Duluth Public Schools/Duluth Head Start
Program Self-Assessment Analysis
March 2016

STRENGTHS	WEAKNESSES
1. **Management Systems: Program Governance** We have an actively engaged School Board/Governing Board liaison to the Policy Council.	**Management Systems: Program Governance** None noted.
2. **Management Systems: Planning** We have a Planning Team made up of staff from all job descriptions, all sites, all coordinators and parents. This group works on items like child outcome analysis, progress toward goals and sets the calendar. Larger program issues and challenges are brought to this group.	**Management Systems: Planning** The Planning Team is missing members from one school and will add a member from State funded Home Base.
3. **Management Systems: Communication** The Child Plus data system allows all staff to have access to the data they need regardless of their location.	**Management Systems: Communication** Work continues on staff training materials.
4. **Management Systems: Record Keeping and Recording** The Child Plus data system allows for up to date and accurate reporting.	**Management Systems: Record Keeping and Recording** We lack a city wide list serve to disseminate information.
5. **Management Systems: Ongoing Monitoring** Child Plus has been a great tool to track, analyze and monitor program areas.	**Management Systems: Ongoing Monitoring** We would like to build in more time for coordinators to work with individual staff.
6. **Management Systems: Human Resources** Staff meets or exceeds qualifications for their positions.	**Management Systems: Human Resources** We would like to have more control of what our staff does on district staff development days.
7. **Management Systems: Fiscal Management** The district's Finance department does an excellent job of managing Head Start's grants.	**Management Systems: Fiscal Management** We need to more widely disseminate the results of district audits that include Head Start.
8. **Child Development and Health Services: Prevention and Early Intervention**	**Child Development and Health Services: Prevention and Early Intervention** We have ongoing difficulties getting parents

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Family Advocates, Children's Dental Services and Ever Smiles Pediatric Dentistry all work to assist families with health requirements.	to follow through with health visits.
9. **Child Development and Health Services: Tracking and Follow-Up** Child Plus data system is strength and is useful in tracking.	**Child Development and Health Services: Tracking and Follow-Up** We struggle getting families to follow through with health visits. We need to reinforce to staff to document attempts to contact and contacts with families who have not met health requirements.
10. **Child Development and Health Services: Individualization** We are located in schools, making specialists easy to integrate. Minnesota Reading Corps literacy tutors in most classrooms provide tiered interventions based on data. We are beginning to implement the Pyramid Model with coaching on social emotional content.	**Child Development and Health Services: Individualization** None noted.
11. **Child Development and Health Services: Disabilities Services** Collaboration with ECSE to provide accommodations and family support for children with special needs is strong. Ready access to screening, evaluation and services through ISD 709 is strength.	**Child Development and Health Services: Disabilities Services** We would like to collaborate to share funding or secure more grant funds to transport children with special needs to and from Head Start. We want to balance classrooms, as much as possible, to base inclusion on general population (10%) and ensure equitable and sufficient time from ECSE services at each site/classroom.
12. **Child Development and Health Services: Curriculum and Assessment** We have many veteran staff that is proficient at implementing curriculum.	**Child Development and Health Services: Curriculum and Assessment** We need to improve training for new staff. Teachers would like more time to work together and have training on conducting ongoing assessments.

STRENGTHS

WEAKNESSES

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Being part of a school district promotes longevity.	
13. **Family and Community Partnerships: Family Partnership Building** Family Advocates are well informed about community resources available to Head Start families.	**Family and Community Partnerships: Family Partnership Building** Our Family Partnership Agreement process is currently being overhauled.
14. **Family and Community Partnerships: Parent Involvement** We have implemented a Dad's Group facilitated by one of our male staff.	**Family and Community Partnerships: Parent Involvement** We would like to work on documenting a clear picture of who is in the child's family and address some parent resistance to sharing that information.
15. **Family and Community Partnerships: Community and Childcare Partnerships** Our relationships with Community Partners benefit our families.	**Family and Community Partnerships: Community and Childcare Partnerships** We would like to strengthen our connection to after school programming with the goal being wrapped around care. We need to develop a stronger system for ongoing communication with community partners.
16. **Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance** Our program staff follows a well-conceived system of selection and enrollment.	**Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance** We are still working under a year long Enrollment Action Plan.
17. **Program Design: Facilities, Materials, Equipment, and Transportation** Our program, housed in school buildings is supported by Facilities Management. Buildings are ADA compliant.	**Program Design: Facilities, Materials, Equipment, and Transportation** We would like to improve outdoor play space for children.

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18. Using Child Outcomes in Program Self-Assessment The Child Plus database allows us to collect and aggregate data on child outcomes. Minnesota Reading Corps members collect and analyze specific literacy data and respond with tiered interventions.	**Using Child Outcomes in Program Self-Assessment** None noted.
19. Child Development and Health Services: Mental Health Highly qualified Mental Health consultants. Monthly Reflective Practice opportunities for staff. We are providing a Circle of Security, a parenting model, training for 20 certified early childhood staff. We currently have one classroom using the Pyramid Model of interventions for children needing help with social/emotional skills and will expand this model in the coming year.	**Child Development and Health Services: Mental Health** We need more time/funds for Mental Health consultants. We need staff training on dealing with adult mental health crises. We need more time for teaming/collaboration between classroom staff and consultants to increase staff efficacy, child outcomes and decrease staff stress and burn out.