Duluth Public Schools/Duluth Head Start
Program Self-Assessment Analysis
March 2014

STRENGTHS	WEAKNESSES
Management Systems: Program Governance • We have a dedicated group of Policy Council members and a supportive /School Board Governing Board. • We have School Board/Governing Board member who acts as the liaison to the Policy Council.	**Management Systems: Program Governance** • None noted.
Management Systems: Planning • We have a very functional Planning Team made up of staff from all job descriptions, all sites, all coordinators and parents.	**Management Systems: Planning** • We are always looking for ways to get the most out of the Community Assessment process and data.
Management Systems: Communication • All staff have access to district/program email. • Child Plus data system is a good tool for maintaining communication regarding child and family services.	**Management Systems: Communication** • We need to update the written plan for training new staff. • Staff requests more time to meet and reflect with mental health consultants.
Management Systems: Record Keeping and Recording • Child Plus data system allows for accurate and reliable record keeping and reporting.	**Management Systems: Record Keeping and Recording** • We could benefit from a revised staff manual.
Management Systems: Ongoing Monitoring • Our Child Plus data system helps us create reports for ongoing monitoring of Family Services, child outcome data, attendance, etc.	**Management Systems: Ongoing Monitoring** • We need to create a schedule/calendar to ensure we visit all sites for ongoing monitoring on a monthly basis. • We need to revise our ongoing monitoring form used at weekly monitoring meetings to reflect our follow-up on issues from past meetings.
Management Systems: Human Resources • We have strong support from the district 's Human Resource	**Management Systems: Human Resources** • We need to strengthen our training plan for new staff and

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Department allowing us to streamline our hiring process. • Our staffs are well qualified for their positions.	update the staff manual.
Management Systems: Fiscal Management • We have strong support and oversight from the district's Finance Department.	**Management Systems: Fiscal Management** • None noted.
Management Systems :Record Keeping and Reporting • Child Plus data system allows for accurate and reliable reporting and record keeping.	**Management Systems: Record Keeping and Reporting** • We could benefit from a revised staff manual.
Child Development and Health Services: Prevention and Early Intervention • We have a good system in place for recruitment and initial gathering of information. • We have a good collaboration with Children's Dental Services. • Increased dedicated nutrition time including classroom teaching is a plus.	**Child Development and Health Services: Prevention and Early Intervention** • There is an ongoing issue of getting families to follow through and turn in required paperwork. • Ongoing monitoring needs to be tightened up. • Service Plan needs updating. • We could strengthen our relationship with Lake Superior Community Health Center.
Child Development and Health Services: Tracking and Follow-Up • Child Plus data system and the expertise of our Child Plus Administrator is a strength, allowing us to use data reports and follow up on needed information. • Good early documentation and data gathering. • New relationships and continued partnerships with groups support our mission and families. For example, Children's Dental Services and Leadie Eddie. • Good communication among staff.	**Child Development and Health Services: Tracking and Follow-Up** • We need to continue to reinforce the need for families to follow through with health requirements and the importance of using our health contract. • We need to reinforce to staff the need to document daily checks of children.

STRENGTHS	WEAKNESSES
Child Development and Health Services: Individualization • Strong evidence of teaching staff utilizing all data sources to individualize for children. • Strong evidence of teaching staff working toward stronger parent engagement in individualization, planning and strategies for children. This includes revising a an inclusive home visit and conference form • All Minnesota Reading Corps (MRC) members provide Talk, Read and Write with Me opportunities to families through lending libraries and journaling.	**Child Development and Health Services: Individualization** • Need to continue to strengthen the transition of child data from Head Start to kindergarten. • We want to develop more consistent ways to incorporate the culture of individual families to individualize for their children.
Child Development and Health Services: Disabilities Services • We have a good tracking system in place. • We have a good relationship with and regular contact with our LEA/Special Services Department. • We have staff and family education opportunities in place. • Disabilities Coordinator is able to support staff that is serving children with disabilities.	**Child Development and Health Services: Disabilities Services** • We could benefit from earlier recruitment and the ability to create classroom configurations. • We could benefit from summer Early Childhood Screening opportunities for children who have been recruited after ECS ended in the spring. • Transportation of children receiving Special Services often conflicts with Head Start hours of operation.
Child Development and Health Services: Curriculum and Assessment • Curriculum and assessment tools meet Head Start performance standards as well as State standards. • We have a strong partnership with Minnesota Reading Corps which includes: o Literacy tutor in each classroom	**Child Development and Health Services: Curriculum and Assessment** • We need to strengthen the process of embedding ongoing assessment within the teaching day. • We need to develop a stronger process of responding to *CLASS* scores and child outcomes.

STRENGTHS	WEAKNESSES
o Monthly master coaching and periodic training from additional master coaches o Tutors conduct most literacy and math assessments, taking this burden off staff o Tutors provide Tier 2 and 3 interventions o Tutors provide Tier 1 interventions along with classroom staff • Teachers are given adequate time (3 Data Days each year) to evaluate child progress.	
Family and Community Partnerships: Family Partnership Building • Use of Child Plus data system to track parent and family contacts and needs. • The Duluth community has many excellent resources for Head Start families.	**Family and Community Partnerships: Family Partnership Building** • We need to further explore the Head Start Parent, Family and Community Partnership Framework to determine how it can assist us in monitoring family goals. • We have seen a sharp increase in the number of children placed in foster care, living in shelters, with incarcerated parents while enrolled in Head Start. Much of this increase has been attributed to drug use and subsequent abuse and neglect of children according to our community partners.
Family and Community Partnerships: Parent Involvement • We continue to work with parents to provide parent events and referrals that meet their needs.	**Family and Community Partnerships: Parent Involvement** • We need to strengthen our response to the growing number of children who are placed in foster care during the school year.
Family and Community Partnerships: Community and Childcare Partnerships • We have good working relationships with our	**Family and Community Partnerships: Community and Childcare Partnerships** • We have to strengthen our work with Child Protective Services to

STRENGTHS	WEAKNESSES
community partners. Many have representation on our advisory boards. • Our childcare partnership/collaboration • (ALL STATE DOLLARS) functions well to serve Head Start eligible families who need full time care and would otherwise not be able to access Head start services.	help address our work with the growing number of children in foster care.
Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance • We have a strong eligibility and enrollment process focused on serving families with the greatest need in the community. • We work to be responsive to the issues families face, offering support when attendance becomes an issue. • As families make changes in their lives such as obtaining work or attending school, getting children to school can be a hardship. In these cases, we spend a lot a of time problem solving with parents.	**Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance** • We need to ensure all staff are consistent and timely with attendance issues and focused on resolving issues whenever possible. • Some areas of the city require more outreach efforts to recruit families. • Transportation and schedules are barriers to enrollment and attendance. • We have seen an increase in the number of homeless families and children in foster care. We also have documented a high number of children with identified needs.
Program Design: Facilities, Materials, Equipment, and Transportation • We enjoy well maintained and safe facilities in five school district elementary school buildings. • Our Facilities Management Department staff is responsive to our needs.	**Program Design: Facilities, Materials, Equipment, and Transportation** • We are currently exploring adding fencing at one site. • We need to ensure new classrooms are equipped with toileting facilities or in close proximity to shared toileting facilities.

STRENGTHS	WEAKNESSES
Using Child Outcomes in Program Self-Assessment • We have a strong system of collecting, aggregating and analyzing child outcome data with the use of Child Plus.	**Using Child Outcomes in Program Self-Assessment** • To date, this year's child outcome data is lower than in previous years.
Child Development and Health Services: Mental Health • We have mental health consultants who do regular visits to all sites. • High quality training is available to staff and families in the area of mental health. • We regularly use a social-emotional curriculum at all sites. • We are using a social-emotional screening tool, ASQSE and follow up on any elevated scores, tracking them on Child Plus and can offer parent consultation including home visits with mental health consultants. • We have excellent partnerships with some local mental health service providers.	**Child Development and Health Services: Mental Health** • We need more time and money for increased mental health consultation services. • Mental health staff and classroom staff could benefit from more time to meet and reflect. • We are currently in the process of increasing our community partnerships with local mental health referral and treatment providers.

WEAKNESSES	ACTIONS
Management Systems: Program Governance • None noted.	**Management Systems: Program Governance** • None noted.
Management Systems: Planning • We are always looking for ways to get the most out of the Community Assessment process and data.	**Management Systems: Planning** • We will continue to add relevant data as needed for planning purposes.
Management Systems: Communication • We need to update the written plan for training new staff. • Staff requests more time to meet and reflect with mental health consultants.	**Management Systems: Communication** • We will include our Planning Team in creating a comprehensive New Staff Training Protocol. • We will seek additional funding for mental health services.
Management Systems: Record Keeping and Recording • We could benefit from a revised staff manual.	**Management Systems: Record Keeping and Recording** • We will create an online staff manual with all procedures, policies and forms in one file.
Management Systems: Ongoing Monitoring • We need to create a schedule/calendar to ensure we visit all sites for ongoing monitoring on a monthly basis. • We need to revise our ongoing monitoring form used at weekly monitoring meetings to reflect our follow-up on issues from past meetings.	**Management Systems: Ongoing Monitoring** • We will systematize our visits to sites for ongoing monitoring. • We have revised our ongoing monitoring form to include follow-up from past meetings.
Management Systems: Human Resources • We need to strengthen our training plan for new staff and update the staff manual.	**Management Systems: Human Resources** • We will include our Planning Team in creating a comprehensive New Staff Training Protocol. • We will create an online staff manual with all procedures, policies and forms in one file.
Management Systems: Fiscal Management • None noted.	**Management Systems: Fiscal Management** • None noted.

WEAKNESSES	ACTIONS
Management Systems: Record Keeping and Reporting • We could benefit from a revised staff manual.	**Management Systems: Record Keeping and Reporting** • We will create an online staff manual with all procedures, policies and forms in one file.
Child Development and Health Services: Prevention and Early Intervention • There is an ongoing issue of getting families to follow through and turn in required paperwork. • Ongoing monitoring needs to be tightened up. • Service Plan needs updating. • We could strengthen our relationship with Lake Superior Community Health Center.	**Child Development and Health Services: Prevention and Early Intervention** • We will reach out to our sister programs in the state and try some new ways to help families follow through with health requirements. • We will systematize our visits to sites for ongoing monitoring. We have revised our ongoing monitoring form to include follow-up from past meetings. • We will update the service plan as needed. • Our Health Services Coordinator will meet with Lake Superior Community Health staff and ask for someone from their staff to join our Health Advisory Committee.
Child Development and Health Services: Tracking and Follow-Up • We need to continue to reinforce the need for families to follow through with health requirements and the importance of using our health contract. • We need to reinforce to staff the need to document daily checks of children.	**Child Development and Health Services: Tracking and Follow-Up** • We will reach out to our sister programs in the state and try some new ways to help families follow through with health requirements. • We will reinforce to staff the importance of completing daily checks at our August pre-service training.
Child Development and Health Services: Individualization • Need to continue to strengthen the transition of child data from Head Start to kindergarten. • We want to develop more consistent ways to incorporate the culture of individual families to individualize for their children.	**Child Development and Health Services: Individualization** • We are key members of the district's transition initiative made possible by Early Learning Scholarship dollars and will continue that work. • We have training scheduled for the next several months around race, class and privilege.

WEAKNESSES	ACTIONS
Child Development and Health Services: Disabilities Services • We could benefit from earlier recruitment and the ability to create classroom configurations. • We could benefit from summer Early Childhood Screening opportunities for children who have been recruited after ECS ended in the spring. • Transportation of children receiving Special Services often conflicts with Head Start hours of operation.	**Child Development and Health Services: Disabilities Services** • We will staff our program more during the summer to meet this need. • We have requested additional screening days from the Special Services Department for all eligible children in the community and especially for Head Start eligible children. • We will continue to seek solutions to the transportation barriers.
Child Development and Health Services: Curriculum and Assessment • We need to strengthen the process of embedding ongoing assessment within the teaching day. • We need to develop a stronger process of responding to *CLASS* scores and child outcomes.	**Child Development and Health Services: Curriculum and Assessment** • We will conduct a Peer Training during our Professional Learning Community time using the Head Start Ongoing Assessment Toolkit materials and teachers sharing strategies. • We will look at areas of greatest concern program wide on *CLASS* outcomes. • Make staff aware of the issue and process. • Conduct peer training using the Head Start Engaging Interactions and Environments In-Service suites and sharing strategies. • Look at individual teacher's greatest area of need and provide individual coaching and mentoring, possibly with a coach provided by the school district tied to teacher evaluation. • Set aside a monthly meeting with the Education Coordinator, classroom teacher and Minnesota Reading Corps members to review child progress and strategies together.

WEAKNESSES

ACTIONS

WEAKNESSES	ACTIONS
Family and Community Partnerships: Family Partnership Building • We need to further explore the Head Start Parent, Family and Community Partnership Framework to determine how it can assist us in monitoring family goals. • We have seen a sharp increase in the number of children placed in foster care, living in shelters, with incarcerated parents while enrolled in Head Start. Much of this increase has been attributed to drug use and subsequent abuse and neglect of children according to our community partners.	**Family and Community Partnerships: Family Partnership Building** • We will enlist the help of our Training and Technical Assistance Consultant for further training. • We will continue our advocacy efforts and partnerships with community agencies to support children and families including building a strong bridge between Head Start and Child Protective Services to ensure we can keep children enrolled in these cases.
Family and Community Partnerships: Parent Involvement • We need to strengthen our response to the growing number of children who are placed in foster care during the school year.	**Family and Community Partnerships: Parent Involvement** • We will continue our advocacy efforts and partnerships with community agencies to support children and families including building a strong bridge between Head Start and Child Protective Services to ensure we can keep children enrolled in these cases.
Family and Community Partnerships: Community and Childcare Partnerships • We have to strengthen our work with Child Protective Services to help address our work with the growing number of children in foster care.	**Family and Community Partnerships: Community and Childcare Partnerships** • We will continue our advocacy efforts and partnerships with community agencies to support children and families including building a strong bridge between Head Start and Child Protective Services to ensure we can keep children enrolled in these cases.

WEAKNESSES	ACTIONS
Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance • We need to ensure all staff are consistent and timely with attendance issues and focused on resolving issues whenever possible. • Some areas of the city require more outreach efforts to recruit families. • Transportation and schedules are barriers to enrollment and attendance. • We have seen an increase in the number of homeless families and children in foster care. We also have documented a high number of children with identified needs.	**Program Design: Eligibility, Recruitment, Selection, Enrollment and Attendance** • We will strengthen our response to absences for all staff. • We will target areas of the city where waiting list numbers are down. • We will work with partners and community childcare providers to develop wrap around care for children to ease some of the schedule and transportation issues. • We will continue our advocacy efforts and partnerships with community agencies to support children and families including building a strong bridge between Head Start and Child Protective Services to ensure we can keep children enrolled in these cases.
Program Design: Facilities, Materials, Equipment, and Transportation • We are currently exploring adding fencing at one site. • We need to ensure new classrooms are equipped with toileting facilities or in close proximity to shared toileting facilities.	**Program Design: Facilities, Materials, Equipment, and Transportation** • As outdoor conditions improve, we will meet with the Facilities Management staff to look at additional fencing at one site. • As we seek an additional classroom space, the proximity of toileting facilities will be considered.
Using Child Outcomes in Program Self-Assessment • To date, this year's child outcome data is lower than in previous years.	**Using Child Outcomes in Program Self-Assessment** • We are looking at causes for this change. Severe weather conditions leading to the closure of schools and the difficulty for families to maintain consistent attendance are a few probable causes. In addition, we note a sharp increase in the number of children in foster care, homeless families and children with incarcerated parents.

WEAKNESSES   ACTIONS

Child Development and Health Services: Mental Health	**Child Development and Health Services: Mental Health**
• We need more time and money for increased mental health consultation services. • Mental health staff and classroom staff could benefit from more time to meet and reflect. • We are currently in the process of increasing our community partnerships with local mental health referral and treatment providers.	• We will seek additional funds for mental health consultation time for families as well as staff. • We will continue to work on community partnership agreements with mental health providers in the community.