

**Audubon Area Community Services, Inc. Head Start Program
2021 Self-Assessment Goal**

Long Range Goal: Minimize DataSay file check findings by assisting staff with self-monitoring techniques.

Short Term Objective: Training staff on self-monitoring processes.

Expected Outcome: Improve alignment of data entry and file checks.

| # | Strategies | Person(s) Responsible | Timeline | Progress Noted |
|----|--|-----------------------|----------------|----------------|
| 1. | Train staff to use the revised monitoring plan. | Each Team | November 2021 | |
| 2. | Provide resources on how to effectively use the monitoring plan. | Each Team | November 2021 | |
| 3. | Provide online training on monitoring such that field staff and managers can effectively use reports to identify missing documents and data. | Each Team | December 2021 | |
| 4. | Review, revise and/or retrain on peer review processes. | Each Team | October 2021 | |
| 5. | Make checklists available for self-checking files. | Each Team | September 2021 | |

**Audubon Area Community Services, Inc. Head Start Program
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Long Range Goal: Increase efficiency and effectiveness of Child/Family Staffings.

Short Term Objective: Review the Child/Family Staffing process.

Expected Outcome: Improved outcomes as a result of effective communication among content areas.

| # | Strategies | Person(s) Responsible | Timeline | Progress Noted |
|----|--|--------------------------------------|------------------|----------------|
| 1. | Analyze data to measure effectiveness of child/family staffings. | Data Analysis Specialist | October 1, 2021 | |
| 2. | Identify areas of opportunity and develop support plans. | Data Team & Executive Team | November 1, 2021 | |
| 3. | Develop and assign Child/Family Staffing online training to responsible staff. | Program Operations Team Mgr & CD ISS | October 1, 2021 | |
| 4. | Provide positive results to gain buy in from staff. | Data Team | December 2021 | |

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Long Range Goal: Health requirements with 30, 45, and 90 day timelines, along with follow-up will be complete and accurate.

Short Term Objective: Educate staff and parents of the importance of meeting health requirements.

Expected Outcome: Provide high quality health program services which supports each child's growth and development.

| # | Strategies | Person(s) Responsible | Timeline | Progress Noted |
|----|--|-----------------------|----------------|----------------|
| 1. | Educating staff on the importance of health requirements and how to translate that to parent. | Health Team | Ongoing | |
| 2. | Specialists to communicate with assigned LAM's weekly. | Health Specialists | Ongoing | |
| 3. | Utilizing AACCS Community Care mobile clinic where available to help meet health deadlines. | Health Team Manager | October 2021 | |
| 4. | Update DataSay checklist to reflect the status of health file checks more accurately. | Health Team Manager | September 2021 | |
| 5. | Educating staff on the importance of follow-up especially in cases of using the COVID status in ChildPlus. | Health Team | Ongoing | |

Strengths

Child Development

The Child Development Team implemented a monitoring system that significantly reduced the number of late or missing developmental screenings for the 2020-2021 school year. The Child Development Information System Specialist regularly checked for completed developmental screenings as well as provided information to classroom staff for screenings that were coming due soon. Education Specialists worked directly with classroom staff and Local Area Managers to ensure screenings were completed and entered into Child Plus within the 45-day deadline.

Health Services

The Health Team made a big improvement this year as far as how the data looks within Child Plus. The Health Specialists did a great job with always discussing with the FA/PAs and HBEs the importance of staying on top of the health requirements for the children. The Information Systems Specialist sent out reports every 2 to 3 weeks that included information for health requirements related to the EPSDT, dental and medical homes, insurance, immunizations, etc. With the reports, the reminders, and the notes that the Information Systems Specialist sent to the field staff, the data improved from the previous years. For example, we went from 69% of Head Start children in 2019-2020 being up-to-date according to the EPSDT to 81% in 2020-2021.

Family and Community Services

AAHS provided the annual ERSEA training on-line this past year through the AAHS training site. Staff had the ability to take the training at a time that best fit their individual schedule and revisit areas they were most challenged. All new staff received the New Staff ERSEA Orientation training. Family Services Specialist have directed Family Advocates to the Early Childhood Learning & Knowledge Center (ECLKC) web-site to partake in the training series on homelessness. Family Services Specialist reviewed a large volume of eligibility applications and provided individualized technical assistance afterwards in areas of need. Technical assistance was provided to Family Advocates and teachers where monitoring indicated a need for specialized attendance training. Each month, the Information Systems Specialist monitored attendance program-wide to determine which areas monthly average daily attendance fell below 85%. This allowed the program to identify systematic issues that contributed to the program's absenteeism rate and use the data to make self-improvements. Local Area Managers were provided training on the Eligibility Determination Record Checklists.

AAHS Family Engagement strategies were integrated into all systems and support services to aid family well-being and children's learning and development. During the pandemic, staff came up with strategies to engage families through virtual means. One strategy utilized this past school year was incorporating ReadyRosie as our program-wide research-based parent curriculum. ReadyRosie is a birth through third grade cohesive family engagement resource that facilitated family partnerships for increased family and child outcomes. Families received short, modeled moment videos via text or email each week. These videos assisted parents as they worked with their child to build a home-school connection. Staff provided parent trainings and meetings through Zoom. Many areas had an increase of attendance through this method. Time constraints, having a working vehicle or affording gasoline, or finding childcare, no longer posed a barrier to attending meetings and trainings. Facebook was a powerful tool to communicate with parents at their own time and in a way most parents enjoyed. Teachers and the Mental Health Services Coordinator provided mini lessons through this process.