



“Supporting the growth of healthy children and families, positive parenting, and school readiness.”

***Self-Assessment Report 2017 – 2018***

***Birth to Five Years***

***Introduction:***

CCCC, a non-profit organization, provided comprehensive services for 628 Head Start and 86 Early Head Start children in eight locations throughout Clackamas County. The organization has been in operation since 1973. 132 employees provide the infrastructure to successfully create growth opportunities for children and families through center based classrooms and home visits.

The CCCC self-assessment process is a year-round effort rather than a one-time event. The process began in January and continued through August after the PIR is complete. The results give CCCC a context to plan for improvements and to build on current strengths.

***Methodology:***

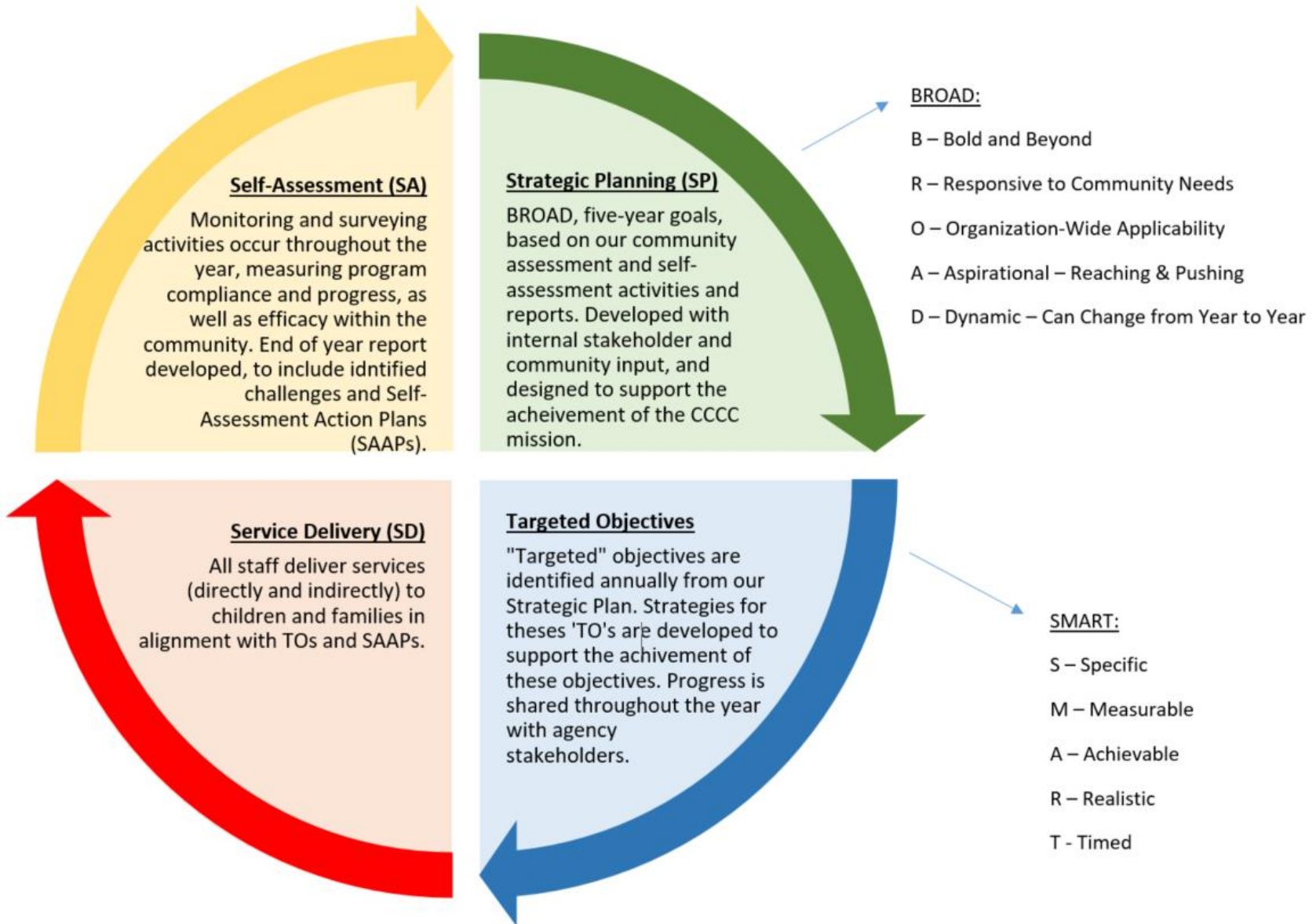
Members of the Policy Council, Board and Management contributed to the Self-Assessment process in a variety of ways. Policy Council members visited all classrooms/facilities and completed an Environmental Health and Safety Checklist and results were compiled in March.

Ongoing Monitoring occurred monthly through the Monitoring By Information Reports (MBI). These reports included information regarding enrollment, attendance, screening completions, CLASS scores, and TS Gold checkpoints, and were used as a guide to completing the self-assessment.

CCCC's Five-Year Goals and annual Targeted Objectives were also reviewed for completion, as were the School Readiness Goals.

The visual on the next page, taken from our agency policy and procedure for self-assessment and program planning, further illustrates our self-assessment procedure:

# Program Planning and Self-Assessment Cycle



**Key Insights:**

<b>Disabilities</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"><li>• ASQ-3 and ASQ-SE 2 developmental screenings</li><li>• Re-screens of ASQ-3 and ASQ-SE 2</li><li>• Number CESD referrals</li><li>• Number of children with IEP/IFSP</li><li>• Number of children with an identified disability concern</li><li>• Number of children referred to CCCC's internal Child Study Team based on developmental screening results</li></ul>
<b>Strengths:</b>	<ul style="list-style-type: none"><li>• We are serving well above the required 10% of funded enrollment for children with disabilities.</li><li>• Collaborative partnership with CESD is adequately supporting children, families, and education staff in the area of disabilities.</li><li>• We are highly proactive in identifying and referring children with disability concerns to local LEA agency for further evaluation.</li><li>• The Child Study Team approach to case management for HS children provided adequate support for children to pass developmental re-screens after initial developmental concerns were identified upon enrollment.</li></ul>

<b>Education</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Home visit and conference reports</li> <li>• Child assessment data (observations, progress checkpoints)</li> <li>• School Readiness Goals and GOLD®/GALILEO child outcomes data</li> <li>• CLASS® observation scores (HS)</li> <li>• TPOT® and TPITOS® observation scores</li> <li>• Practice Based Coaching data</li> <li>• Teacher FASN scores, Teacher Family Goal and Child Goal reports</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• Annual Practice Based Coaching plan was implemented in the Teachers Learning and Collaborating (TCL) group format for HS teachers this year. EHS education staff received Practice Based Coaching through the face to face delivery model.</li> <li>• CLASS® scores for HS were above the national average, with a program wide Instructional Support average score above a 3 in both Fall 2017 and Spring 2018. Teachers who participated in Practice Based Coaching showed an increase in CLASS scores in the domains of Emotional Support and Classroom Organization from Fall 2017 to Spring 2018.</li> <li>• CCCC met 100% compliance in the area of 45 Day Requirements for developmental screenings for all enrolled children.</li> <li>• At least 80% of enrolled HS children met or exceeded widely held expectations in the mathematics domain.</li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• 5 out of 10 school readiness goals for HS were not achieved, although percentages of children meeting each goal showed growth from Spring 2017 to Spring 2018. Goals were measured by GOLD® scores.</li> <li>• Implementing the Creative Curriculum Daily Resources to fidelity in HS classrooms, as measured by fidelity checklist observations.</li> <li>• Implementing Tier 1 and Tier 2 strategies of the Pyramid Model &amp; PBIS to fidelity in HS classrooms, as measured by TPOT® scores.</li> <li>• Consistent implementation of the essential strategies for effectively responding to challenging behavior in HS classrooms, as measured by TPOT® scores.</li> </ul>

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<b>Education Self-Assessment Action Plan</b>					
SAAP	<i>Specific goal:</i>	<i>Measurable – how we know it's achieved:</i>	<i>Achievable by whom:</i>	<i>Realistic – resources necessary:</i>	<i>Timed (Due):</i>
1.	<i>Provide training for education staff regarding the Early Learning Outcomes Framework.</i>	<i>Training will occur as scheduled.</i>	<i>Education Manager</i>	<i>Training dollars, facilitator.</i>	<i>Before first day of fall classes</i>
2.	<i>Provide new supervision monitoring schedule for assessing all classrooms' fidelity of implementing the Creative Curriculum.</i>	<i>Schedule and tools will be made available through agency document site. Monthly task lists will prompt use.</i>	<i>Education Manager</i>	<i>Time for development.</i>	<i>12/31/18</i>
3.	<i>Provide new training for HS education staff on the essential strategies for effectively responding to challenging behavior.</i>	<i>Training content will be made available through the CSEFEL website. Agency Learning Plans will prompt use.</i>	<i>Education Manager</i>	<i>Time for development.</i>	<i>5/31/18</i>
4.	<i>Provide new supervision monitoring schedule for assessing all HS classrooms' using the TPOT tool for implementation of Pyramid Model &amp; PBIS practices.</i>	<i>Schedule and tools will be made available through agency document site. Monthly task lists will prompt use.</i>	<i>Education Manager</i>	<i>Time for development.</i>	<i>10/1/18</i>
5.	<i>Provide new training for HS education staff on targeted teaching practices that support Tier 1 and Tier 2 of the Pyramid Model.</i>	<i>Training content will be made available through the CSEFEL website. Agency Learning Plans will prompt use.</i>	<i>Education Manager</i>	<i>Time for development.</i>	<i>5/31/18</i>

<b>ERSEA</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• <i>Child Plus ERSEA recruitment reports – new, accepted, and waitlisted children, funded enrollment, cumulative enrollment</i></li> <li>• <i>Enrollment demographics &amp; eligibility reports</i></li> <li>• <i>Demographics - homeless count</i></li> <li>• <i>Attendance rate of families at orientation events</i></li> <li>• <i>Child attendance reports and classroom attendance sheets</i></li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• <i>By July 2017, we filled 85% of our total enrollment slots for the 2017-2018 program year.</i></li> <li>• <i>All funded enrollment slots were filled by the first scheduled day of classes in Fall 2017.</i></li> <li>• <i>By 9/1/17 we had a large number of eligible children on our waitlist.</i></li> <li>• <i>On the first day of class in 2017-2018, the child attendance rate was 99.6%.</i></li> <li>• <i>During the 2017-2018 program year we served a total of 966 children and pregnant mothers.</i></li> <li>• <i>We served 321 homeless families during the 2017-2018 program year.</i></li> <li>• <i>The agency opened a new center in the rural area of Estacada.</i></li> <li>• <i>The ERSEA team intentionally increased the number of recruitment calls made during Spring 2018.</i></li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• <i>Cumulative enrollment for 17-18 was 966. The increase in client turnover impacted our waitlists in target areas.</i></li> <li>• <i>Many more families requested duration slots than the program could offer in order to meet client needs.</i></li> <li>• <i>Competition from other Head Start programs impacted our enrollment efforts, especially in rural areas such as: Barlow, Mulino, and Sandy Ridge.</i></li> </ul>

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<b>ERSEA Self-Assessment Action Plan</b>					
<i>SAAP</i>	<i>Specific goal:</i>	<i>Measurable – how we know it’s achieved:</i>	<i>Achievable by whom:</i>	<i>Realistic – resources necessary:</i>	<i>Timed (Due):</i>
1.	<i>Increase the volume of recruitment phone calls to 700 annually.</i>	<i>Yearly recruitment call logs and Enrollment Priority ChildPlus Report.</i>	<i>ERSEA Manager</i>	<i>Potentially add a part time phone receptionist who can filter incoming calls and complete follow up phone calls to potential families.</i>	<i>June 2019</i>
2.	<i>Participate in additional community networking events during the 18-19 year in order to improve community visibility and enrollment.</i>	<i>Event applications and meeting agendas.</i>	<i>ERSEA Manager</i>	<i>The ERSEA team will share the responsibility of attending community events throughout the year in order to increase family referrals to our program.</i>	<i>June 2019</i>
3.	<i>Visit key strategic community businesses and organizations in rural communities to strengthen our recruitment efforts.</i>	<i>Lists of potential organizations to visit.</i>	<i>ERSEA Manager</i>	<i>The ERSEA Team will assign target areas to specific team members who will visit and place communication and recruitment materials (posters, brochures, business cards) in designated businesses, agencies, apartment complexes, etc.</i>	<i>June 2019</i>

<b>Health Services</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Vision &amp; hearing screenings and appropriate follow-up – 45 day Health Screenings requirement</li> <li>• Access to care/Medical &amp; Dental home – 30 day Source of Care requirement</li> <li>• Well child exams/dentals (up-to-date per state EPSDT) - 90 day Health Status Determination requirement</li> <li>• Immunization status</li> <li>• Dental treatment received</li> <li>• Over &amp; underweight children</li> <li>• Pregnant Women Services</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• 99%+ children received high quality health screenings within 45 days of entry into program.</li> <li>• At 90 days, 90%+ of enrolled children had dental exams and well child exams on record.</li> <li>• 95% of enrolled children had active health insurance at any given time during program year 75% of pregnant women had a dental exam completed.</li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• Gap between children identified at school as needing follow-up from health screenings (vision, hearing, growth assessments and dental) and number of children who get a follow-up.</li> <li>• Engaging parents formally and informally on health and nutrition topics that are foundations to healthy living and developing habits.</li> </ul>

<b>Health Services Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Strengthen monitoring system to ensure timely follow-up and support after “refer” health screening results.	ChildPlus reporting Monthly health reports.	Health Services Manager	ChildPlus, community partners, money.	Dec 2018
2.	Strengthen parent education on health & nutrition issues that support school readiness.	ChildPlus reporting Updated prenatal notebook Robust parent resources on public website and SharePoint.	Health Services Manager	ChildPlus, community partners.	June 2019



<b>Human Resources</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Staff Turnover reports</li> <li>• Central Background Registry reports</li> <li>• CDA Progress &amp; Renewals</li> <li>• New Hire Onboarding Requirements</li> <li>• Staff Attendance reports</li> <li>• EEO &amp; Demographic reports</li> <li>• Training Hours Requirements/Completion</li> <li>• Performance Evaluation Data</li> <li>• Staff Education &amp; Certifications</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• Low Teacher and Aide Turnover compared to National Averages.</li> <li>• Improved CDA expiration date tracking and support for renewals.</li> <li>• Improved training hour's requirements tracking.</li> </ul>
<b>Challenges</b>	<ul style="list-style-type: none"> <li>• High Assistant Teacher turnover compared to national averages.</li> <li>• High staff incident rates compared to recent previous years.</li> <li>• Lack of Bus Driver applicants for two years.</li> </ul>

<b>Human Resources Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Reduce Assistant Teacher turnover at CCCC in 2018-2019, compared to CCCC's 2017-2018 rates.	Comparison of turnover rates from 2018-2019 to 2017-2018.	HR Director	Union collaboration; time to assess and develop proposal.	June 2019
2.	Reduce staff incident rates at CCCC in 2018-2019, compared to CCCC's 2017-2018 rates.	Comparison of incident rates from 2018-2019 to 2017-2018.	HR Director	Time for collaboration with SAIF and to assess/address internal policies and procedure.	June 2019

<b>Mental Health Services</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Number of Social/Emotional/Behavioral referrals</li> <li>• Number of children with a Child Study Team event</li> <li>• Number of referrals to Mental Health</li> <li>• Number of children and families that had at least one Mental Health Services transaction during 2017-2018</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• Case Management model is supporting children with social and emotional concerns using a proactive approach.</li> <li>• Mental Health specialists supported children in the areas of disabilities and social emotional development combined.</li> <li>• Mental Health and Inclusion Specialists provided parent education classes to families.</li> <li>• Mental Health interns provided play therapy to high needs children.</li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• High number of children at each center with Mental Health or Social Emotional needs.</li> <li>• Limited FTE of Mental Health and Inclusion Specialists.</li> <li>• Classroom staffing challenges impacted specialists' ability to effectively serve the highest need families in the area of Mental Health.</li> </ul>

<b>Mental Health Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Improve Mental Health service delivery by creating specific job descriptions for Mental Health Specialists that focus intentionally on social emotional and Mental Health supports, resources, and direct services.	Specialists will have clearly defined role and responsibilities and will strengthen service delivery in the area of Mental Health.	Program Services Director	Creation of Mental Health Specialist positions to allow for the appropriate assignment of duties.	October 1, 2018
2.	Improve Mental Health service delivery by strengthening the current internal referral system.	Referral caseloads will be reduced in order to improve frequency and intensity of service delivery.	Program Services Director	Review of current Mental Health system documents; update and revise as appropriate.	October 31, 2018

<b>Nutrition</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Daily Vendor Reports</li> <li>• Meal County Verification Reports</li> <li>• Food Quality Score Cards</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• Staff compliance in meal counts, family style meal service, and required documentation.</li> <li>• Technical assistance provided to staff, to improve service delivery and compliance in meal counts.</li> <li>• Food service quality meet expectations and compliance.</li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• Daily Vendor Receipts are not reviewed to ensure accuracy in meals provided by vendor.</li> <li>• Classrooms with vended meal agreements require more monitoring to ensure meal service meet CACFP requirements (food quantities, components, paperwork).</li> </ul>

<b>Nutrition Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Create a tracking and reporting system to ensure food deliveries are accurate and in compliance with CACFP.	Monitoring system is created and implemented.	Food Service Manager	Time.	9/1/18
2.	Develop a monitoring system for vended meal centers.	Monitoring system is created and implemented.	Food Service Manager	Time.	9/1/18

<b>PFCE</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Advocate Family Assessment of Strengths and Needs (FASN) completions, enrollment dates</li> <li>• Number of Family Goals set, Goal status and completions, PFCE Framework links, CRM and CST reports</li> <li>• Number of Needs Identified, Resources provided, parent satisfaction reports, Parent Survey results</li> <li>• Advocate performance review data</li> </ul>
<b>Strengths:</b>	<ul style="list-style-type: none"> <li>• FASNs were completed for 83% of cumulatively enrolled families during 2017-2018.</li> <li>• Refusal forms are available for PFCE, Education and Health components.</li> <li>• Advocates set over 500 Family goals with parents. Of these, 78% were partially or fully achieved.</li> <li>• Families identified over 600 prioritized needs. Of these, 85% had at least one resource provided and parents reported full satisfaction for 63%. Some identified needs were rated as no longer needed or inactive. Less than 1% of identified needs were rated as unsatisfied with reasons explored (dental coverage to supplement private insurance, lack of housing resources and limited transportation to parenting classes).</li> <li>• Advocates, teachers, education supervisors and inclusion specialists used a collaborative and holistic approach to case management in order to effectively serve high needs children and families, as evidenced by 389 children with at least 1 Child Study Team event.</li> </ul>
<b>Challenges:</b>	<ul style="list-style-type: none"> <li>• Due to the increase in client turnover in 2017-2018, 20% of enrolled families did not have a FASN completed at the end of the program year; most of these families were enrolled more than 90 days.</li> <li>• Some advocates did not meet performance expectations in the area of timely, consistent data entry related to missing and/or expired Well Child Checks.</li> </ul>

<b>PFCE Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Consistent, timely data entry in Health tracking.	Monthly Child Plus reports/Individual training/Health Triage meetings	PFCE Manager	Monthly CP reports; timely Supervisor follow-up.	5/30/19
2.	Accurate tracking of FASNs within 90 days for FASN and Goal incompletions.	Child Plus reports/Monthly monitoring occurs beginning 11/15	PFCE Manager	Monthly CP Social Service reports to include detailed information.	6/1/19

<b>Health &amp; Safety</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• <i>Monthly Health &amp; Safety Checklist</i></li> <li>• <i>Center Daily Checklist</i></li> <li>• <i>Classroom Daily Checklist</i></li> <li>• <i>Playground Daily Checklist</i></li> </ul>
<b>Strengths</b>	<ul style="list-style-type: none"> <li>• <i>Health and safety concerns were quickly identified.</i></li> <li>• <i>Centers are safe and in compliance with Head Start PS and environmental health/safety requirements.</i></li> <li>• <i>Work order/repairs were addressed in a timely manner.</i></li> </ul>
<b>Challenges</b>	<ul style="list-style-type: none"> <li>• <i>Checklists are redundant in some areas.</i></li> <li>• <i>Some compliance indicators are more relevant for the Facilities Department.</i></li> <li>• <i>Checklist is too long; limiting the efficacy.</i></li> <li>• <i>Different employees completing checklist; creates inconsistency in findings and difficulty in training.</i></li> </ul>

<b>Health &amp; Safety Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it’s achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	<i>Review and revised checklist to include specific compliance indicators for center operations and child safety.</i>	<i>Checklist is completed; monitoring schedule is created and implemented.</i>	<i>Operations Director</i>	<i>Time.</i>	<i>9/1/18</i>
2.	<i>Create a bi-annual facilities checklist to include compliance indicators for facilities and maintenance.</i>	<i>Checklist is completed; monitoring schedule is created and implemented.</i>	<i>Operations Director</i>	<i>Time.</i>	<i>9/1/18</i>
3.	<i>Review current daily compliance checklists; revise and create one checklist to be completed. Include new indicators to meet compliance in health, safety, and center operations.</i>	<i>Checklist is completed; monitoring schedule is created and implemented.</i>	<i>Operations Director</i>	<i>Time.</i>	<i>9/1/18</i>

<b>Transportation</b>	
<b>Data Reviewed:</b>	<ul style="list-style-type: none"> <li>• Daily Transportation Logs (DTL's)</li> <li>• Pre and Post Trip Checklists</li> <li>• Bus Route Data (address/length)</li> </ul>
<b>Strengths</b>	<ul style="list-style-type: none"> <li>• Routes meet ODE/HS requirements.</li> <li>• Pre and Post trip checklists are completed and ensure bus safety.</li> <li>• DTL's are completed to ensure that children released to an appropriate/approved adult; safety is maintained.</li> </ul>
<b>Challenges</b>	<ul style="list-style-type: none"> <li>• Monitoring of pre and post checklists.</li> <li>• System of developing and tracking routes is unclear.</li> </ul>

<b>Transportation Self-Assessment Action Plan</b>					
SAAP	Specific goal:	Measurable – how we know it's achieved:	Achievable by whom:	Realistic – resources necessary:	Timed (Due):
1.	Develop a monitoring system and training, to ensure pre/post trip inspections are completed accurately.	Monitoring system is implemented.	Operations Director	Time.	2/1/19
2.	Develop a formalized system for route creation.	Routes are created using systems.	Operations Director	Time.	2/1/19
3.	Implement bus route tracking system for oversight and compliance.	Tracking system is created and implemented.	Operations	Time and financial resources.	5/1/19

Revised: 11/1/2018