Olympic Educational Services District 114
Head Start/Early Head Start Program

Self-Assessment Report

Date:
2015-2016

Section 1. Introduction

Program description

Olympic Educational Service District 114 (Olympic ESD 114) is a regional educational agency operating Head Start and Early Head Start through center-based, home based and family child care options. We serve 134 children in Early Head Start that includes pre-natal families and infants ages birth to 3 years old, and 170 children ages 3 - 5 in Head Start. Olympic ESD 114 is part of a formal partnership with the Port Gamble S'Klallam Tribe, Suquamish Tribe and Kitsap Community Resources to coordinate Head Start services in Kitsap County. As of May 2016 the program served over ____; ____ Head Start and ____ Early Head Start with the full year program continuing to enroll through the end of the program year July 31, 2016.

Olympic Educational Services District 114 Head Start/Early Head Start Program has five broad goals for our five year project period:

- Goal 1: Provide high quality comprehensive services to infants, toddlers, pregnant parents and pre-school aged children including home visiting services with a focus on under-or-unserved populations.

- Goal 2: Program will form strategic alliances within the community to support and sustain program services, including providing technical assistance and outreach.

- Goal 3: Encourage a supportive work environment for all staff and volunteers by providing robust training, focused supervision and an ample substitute staff program.

- Goal 4: Provide a variety of opportunities for positive family engagement and links to services in the community to support continued growth.

Context for Self-Assessment

1. The leadership team came together to review the Self-Assessment 2014-2015 Self-Assessment process at the beginning of the year. Time was spent reviewing the process as well as following up with the action items that were developed. Last year's Self-Assessment had these key recommendations:

    - Re-structure the job specific surveys for staff into a concentrated content area survey to hone in on professional development and training needs allowing the program to identify common themes that could lead to a stronger development plan for employees.
    - Allow more time for employees, community members, and parents to give input through round table discussions and surveys.
    - Re- Structure Supervision Model Based on the ongoing action plan. During the Self-Assessment the team will come together to participate in activities geared to prompt discussion on workload, job responsibilities and current supervision in order to re-structure in the best way.

2. We updated our community assessment in February 2016. The community assessment highlighted Adverse Childhood Experiences (ACEs) in our service areas. Based on this data, this year we have aligned our Selection criteria with ACEs which will support our 5 year grant goals, while still making sure other risk factors are represented.

3. As part of our ongoing monitoring we reviewed quarterly report summaries and

took time to highlight any important strengths and growth items that were happening .Through monitoring we noticed that there were a number of classrooms that were using different procedures for pick up lists. Although all sites have the pickup alerts, not all pieces of the pickup alert are in the same place consistently. The concern raised with was for substitute staff or staff not regularly at sites filling in would not know where to find pick up alerts if they are not all located in the same spot at each site. We decided to take a good look at the procedure and training plan during the Self- Assessment.

4. As part of the 5 year grant we have been tracking the progress on our program wide goals written into the grant using the summary and progress worksheets. In addition we have strategic planning goals that we are also monitoring progress on a quarterly basis. We want to take a look at progress for the year during Self- Assessment and identify whether we are satisfied with our progress and whether we need to merge our strategic plan goals to align with our 5 year grant goals.

5. Our Early Head Start Partnership grant has now been in effect in our program for one year. We would like to take a look at the systems established around assessment and alignment of services. With input from our providers and staff the outcome of discussion with a program consultant will be to align our assessment processes.

6. We then prioritized the items from our community assessment and ongoing monitoring summaries and data collection. We came up with the following items for the Self- Assessment team to consider:

Subgroup	Questions to Consider
Program Supervision Model	• How can we improve a streamlined focus of supervision? • What are each leadership team member's job description and are responsibilities clearly mapped out. • What is on each team members work plate? • How are team members organized in order to get tasks accomplished?
Policies, Procedures and Forms	• Are policies, procedures, and forms up to date? What systems are in place to maintain these files? • What is the most effective form of dispersing program policy, procedure and forms so all staff have the most up to date copy throughout the year?
EHS and HS Child Care Partnerships	• What kind of feedback are we getting from providers around implementation of program support services? • How is our efforts progressing around consolidation of staff and visits out to providers? What are the strengths and challenges? What might we want to change? • How can we align our assessment process to be supportive of providers and the work they are doing with children and families? • What are the strengths and challenges of each of the partnerships?

Subgroup	Questions to Consider
Recruitment and Retention	- Have our efforts to increase attendance and reduce absenteeism and tardiness been successful? - What are new and innovative ways to increase our recruitment efforts? - Has case load turnover impacted child outcomes? - Does improved attendance correlate with improved outcomes for individual children?
Training and Technical Assistance	- How can trainings become more individualized to senior staff members so that their professional development is continually being addressed with relevant training? - Are we providing relevant and needed content area trainings to our staff? What are our strengths? What are the challenges? How can we improve?
Safety	- Are there things that we need to do to strengthen our safety systems? - How are our safety checklists working? Do our systems need to be evaluated to reduce duplication? - What strengths have we seen and what challenges have occurred in regards to Health and Safety?

Section 2. Methodology

Date	Action	Purpose
November 2015	Leadership Team meeting	- Developed SA plan with tasks and timelines. - Based on the data in our Strategic Plan, Action Plan and Ongoing Monitoring forms, recommended the following areas of discussion: - Program Supervision Model (ongoing) - Program Manual/Forms (ongoing) - Recruitment/Retention (ongoing) - T/TA plans for staff - Budget coding/monitoring - EHS CCP alignment of services - Team members include: Director, Assistant Director, Content Area Program Managers, Policy Council, Program Staff, and a total of 164 parents and community representatives
December 2015	Policy Council/Governing Board Approval of timeline, School Readiness Data Analysis and Planning, Update to 2014-2015 Action Plan.	- Policy Council/Governing Board approved the timeline/methodology for this year's Self-Assessment. - Reviewed/updated last year's Action Plan and discussed focus areas for this year's SA. - Team came together to analyze School Readiness data.

| January- March 2016 | Content Area Surveys out to Teams.

Pulse Survey | A focus area for this year was to give members of the Team more time to complete surveys and have discussions. With this there was an identified need to enhance T/TA for staff members. This year's surveys were created to be focused on content area with regards to T/TA needs and planning. Teams included:
Health Policy Council Pre- School Classrooms Family Services Home Based EHS Center Based Health Advisory Committee Pulse Survey taken with focus around program strengths, comfort levels and areas of improvement. |

February- May 2016	Analyze/Synthesize Health/Safety Observation	To gage the quality of our health and safety throughout the program. A time where the team can see whether policies and procedures in place are working or if modifications need to be made. Assures compliance with performance standards.
April – May 2016	Complete Parent Surveys	Parents are able to contribute input into the quality of services and educational outcomes from the year that their families and children have experienced. Also drives data to show what areas of improvement are needed and what services are missing based on needs.
May 2016	Focus Areas, Collect Data on PIR, CLASS, file reviews, health deadlines, Budget Coding, EHS CCP alignment of services	Systematic issues are explored, progress on goals and objectives are examined. Team synthesizes information, leadership team reviews and analyzes results, Systems are put into place, and Action Plans are created by identifying corrective actions and recommended changes. Policy Council Approval

June 2016	Development of Self-Assessment Team Meetings Approvals	Self-Assessment is organized into common themes and recommendations are made for development of Self-Assessment report. Share and receive governing board Approval of Self-Assessment Report
Ongoing	Program Supervision, Program Manual/Forms, Recruitment and Retention Monitor and Assess progress in implementing Action Plans.	Ongoing meetings with teams to discuss these topics and develop plans to implementation of systemic improvements.

Section 3. Key Insights

Strengths

- ✓ Our EHS Child Care Partnership Program is improving environments at provider sites. We are pleased that these environments are supporting the community providers in delivering strong quality services to their children and families.
- ✓ Ninety-five percent of preschool center based families report their child making progress on meeting program school readiness goals.
- ✓ Families on Health Nutrition Advocate caseloads report success in

getting access to dental exams for the first time and also being caught up on immunizations since being enrolled in the program.

✓ Any other strengths we want to include?

Systemic Issues

✓ Need to review and revise our forms and procedures manual with a new process of maintaining most up to date documents for staff use.

✓ Need to revise our initial hire health paperwork so staff will receive forms upon offer to make sure that all health forms are in place prior to starting work with the program.

✓ Need to create a training plan that focuses on newly hired staff receiving required trainings regardless of what time of the year they are hired.

✓ Need a new Organizational Structure where job responsibilities are clearly outlined and streamlined to better serve staff and children and families.

Progress in meeting our goals and objectives

Goal	Status
Provide high quality comprehensive services to infants, toddlers, pregnant parents and pre-school aged children including home visiting services with a focus on under-or-unserved populations.	- Trainer Kody Russel came to do ACEs training for staff and training evaluations were reviewed - Pulse Survey Data was reviewed along with the Community Assessment where there was a change in the program's selection criteria. - Initially starting conversations and creating systems. - Reviewing how to align different content areas of program into ACEs work.
Program will form strategic alliances within the community to support and sustain program services, including providing technical assistance and outreach.	- Data from UCLA has not been available yet - We have provided 5210 Training, ordering the health institute books and implemented work into the home visiting program. - Health Nutrition Advocates will conduct trainings at family gatherings. - Challenges we might face are tracking the data without pre/posttest.
Encourage a supportive work environment for all staff and volunteers by providing robust training, focused supervision and an ample substitute staff program.	- Participation of family and interagency coordinating council with staff participation. - Meeting with school districts to collaborate on MOUs for extra support - Teachers attending IEP meetings with families and building staff capacity to assists families in the process. - Moving forward IEP/IFSP training is needed. - We will need to track participation in county meetings with DCFS workers.
Provide a variety of opportunities for positive family engagement and links to services in the community to support continued growth.	- Need a support and coaching system - Staff are setting goals, developing individualized professional development plans with discussion on the current All Staff model and discussing relevant program option needs. - Challenges to track are vacancies, levels of differentiation to meet diverse needs of staff, child turn over and more children being identified with special needs.

Section 4. Recommendations

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

- Create an organizational structure that allows for streamlined, efficient work load to better serve children, families, and staff.

- Revise procedure and forms manual to allow staff access to the most up to date forms.

- Align assessments and job responsibilities within the EHS Child Care Partnerships and Child Care Connections Program.

- Create a training plan that focuses on newly hired staff receiving required trainings regardless of what time of the year they are hired.

- Implement program wide system of pick up alert system so it is consistent across all classrooms in the program.

- Revise the budget coding for operational funds and parent activity funds.