
  - ☐ 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.
    - Utilize IPDP to identify and track professional development.
  - ☐ 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.
- **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. 2022

## Family & Community Engagement

### Focus:

- Evaluate the program's ability to effectively establish relationships with families that assist in development of family goals.
  - Identify roadblocks and barriers. Look for solutions.
- Assess the program's ability to engage families and the impact this has on family outcomes.
- Review current engagement activities; identify successes and develop plans for strengthening.
- 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**

- Policy Council parents developing “Donation Boxes” to be installed at centers for families to access non-perishable food and other home items.
- Strong community partnerships for holiday assistance.
- Resources regularly shared with families.
- Provided services throughout COVID: educational materials, virtual parent meetings, classrooms open, meals for families in quarantine.
- Returned to full in person services as soon as possible.
- Invite community partners to component meetings.
- Staff relationships with families is strong and overall families are comfortable with staff.
- 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

### **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 Spanish-speaking staff to fill vacancies has been challenging for all positions.
2. Policy Council participation is poor. Need to increase membership and consistency in attending meetings.
3. Increase participation in Home-based Socializations.
4. Increase staff awareness about their role in parent engagement.
5. Increase participation and engagement of families in program-offered activities: Parent cafes, Parenting Classes, volunteering, parent conferences, policy council, and socialization events.
6. Parent Communication: Parent data indicates that they would like to see improved information regarding program closure and staff changes.
7. Approach to Family Engagement: Should be more focused on the parent/family’s strengths.

---

## Improvement Plan

- The program needs to build the policy council by looking at ways in which the policy council members can connect with other families and bring issues, concerns and questions from the parents at their center/caseload to the council.
  - Training conducted with existing PC members on their roles and expectations.
  - Training for staff to understand the role of PC.
  - Re-organize the family engagement calendar to ensure there are “center committees” and that there is a business agenda for each meeting. Connect the monthly center committee meetings to PC by having PC members participate in the committee meetings.
  - Involve “center committees” in the development of the “Café” calendar. This will ensure that the topics are meeting the needs of the enrolled families.
- 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, as able.
  - The program will develop a “Parent Committee” to work on developing parent engagement events around the strengths and interests of parents and volunteers.
    - Utilize surveys to find out what current families are interested in.
    - Provide Homework incentives- bottle drive donations, sunshine fund donations.
  - Parent Committee to develop activities that are age appropriate for EHS children, as well as, HS children.
  - Ensure that Parent 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.
    - For Large Family Events explore offering it in the southern and northern part of the county.
  - Work on developing ways to assist parents with transportation to attend events.
  - 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.
  - **Staff Responsible:** Program Directors, Family Services Coordinator, Home-Based Coordinator, Education Coordinator, and all program staff.

- 
- **Timeline:** September 2022

**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**

- Program has been able to fill EHS vacant slots within one day of a child dropping. Healthy waitlist.
- Program has developed plans for addressing poor attendance.
- Program has developed resources for recruitment events.
- 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.
- Selection Criteria updated.
- Increased MOU's and re-building community partnership relationships.

**Areas Identified for Improvement**

1. Recruitment and Enrollment: The program is under-enrolled and needs to increase recruitment and enrollment activities to maintain funded enrollment. Feet on the Street efforts.
2. 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.
3. Attendance issues are on the rise.
4. Eligibility process in ChildPlus: Notes regarding a family's eligibility need to improve and provide more information.
  - a. Identifying other needs in a family that may qualify them with points according to our Selection Criteria.
5. Improve kinship care applications

**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 establishing partnerships with Wait House, BOCES, Glens Falls Hospital Snuggery unit, local High School Guidance Counselors and OB/Gyn. offices.
  - The program will assign staff to regularly participate in recruitment events.
  - Calendar & track success of recruitment events.
  - Monitor recruitment data during monthly ongoing monitoring meetings.
- ❑ **Enrollment:** 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.
  - Track referral sources and follow up with a thank you.
  - Staff need training on completing eligibilities.
  - Family Service staff need to complete an ERSEA procedure/ handbook to use for training new staff and to ensure consistency.
- ❑ **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.

## Fiscal

### Focus:

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

## Strengths Identified

- The agency, including a special review of the Head Start Fiscal Requirements, has been audited annually by an outside firm, EFPR. There have been no findings for several years in a row.
- Competent Fiscal Team: Highly skilled team with tenure. Each member with a unique set of skills and strengths.
- Fiscal Team works toward the same goals and agency mission.
- Personnel: Agency offers competitive fringe benefit package- with paid time off, paid holidays, and good medical insurance to the employee. 85% of the cost of health insurance is covered by the agency.
- Agency operates at a fringe percentage rate under the threshold; operating fringe in the most efficient manner.
- Agency conservatively budgets for fringe to account for increases.
- Agency budgets for program by evaluating what we not doing as a result of monitoring each year- are creating wish lists to ensure that items of need are budgeted for.
- Agency has other workforce development programs funded by another source other than Head Start (WIOA) that can be used for certifications required by Head Start, therefore making T/TA money available for additional staff training.
- 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. Some tasks (clerical and administration) are split between different jobs. Although we apply for and are grateful for the annual COLA provided through additional funding from OHS, it does not make up for the personnel requirements (Comprehensive Background Checks, increases to NYS minimum wage, NYS Paid Family Leave) requirements. This over burden directly affects staff retention.
2. Fringe: The defined benefit plan creates a large agency liability. The plan is currently under-funded and is frozen since 2010 (and will continue to be so). There are 119 people involved in the plan. The agency is required to put approximately \$40,000 of Head Start dollars in the plan every year.
3. Increased Cost of Health Insurance: The 2-person or family plans are not affordable for staff. It was determined that the increasing costs of health insurance are an external factor the Agency cannot control. The agency will look at other ways to assist staff.
4. 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, although there is a positive trend in that more money is generated year over year (from \$300k to \$725k in five years).

#### **Improvement Plan**

- 
- ❑ The program will create a work group to examine organizational function and structure at the Administration level; specifically fiscal, HR, and staffing patterns with the goal of relieving burden of extraneous activities. The program will then consider where cross-training for these functions may be able to occur, and provide that training to spread out the administrative burden.
    - **Staff Responsible:** Executive Director, Finance Director, Head Start Program Director, HR Director, Program Administrative Staff (ASM), Board of Directors and Policy Council
    - **Timeline:** Winter 2022
  
  - ❑ Provide a Marketplace Navigator at the Open Enrollment Meeting as part of training so that people can receive information about how to insure their family members. Reducing the overall cost to the employee (employee is insured by LEAP, family insured through the Marketplace). We will train staff on the Deductible Reimbursement Benefit.
    - **Staff Responsible:** Human Resources Director, Partners- Jaeger and Flynn, and Fidelis.
    - **Timeline:** In process and ongoing. Will get an estimated completion date from partners. Agency will have a Navigator at the next open enrollment meeting in Fall of 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 also revise 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:** Summer 2022
  
  - ❑ Community Engagement efforts is the overarching solution for all fiscal needs. The agency will increase its outreach efforts with the goal of raising funds. 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.
    - **Staff Responsible:** Board of Directors, Outreach Coordinator, Executive Director, Finance Director and Program Directors.
    - **Timeline:** Ongoing

---

## **Program Management & Quality Improvement Program Structure**

### **Focus:**

- **Identify the program's ability to provide coordinated, comprehensive services throughout the year.**
- **Pandemic Impacts: How effective was the program's response to providing remote services to enrolled families during times when classrooms were closed?**
- **Identify the effectiveness of coordinating services and ensuring consistent delivery of comprehensive services.**
- **Effectiveness of ongoing monitoring and implementation of continuous program improvement. Examine the types of data reports used, quality and regularity of monitoring.**
- **Ensuring reliability data for continuous improvement and service delivery: Is data reliable? What are the barriers and roadblocks? How can we improve?**
- **Assessing program goals; are we meeting the needs in our communities?**
- **Current program structure? Does it meet the needs in our communities?**

### **Strengths Identified**

- Safe Transportation provided by program.
- Strong Family Advocacy and support provided to families.
- New Positions added to program: Parent Engagement Manager and Onboarding Coordinator.
- Strong community partnerships
- Annual program and case management calendar provides a consistent structure for communicating and delivering services.
- Communication systems are planned and scheduled. Regular meetings are established between service area staff and supervisors, case management meetings to support staff and families.
- Implementation of a "Recruitment Plan" with scheduled events and assignments to staff.
- Committee Structure to work on improvement plans and involve a cross section of staff.
- Made big strides with accessing supports for our Spanish-speaking families: volunteer translators, Rosetta Stone purchased, Partnership with the College of St. Rose to translate forms, Members of the Community Stakeholders meeting,

- Technology improvements made: updated computer equipment, smart phones, internet access improved, Microsoft 365 coming soon.
- Improved data reports to inform on program services: Staff becoming more adept in using ChildPlus. All documentation is completed in CP. Reports are graphical and easy to read.
- Scanning used for attendance and meal counts- goes directly into CP.
- Dedicated staff; resilient in regard to ongoing changes.
- Safe environments; Policies and procedures are in place to assist in ensuring healthy and safe services. Staff and child/family safety is program priority.
  - Supervisors observe and inspect regularly for safety and compliance.
  - Systems in place to train staff on policies and procedures.
  - Regularly scheduled (monthly) ongoing monitoring meetings to review data and discuss and implement immediate changes.
  - Security system upgrades to all centers.

### **Areas Identified for Improvement**

1. Internet accessibility, though improved, continues to be inconsistent and can be impactful to virtual meetings and ability to connect to CP.
2. ChildPlus data: With so many new staff it is important to continue to commit the time and resources to training and consistent implementation of documentation standards.
  - a. Not all staff are utilizing the reporting abilities to its fullest potential; noted that program needs to improve utilization of system to better access information related to family services and needs.
  - b. Implementation of a shared drive will improve staff usage of forms and procedures. Training will be needed once Microsoft 365 is implemented.
  - c. Consistency is needed in CP documentation. Errors are found in files which affects the efficacy of data.
3. Double Session Classrooms are difficult to fill in centers where there are large Pre-K programs offered. Need to fill our slots. Many vacancies and attendance issues.
4. Staff Vacancies, absences, and lack of qualified candidates. This directly impacts all program services. Will ultimately affect the program's ability to provide services to children and families that are recruited. Concern over lack of education staff and home visitors.

### **Improvement Plan**

- ☐ Internet Accessibility: The program will work with technology support group to improve internet accessibility.
  - Program will upgrade old computer laptops to ensure they are connecting correctly.



- 
- ❑ Strategy to Improve Accuracy of Program Data and Reporting: ChildPlus Committee will continue to take feedback from program leaders and staff to streamline documentation and provide training to staff and supervisors.
    - New program staff and leadership will receive CP training.
    - Develop a CP Program Users Guide
    - Monthly Audits by Program Coordinators to ensure documentation is being done correctly.
      - Professional Development and Performance Improvement Plans will be provided to staff who demonstrating documentation errors.
  - ❑ Technology and Outlook training to all staff to increase effectiveness of communication. Fall 2022
  - ❑ Review the Community Needs Assessment to verify that local communities' needs are being met with our current program structure. Fall 2022
    - The Granville Center is located in the Mary J Tanner Elementary School. Thee school district will be moving from a half day Pre-K to a Full day Pre-K program. This will have adverse effects on the Granville enrollment.
      - Search for a location to provide services to the Granville Community outside of the school district.
      - Offer transportation services to families who need transportation.
    - Plan with the Executive and Program Leadership team to identify community needs. Address how well our services are providing for the needs in our community.
      - Complete a Change of Scope application if community and program data supports the change.
    - **Staff Responsible:** Executive Director, Program Director, Administrative Staff, BOD, Policy Council.
    - **Timeline:** Completed March 2023
  - ❑ Internet Accessibility in Centers: The internet accessibility in program buildings is very spotty and often staff are unable to access the internet or participate in virtual meetings. The program is meeting with vendors for estimates on how to boost internet accessibility and to provide a cloud based system for data and file sharing to be used agency wide.
    - **Staff Responsible:** Executive Director, Program Director, Finance Technical Support Coordinator
    - **Timeline:** Fall 2022

## IV. KEY INSIGHTS

### Discoveries: Management Systems

#### *Technology & Information Systems*

##### **Discovery:**

- *ChildPlus limitations for recording and reporting professional development needs of staff*
- *Accuracy of ChildPlus PIR reports found to be due to lack of staff training and variations of documentation.*
- *Unstable internet interfere with staff ability to work and perform functions of their job.*

##### **Recommendations:**

- ☐ ChildPlus Training to identify a way for entering the professional development needs of staff in the ChildPlus system and filter for those needs on a report.
- ☐ ChildPlus Training in service area modules. Consistency in documentation is needed to ensure reliability of data.
- ☐ Develop a data entry guide with specific examples of how events and actions should be documented.

#### *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:**

- ☐ 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.