

City of San Antonio
Department of Human Services
Head Start Program

2016 - 2017
Self-Assessment Report



Executive Summary

The City of San Antonio, Department of Human Services (DHS), Head Start Program (grantee/program) annually engages in a process of self-assessment as mandated by Head Start Program Performance Standards. This process ensures timely evaluation of program services and delivery systems for the purpose of implementing improvements and complying with the Head Start Program Performance Standards.

The self-assessment reviewed services provided to a funded enrollment of 3,236 children and their families in 26 Head Start and six Early Head Start-Child Care Partnership (EHS-CCP) sites located in San Antonio Independent School District (SAISD) and Edgewood Independent School District (EISD). Self-assessment results, in conjunction with the Community Assessment Report and ongoing monitoring results, support quality program improvements for the children and their parents as related directly to the 5-Year Strategic Plan, grantee policies, procedures, and management systems for the upcoming program year.

A sample of program strengths and areas of improvement identified in the report is listed below.

Strengths

- Program-wide completion of the Head Start Programs Benchmark Requirements
- Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA)
 - Enrollment and Attendance rates
- Education and Disabilities
 - Disability enrollment
 - LAP-3 Domain scores for children transitioning to kindergarten
- Family Community Support and Mental Health
 - Number of 5-Star Ready Rosie users
 - Number of families that achieve one or more Family Life Practice Goals

Areas of Improvement

- Program Design and Management
 - Turnover rate for family support workers
- Family Community Support
 - Parent Connection Committee (PCC) meeting attendance
 - Feedback to teachers on parent goals set with family support workers
- Health, Nutrition, Transportation, and Safe Environments
 - Number of children with an up-to-date physical exam based on the TX EPSDT requirements

The key feature of this program year's self-assessment has been the inclusion of the quarterly data reviews and increased use of data. See Appendix A for self-assessment process map.

Process

For the 2016 – 2017 school year, the Grantee implemented **Quarterly Data Review Meetings**, a new data-driven self-assessment process in accordance with the new Head Start Program

Performance Standards. This process used data from Head Start content areas such as monitoring, program benchmarks, Program Information Report (PIR), 5-Year Strategic Plan, monthly reports and the education assessment.

The data were collected, analyzed and presented at **Quarterly Data Review Meetings** in December, 2016, and March, June and September, 2017. Program staff, community stakeholders, and members of the Head Start Policy Council and Governing Body were invited to participate in the quarterly reviews. See Appendix B for list of participants. Throughout the self- assessment process, participants included a diverse representation of parents, community members, and staff from various organizations. At each **Quarterly Data Review Meeting**, data and objectives were presented and discussed with those stakeholders attending and the stakeholders were encouraged to ask questions about the data thereby assuring their understanding. Staff reported program successes, shortfalls, problems with the data and program risks, as well as actions taken to ensure Head Start compliance and status of program goals, objectives and benchmarks. The revised self-assessment process allowed the program and its stakeholders to assess status and trends earlier in the school year rather than only once at the end. It also allowed for an earlier focus of resources and corrective actions than previously experienced with the former process.

The report includes results for the following Head Start content areas: Program Design and Management (PDM), Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA), Education and Disabilities, Family Community Support and Mental Wellness, and Health, Nutrition, Transportation, and Safe Environments.

The four categories of findings in the annual Self-Assessment Report are:

- Strength
- Compliant: All requirements met;
- Non-compliant: Meeting less than 90% of the requirement or monitoring finding rates of 10% or higher; and
- Program improvement areas: An objective on the 5-Year Strategic Plan not met.

Self-Assessment Report

As a part of the program strengthening process, improvement plans or corrective actions taken in advance of the report are imbedded within the 2016-2017 Self-Assessment report. These program improvement actions relate to both short and long-term actions.

Program Design and Management (PDM)

PDM directly oversees systems and infrastructure which support the provision of direct program services through implementation of a strong shared governance system, effective management systems, and ongoing programmatic oversight. The PDM, Content, and Monitoring teams provide direction, guidance, training and technical assistance to service providers to ensure staff at all levels of the organization have the resources, knowledge, and support needed to deliver high quality program services.

PDM met all program benchmark requirements. Items monitored for compliance included professional development for all Early Head Start-Child Care Partnership (EHS-CCP) and Head Start staff and ensuring all staff met criminal background requirements. Other information presented at each quarterly data review included numbers of Head Start Policy Council (HSPC) members in attendance for monthly meetings, HSPC member activities in the program, and number of items reviewed and approved by the Governing Body.

The four PDM objectives within the 5-Year Strategic Plan supported the goal of recruiting and retaining highly qualified staff. The data collected and analyzed was for both Head Start and EHS-CCP. Below are the results of each PDM objective at the end of the program year.

Objective 1: MET

Reduce the average number of days to fill a vacancy with the City of San Antonio Head Start Program.

Head Start staff worked with the City of San Antonio, Human Resources Department to reduce the number of days to fill Head Start vacancies. According to the data, the number of days to fill a vacancy decreased by 2 days to 62.41 days in program year 2016-2017, down from 64.82 days in 2015-2016. The program met the objective of reducing the number of days to fill a vacancy with the City of San Antonio Head Start program.

Objective 2: NOT MET

Reduce the turnover rate for Family Support Workers to 12%.

The turnover rate for Family Support Workers (FSW) is 21.43%. This rate increased by 6.34% from the 2015-2016 rate of 15.09%. The program is collecting exit interview surveys from all exiting FSWs to review reasons for departure. This objective has been identified as a program improvement area.

Objective 3: MET

Education Service Providers will reduce the turnover rate of Head Start teachers and teacher assistants.

Both Edgewood and San Antonio Independent School Districts successfully reduced the Head Start Teacher and Teacher Assistant turnover rate. Edgewood ISD reduced the turnover rate to 6.9%, a reduction of 2.5 from the 2015-2016 rate of 9.4%. San Antonio ISD reduced the turnover rate to 3.2%, a reduction of 9.3 from the 2015-2016 rate of 12.5%.

Objective 4: NOT MET

Increase the number of applicants with Head Start/Early Head Start-Child Care Partnership experience.

The data showed 27.53% of 2016-2017 applications received were documented as having Head Start experience, a 3.37 decrease from 30.90% in 2015-2016. As the program continues to post additional vacancies for Head Start and Early Head Start-Child Care Partnership positions, there will be a concentrated effort to increase Head Start language in postings and additional data will

be collected to ensure the objective is met. This objective has been identified as an area for program improvement.

Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA)

Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) is overseen by the Grantee and the work in ERSEA is completed by both the Grantee and the Education Service Providers.

MET STRENGTH:

100% program benchmark requirements were met for ERSEA this program year. Both Head Start and EHS-CCP maintained enrollment throughout the year. The EHS-CCP program boasted a waitlist that exceeded the program's funded enrollment. The Head Start compliance rate for ERSEA monitoring was 7.9%, which met the threshold for compliance. The EHS-CCP program was refining the newly created monitoring systems with the results establishing the baseline data this year.

Objective 1: MET

In the 5-Year Strategic Plan for EHS-CCP was one objective. The objective was to maintain attendance at 85%. EHS-CCP met the goal and achieved an attendance rate of 88%. The program will continue to meet compliance and maintain enrollment.

Education and Disabilities

The program has continued its focus on school readiness and the important role that parents and families play in ensuring children are ready for school. The overall school readiness approach and education and early childhood services system values the integration of physical, educational, social, and emotional services as central to a child's ability to learn. The Head Start Program also oversees the content area of Disabilities and works closely with the education service providers to ensure the Head Start Program Performance standards are met and the programs maintain disability enrollment of at least 10%.

MET STRENGTH:

100% benchmark requirements were met in Education and Disabilities. Head Start achieved a disability enrollment percentage of 14.83%. The EHS-CCP program achieved a rate of 11%. The Head Start monitoring rate for education was 3.4% and the monitoring rate for disabilities was 5%. The EHS-CCP program was still in the process of building monitoring systems that result in analytical data this year.

Below are the results of the three Education objectives at the end of the program year. The EHS-CCP program objectives were considered a baseline year and were not included.

Objective 1: NOT MET

Increase annual Classroom Assessment Scoring System (CLASS) scores.

CLASS is a standardized, research based tool used to measure the quality of teacher and student interactions through classroom observations completed by a certified reliable observer. There are three Domains – Emotional Support, Classroom Organization, and Instructional Support. Each domain is scored on a scale of 1 to 7. The program observes 60% of classrooms. The strategy for 2016-2017 was to increase each domain by .10. Although federal compliance was exceeded, the program did not fully meet the objective. The program will continue to use a coaching model to support teaching staff and increase CLASS scores.

Objective 2: MET STRENGTH

Increase the number of children transitioning to kindergarten that score at or above the *Average* range in all seven LAP-3 Domains.

Learning Accomplishments Profile -3 is a criterion referenced assessment that compares a child's developmental age with their chronological age across seven Domains. It is completed three times a year. This objective is to have children score in the average range or higher for their age. The program not only met the objective, but exceeded the goal by 2 with an end of year rate of 74%.

Objective 3: NOT MET

Increase the percentage of children that demonstrate proficiency in more than 75% of the LAP-3 items aligned to the program's School Readiness Goals.

This objective aligns the LAP-3 assessment with our School Readiness Goals. Each goal includes multiple LAP-3 items. Based on the data, it was determined that the objective was not met. The program has begun an analysis of the data and is determining how the objective can be met in the upcoming year.

Family Community Support and Mental Health

Family Community Support and Mental Health services focus on promoting family well-being, building strong collaborations with parents and families, and using community partnerships to maximize resources available to all Head Start children and families.

MET STRENGTH:

100% benchmark requirements were met for Family Community Support and Mental Health. Monitoring for both content areas was within the thresholds for compliance. The compliance rate for Family and Community Support was 3% and the compliance rate for Mental Health was 6.2%. The EHS-CCP program was still in the process of building monitoring systems that result in analytical data this year.

Based on the 5-Year Strategic Plan, seven objectives for Head Start and four objectives for EHS-CCP in the area of Family and Community Support are measured. All four EHS-CCP objectives and one Head Start objective are baseline data collection this year and will not be included. Below are the results of each Family and Community Support objective at the end of the program year.

Objective 1: Baseline Year

Increase the number of referrals of parents/guardians in English as Second Language (ESL), General Equivalency Diploma (GED) and higher education services.

Objective results are unavailable as it was a baseline data collection year.

Objective 2: MET

Increase the number of parents/guardians who complete a grade level in school, prior to high school graduation (e.g. 8th grade, 11th grade), complete high school or are awarded a GED, complete an associate degree, or complete a baccalaureate or advanced degree.

A goal of 921 was established at the beginning of the year. By the final quarterly data review, the final number of 922 was accomplished. The program met this objective.

Objective 3: MET STRENGTH

Increase the number of families that achieve one or more Family Life Practice Goals by 10% annually.

A goal of 1,692 was established at the beginning of the year. The final number of families who accomplished one or more goals was 2,009, an increase of 19%. This far exceeded the objective.

Objective 4: NOT MET

Increase the average attendance at Parent Connection Committee (PCC) meetings.

A goal of 12 parents present at each PCC meeting was established in this objective. By the end of the program year, the average attendance at the PCC meetings was 9.4 parents. The program is reevaluating the objective and is currently reviewing activities conducted at the PCC meetings, along with different types of presentations that may increase parent participation. This is an area for program improvement.

Objective 5: NOT MET

Increase parent/guardian participation in the Annual Parent Conference.

A goal of 141 parents in attendance for the annual Parent Conference was set at the beginning of the year. Only 72 parents were in attendance at the 2017 Parent Conference and staff has evaluated reasons why participation was so low. Although not able to pinpoint exact reasons, the 2018 Parent Conference will focus on a past venue and activities that have proven successful in the past.

Objective 6: MET STRENGTH

Increase the number of 5-Star Ready Rosie users.

A goal of 220 additional parents using Ready Rosie at the 5-star level was established for the year. By the end of the year, there were 440 5-star Ready Rosie users. This number far exceeded the objective.

Objective 7: MIXED

Increase the percentage of families who receive services after a referral has been generated for each of the following: Child abuse and neglect services, Emergency/crisis intervention (food, clothing or shelter), Housing assistance (utilities) and Mental Health services.

- **MET** Child abuse and neglect services target was at 58. The final number was 58 and the objective was met.
- **NOT MET** Emergency/crisis intervention target was established at 2,506. The final number was 1,710 and the objective was not met.
- **NOT MET** Housing assistance target was established at 142. The final number was 80 and the objective was not met.
- **MET** Mental health services target was established at 216. The final number was 239 and the objective was met.

Health, Nutrition, Transportation, and Safe Environments

Head Start Program services in the areas of health, nutrition, safe environments, and transportation are structured to ensure children are physically and mentally prepared to learn and are safe while in care, in addition to guaranteeing children and families receive educational supports to create life-long safety and healthy habits. Head Start staff and service providers implemented an array of targeted activities to help parents establish and model healthy lifestyle habits for their children and families.

MET STRENGTH:

This year all benchmarks in the four content areas were met. This means the program met several performance standard measures. Also, all four content areas met monitoring thresholds under ten percent:

- Health non-compliance rate: 1.2%
- Nutrition non-compliance rate: .9%
- Transportation non-compliance rate: 3.3%
- Safe Environments non-compliance rate: 5.8%

EHS-CCP was refining their monitoring systems and data this year are baseline.

Based on the 5-Year Strategic Plan, eight objectives in these content areas for Head Start and six for EHS-CCP were established. Below are the results of each objective at the end of the program year. The EHS-CCP objectives are considered a baseline year and are not included.

Objective 1: MET

Increase the attendance of Head Start staff at trainings that include strategies that promote good nutrition and an active life style.

There was an average of 17.55 staff in attendance at 9 trainings. The program was more strategic in scheduling trainings and worked directly with coordinators to ensure trainings were

available to everyone. Only two trainings were cancelled due to low attendance. The Head Start program met the objective.

Objective 2: NOT MET

Increase the number of children with an up-to-date physical exam based on the TX EPSDT requirements at the end of the school year.

The program did not increase the number of children with an up-to-date physical exam based on the TX EPSDT requirements at the end of the school year. The end of the year result was 77%. Throughout the school year, physical exams expire and the program is working to ensure all children have a current physical exam. In previous years, the program brought in clinics and mobile units for this purpose. The program is working towards building capacity and connecting families to their medical home. This decreases the number of children with an up-to-date physical exam based on the TX EPSDT requirements at the end of the school year but the program believes in the long term goal of increasing the health literacy and self-advocacy of families.

Objective 3: NOT MET

Reduce the number of Class 2 dental referrals that become Class 1 by 50%.

The program did not reduce the number of Class 2 dental referrals that become Class 1 by 50%. Last year the program had 20 children that were Class 2 dental referrals who became Class 1. During the 2016-2017 school year, the program had 19 children that were classified as Class 2 that became Class 1. The program continues to make this objective a priority and has invested resources to decrease these numbers. In the fall of 2017, the program added contracted specialized dental staff to increase quality follow-up and referrals for children with dental needs.

Objective 4: NOT MET

Increase the number of children identified as CLASS 3.

There was not an increase in the number of children identified as CLASS 3. The program is researching ways to provide dental information to parents and assess the use of and fidelity to Cavity Free Kids.

Objective 5: MET

Increase the number of children who were referred by the program for mental health services outside of Head Start that received services.

The program increased the number of children, who were referred by the program for mental health services outside of Head Start that received services from .46% in 2015-2016 to 50% in 2016-2017. Communication and follow up directly from the mental health specialist may have contributed to the increase. There were also strategically provided interventions when a referral to an outside agency may not have been needed.

Objective 6: NOT MET

Decrease the number of findings in the Grantee Environmental Health and Safety Monitoring Reviews.

The objective was to decrease findings in safety monitoring reviews by 91. Staff increased safety monitoring to improve the quality of education provider facilities. As quality increases, a residual effect is increased findings. This objective was not met.

Objective 7: NOT MET Increase the knowledge of Head Start Staff in Environmental Health and Safety Protocol.

According to the staff survey, the program did not increase the knowledge of Head Start staff in Environmental Health and Safety Protocol. During the school year, the program increased staff survey responses with a focus on new staff and different levels of staff outside of the classroom. This accounted for the decrease in knowledge and those groups have received additional training.

Objective 8: MET

Increase the knowledge of Head Start and EHS-CCP parents/ guardians in Environmental Health and Safety practices.

According to the program survey, there was increased knowledge of Head Start and EHS-CCP parents/guardians in Environmental Health and Safety practices. There was also an increased completion rate from the previous year. The program met the objective.

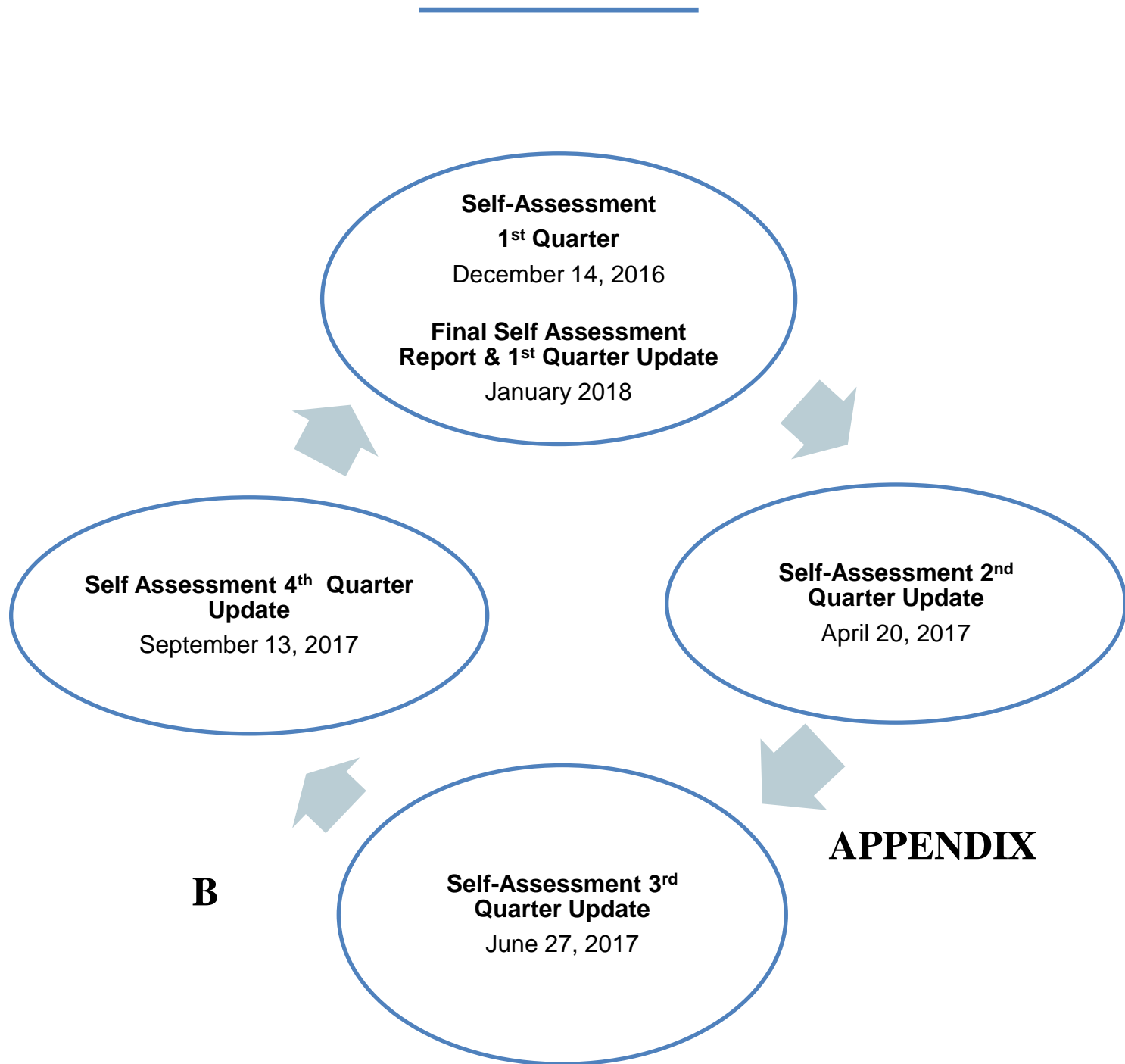
Summary of Report

Overall, the program is compliant with the Head Start Program Performance Standards. Benchmark requirements were met at the 100% levels in all content areas. No areas exceeded a non-compliance rate of more than 10%. Several content areas had a non-compliance rate of less than 5% which shows program strengths at many levels. Other program strengths identified in the areas of ERSEA, Education and Disabilities, and Family and Community Support and Mental Health demonstrate the program's dedication to providing the best Head Start services every day.

While the program met most 5-Year Strategic Plan objectives, there is still room for improvement in areas such as Program Design and Management, Family and Community Support, and Health. The identified strengths and areas of improvement will assist the program in reevaluating goals and measures for the next 5-Year Strategic Plan. The Self-Assessment process will continue to be used for ongoing assessment of all program services to not only ensure compliance with Head Start Program Performance Standards, but to ensure the needs of all program children and families are met.

APPENDIX A

Self-Assessment Process



2016-2017 Quarterly Self-Assessment Data Review- List of Participants

NAME	ORGANIZATION	ROLE
Aldrich, Christa	HEB	Community Stakeholder
Alfaro, Leslie	City of San Antonio	Vista Volunteer
Barrett, Kathe	City of San Antonio	Head Start Policy Council
Bentley, Cassandra	City of San Antonio	Senior Management Analyst
Brightman, Mikel	City of San Antonio	Head Start Program Administrator
Burnett, Erin	Pre-K 4 SA	Community Stakeholder
Callanen, Leticia	City of San Antonio	DHS Project Manager
Canales, Debra	City of San Antonio	Senior Management Analyst
Castillo, Saeni	University of Texas at San Antonio	Community Stakeholder
Castro, Yolanda	Office of Head Start	Training and Technical Assistance
Chavez, Amy	Easter Seals ECE	Community Stakeholder
Clark-Peterek, Mica	City of San Antonio	Special Projects Manager
Cortez, Dr. Mari	University of Texas at San Antonio	Community Stakeholder
El Khoury, Fatima	City of San Antonio	Management Analyst
Esparza, Elizabeth	City of San Antonio	Special Projects Manager
Farias-Ybarra, Cassandra	City of San Antonio	Senior Management Analyst
Fletcher, Dr. Kathy	Voices for Children	Community Stakeholder
Flores, Rebecca	City of San Antonio	Education Program Administrator
Galvan, Mercy	Ella Austin Community Center	EHS-CCP Education Service Provider
Goddard, Caroline	United Way	Community Stakeholder
Hargrove, Anthony	Ella Austin Community Center	EHS-CCP Education Service Provider
Hernandez, Crystal	YWCA Olga Madrid Center	EHS-CCP Education Service Provider
Hernandez, Laura	San Antonio Metropolitan Health District	Service Provider
Hodge, Martha	City of San Antonio	Family Support Worker
Huff, Cresencia	San Antonio Library	Community Stakeholder
Jordan, Kim	City of San Antonio	Management Analyst
Jozwiack, Dr. Melissa	Texas A&M San Antonio	Community Stakeholder
Kight, Rachelle	City of San Antonio	Management Analyst
Maldonado, Dora	City of San Antonio	Head Start Policy Council Parent
Mantooth, Sylvia	City of San Antonio	Management Analyst
Martinez, Andrea	City of San Antonio	Senior Management Analyst
Martinez, Albert	City of San Antonio	Head Start Policy Council Parent
Mendez, Dianne	City of San Antonio	Management Analyst
Miller-Baker, Dr. Mary	Edgewood Independent School District	Head Start Education Service Provider
Ortiz, Sophia	University of Texas at San Antonio	Community Stakeholder
Page, Rhiannon	City of San Antonio	Senior Management Analyst
Pastrana, Letycia	Ella Austin Community Center	EHS-CCP Education Service Provider
Pearce, Rachel	City of San Antonio	Management Analyst

Perez, Aleida	San Antonio Independent School District	Head Start Education Service Provider
Perez, Griselda	City of San Antonio	Management Analyst
Puente, Kendra	Seton Home	EHS-CCP Education Service Provider
Quinones, Christina	San Antonio Independent School District	Head Start Education Service Provider
Ramirez, Rica	University of Texas at San Antonio	Community Stakeholder
Ratlief, Judy	United Way	Community Stakeholder
Roach, Rhonda	City of San Antonio	Special Projects Manager
Rodriguez, Jeanette	Edgewood Independent School District	Head Start Education Service Provider
Rodriguez, Gilbert	Seton Home	EHS-CCP Education Service Provider
Serrano, Dina	City of San Antonio	Head Start Policy Council
Silva, Carol	Blessed Sacrament Academy	EHS-CCP Education Service Provider
Villela, Joshua	City of San Antonio	Special Projects Manager
White, Shirley	Healy Murphy Center	EHS-CCP Education Service Provider