
Self-Assessment Report

Section 1. Introduction

Program Description

Children First is a single purpose agency operating Head Start and Early Head Start through center-based program options in the State of Florida: Sarasota County. The agency oversees 13 sites in several urban and suburban communities throughout the county, all within a 35-mile radius from its main campus located in downtown Sarasota. The majority of the classrooms are direct-run by the grantee with partnership sites residing in county public schools and civic organizations. The program has strong ties to the communities it serves in Sarasota, Venice, Venice Island, Nokomis, Osprey, North Port and Englewood. Total enrollment as of April 30, 2016 was 306/312 slots in Head Start and 220/216 slots in Early Head Start.

Children First Head Start/Early Head Start Program has five broad goals for the five-year project period:

- **Goal 1**: CF will develop a well-articulated, comprehensive orientation, training and staff development system that addresses the training needs of each position within the program.
- **Goal 2**: CF will increase its capacity to address family well-being especially in the critical areas of mental health and community resource navigation via a strengthened program infrastructure.
- **Goal 3**: CF will employ high quality instructional strategies to ensure positive child outcomes across each of the five essential domains identified by the E/HS Program.
- **Goal 4**: CF will provide continuity of care to families enrolled in the EHS program by increasing its annual service delivery model by eight weeks.
- **Goal 5**: CF will strengthen monitoring and supervision systems such that roles, responsibilities, procedures and accountability are clearly articulated and easily managed.

Context for Self-Assessment

Prior to this year's Self-Assessment, our management team began by reviewing last year's Self-Assessment report, including our evaluation of last year's process. Last year's Self-Assessment had two key recommendations:

- Develop and implement a comprehensive training system for individual position-centered professional development
- Develop a systems approach to review and analyze the program service area monitoring systems
- Increase program wide access to expert knowledge in the service areas of health and mental health to increase quality of service delivery to children, their families and our staff

The Community Needs Assessment was updated eight months ago. The assessment identified an increase in the homeless population, as well as the number of Hispanic families new to the area. Initial meetings were held with area outreach agencies to establish partnerships. During Self-Assessment, the partnerships with each of the agencies were evaluated.

Data summaries that were collected through ongoing monitoring of each service area were rolled up into a Year in Review report. We noticed there were a few procedural systems errors in regard to environmental health and safety, and health data tracking within the database (COPA). The frequency raised concerns and the team decided to take a good look at our record keeping and reporting procedures during Self-Assessment.

Progress towards program goals and objectives were tracked on a quarterly basis. A point of focus during Self-Assessment was to identify whether the progress has been satisfactory and whether there is a need to revise any objectives.

Items from our community assessment and ongoing monitoring summaries were prioritized, service area sub-groups were created and questions for consideration were reviewed by each sub-group when analyzing the data.

Self-Assessment Sub-Groups:	Questions to Consider:
Program Governance/Leadership	<ul style="list-style-type: none">▪ Does it relate to a bigger theme?▪ Is it systemic?▪ Is it an urgent issue that wasn't resolved through ongoing monitoring?▪ Does it relate to our program goals?▪ Would it benefit from a fresh perspective?▪ Does it affect our ability to do everything we can to ensure the best outcomes for our families and children?▪ Does it represent a strength that could be applied in other areas? What strengths do we have that we can use to address other issues?
Management Systems	
Fiscal	
Comprehensive Services	
ERSEA/PFCE	
School Readiness/CLASS	
Health & Safety	

Section II: Methodology

Date:	Action:	Purpose:
February 4, 2016	Management Team Meeting	<ul style="list-style-type: none"> • Power Point Presentation on Self-Assessment: Our Journey • Discussed OHS new process, Best Practice, On-Going Monitoring, and 5 Phases of Self-Assessment • Identified potential internal and external team members (See attached list of team members.)
February 18, 2016	Policy Council Meeting	<ul style="list-style-type: none"> • Reviewed 2014-15 process and evaluation • Discussed 2015-16 Journey • Recruited Policy Council members for PDM Committee: Self-Assessment Team
February 2016	Information meetings with Governing Board and Policy Council	Discussed plan for Self-Assessment
February 19 - March 2, 2016	Recruitment and orientation of team members	Formed Self-Assessment Team
March 3, 2016	Welcome Meeting: Our Journey	<ul style="list-style-type: none"> • Power Point: Self-Assessment: Our Journey • Oriented Team Members • Reviewed Roles & Responsibilities • Based on the OHS guidelines, data as summarized in the Summary of Progress on Goals and Objectives and Summary of Ongoing Monitoring forms, (See attached) the following subgroups were formed: <ul style="list-style-type: none"> ○ Program Governance/Leadership ○ Management Systems ○ Fiscal Integrity ○ ERSEA/PFCE ○ School Readiness: CLASS ○ Comprehensive Services ○ Health & Safety • Assigned team members to appropriate subgroups, named team leads • Reviewed Calendar, Timeline of Events & Next Steps
March 10, 2016	Extended Management Meeting	Self-Assessment Overview
March 4 - April 19, 2016	Sub Group Meetings	Subgroups met to discuss their focus areas, including exploring systemic issues, examining progress on goals and objectives, and formulating discoveries to be shared with the entire Self- Assessment Team
April 20, 2016	Self-Assessment Team Meeting	Self-Assessment Team participated and shared discoveries from individual subgroups, with directives to organize them into common themes, and make recommendations for Self- Assessment report.

April 21 – May 5, 2016	Development of Self-Assessment Summaries	Develop Self-Assessment Report templates.
May 6, 2016	Sub-Group Monitoring Data & Recommendation Reports	Collect subgroup summaries and begin formulating the overall report
May 7 – 13, 2016	Finalize Self-Assessment Report & Continuous Quality Improvement Plan	Complete Report
May 14 -23, 2016	Email Report	Share with E/HS Director and Sub Group Team Leads for final review and approval
May 24 – June 10, 2016	Governing Board & Policy Council Meetings	Obtain required approval from Governing Board /Policy Council
June 13, 2016	Submittal	Submit to Regional Office

Section III. Key Insights

Strengths

- + Clearly written policies, procedures, and orientation training for Policy Council and Governing Board
- + Strong Board and Policy Council presence within the program and community
- + Robust Fiscal Management systems
- + All program site's playground spaces meet and/or exceed the US Consumer Product Safety Commission, state, and local requirements
- + In-house Committees to establish, maintain and/or surpass quality initiatives and program standards to ensure superior service delivery
- + Solid community partnerships offering support services for children, families, and program staff
- + Well established ERSEA policies and procedures
- + Continued upward mobility and improved assessment scores for E/HS children
- + Ability to acquire Health Status determinations and medical homes for E/HS children
- + Health Insurance for children and families = 97%
- + Up-to-Date Immunizations at time of enrollment = 95%

Systemic Issues

- ✓ Need to provide sub-group/cluster training to Policy Council representatives in addition to the on-board orientation training; so each member may fully understand the roles and responsibilities of Head Start Leadership & Governance
- ✓ Need to develop and implement a Staff Recruitment and Retention plan to include strategies around marketing, building partnerships with higher education institutions and a clearly defined Career Lattice.
- ✓ Need to review and revise our emergency preparedness plans to include shelter off site agreements, communication, and practice with all staff

- ✓ Need to provide sub-group/cluster training and communication to all responsible staff on database tracking, record keeping and reporting as it relates specifically to Health Data and Outcomes for children and families

Areas of Innovation

- System for the recruitment, training and on-going professional development for parents as employees
- Committees: Health & Safety, Professional Development, and School Readiness
- New Staff Orientation by position
- Fiscal policies and procedures to determine personnel costs by site
- In-house Mental Health resource and referrals
- T Drive for documenting and updating staff professional development
- Playground Safety systems

Progress in Meeting Program Goals & Objectives

Goal:	Objective: Year One	Outcome Status:
CF will develop a well-articulated, comprehensive orientation, training, and staff development system that addresses the training needs of each position within the program.	Analyze 100% of the current system for NEO, initial and ongoing training, and professional development planning and tracking	Analysis completed by the Professional Development Committee. Enhancements were made to the current Performance Management System to include Professional Development Planning and Tracking of training and credentials through agency T drive
CF will increase its capacity to address family well-being especially in the critical areas of mental health and community resource navigation via a strengthened program infrastructure.	Develop a system for providing meaningful information to families at 100% of program sites, on specific topics that support well-being – AND – Increase the percentage of families who follow through on mental health referrals from 75% to 90% through the hiring of a mental health manager	Topic Training Resource kits were developed by the Family Advocate Coach and distributed to each center for use by the Family Advocate staff for parent training Outcomes continue to be measured and have been reported as 88.2%, to date Mental Health Manager hired
CF will employ high quality instructional strategies to ensure positive child outcomes across each of the five essential domains identified by the HS/EHS program.	Develop and implement a system that compares classroom environment assessment scores to child outcomes for 100% of classrooms	Outcomes Report utilizes data that includes all classroom assessment scores. Area for innovation will be filter program wide data down to site comparisons for classrooms and share report with staff to measure impact, improve teaching strategies and overall outcomes for children

CF will provide continuity of care to families enrolled in EHS by increasing its annual service delivery model by eight weeks.	Through direct service and/or in collaboration with community partners, the program will increase the provision of comprehensive EHS services by 8 weeks to an additional 24 families	EHS services were extended by 8 weeks to 24 additional families from June through August utilizing existing EHS staff
CF will strengthen monitoring and supervision systems, such that the roles, responsibilities, procedures and accountability are clearly articulated and easily managed.	Increase capacity in the area of Family and Social Services by 4% through the hire of an additional, part-time Family Advocate Coach	Mid-Course Goal Correction to be made in regard to this action item. An additional, part-time Family Advocate Coach will not be hired at this time

Section 4. Recommendations

These recommendations encompass the categories of progress on goals and objectives, systemic issues, and/or innovations.

- ❖ Create a new program goal to support our culture of health and safety for children and staff
- ❖ Review and update emergency preparedness plans to include shelter off site agreements, communication, and practice drills with all staff
- ❖ Develop orientation and staff training protocols and procedures to ensure all staff receive the necessary training by position and ongoing support
- ❖ Develop a spreadsheet to compare all classroom environment assessment data on one tool that filters program information to compare sites/classrooms within each region, including Staff Credentials and Experience, to be shared with staff in coaching sessions to improve teaching strategies and overall outcomes for children
- ❖ Develop, implement and track a Program Governance & Leadership training plan for Policy Council Members
- ❖ Develop, implement and track a Staff Recruitment and Retention Plan
- ❖ Develop, implement and track an on-going training plan for the intended use of the agency database system to ensure accurate record keeping, reporting for program management

Section 5. Continuous Quality Improvement Plan

Under Separate Cover