

CARD PROGRAM SELF ASSESSMENT REPORT 2022-2023

1. **INTRODUCTION**
2. **PROGRAM DESCRIPTION**

Community Action Resource and Development (CARD) Head Start program, initiated as a grantee in the 1960s, has a rich history and steadfast commitment to serving the community in Northeast Oklahoma. The program currently extends its services across six counties: Mayes, Wagoner, Rogers, Washington, Nowata, and selected areas within Tulsa county. With a focus on providing quality early childhood education and development services, CARD operates both Head Start and Early Head Start Programs.

The Head Start program under CARD is designed to serve 574 children through a classroom-based model. This model is not only implemented in standalone Head Start and Early Head Start sites but also integrated within public schools through strategic partnerships with local educational institutions and community organizations. These collaborations are crucial as they facilitate a seamless blend of educational resources and support, creating an environment conducive for the holistic development of children enrolled in the program.

In addition to the classroom-based model for children, the Early Head Start Program offers services to 143 children and expectant mothers, providing them with both center and home-based options. The center-based option provides a structured setting where children and mothers can access various resources and participate in planned educational activities. Concurrently, the home-based option is designed for those who prefer receiving services in the comfort of their homes, where educators and support staff conduct regular visits to provide necessary educational support and resources.

A cornerstone of CARD Head Start’s success is its strong community presence, which is cultivated through numerous partnerships with local agencies, programs, and non-profit organizations. These partnerships are invaluable as they not only provide additional resources and support to the program but also create a network of community assistance and engagement that benefits both the children and their families.

Furthermore, CARD Head Start / Early Head Start places a significant emphasis on community and family engagement, fostering a vibrant and supportive community through various socialization events and training programs. These initiatives are designed to engage families and the community actively, promoting a sense of belonging and shared responsibility towards the development and well-being of the children. Through these events and training sessions, parents and community members are empowered with the knowledge and skills necessary to contribute positively to the children’s learning and development journey.

In summary, the CARD Head Start and Early Head Start Program are comprehensive early childhood development initiatives that serve the Northeast Oklahoma community diligently. Through classroom and home-based models, strategic partnerships with schools and community organizations, and a strong emphasis on community and family engagement, CARD Head Start / Early Head Start continues to be a beacon of support and development for children and families in the region.

1. **CONTEXT FOR SELF ASSESSMENT**

The Self-Assessment process is a crucial component of the continuous improvement strategy employed by the CARD Head Start and Early Head Start Programs. This ongoing process is especially pivotal as the program approaches a new grant cycle commencing in November 2023, with data being meticulously analyzed up until July 2023. The program, akin to many others nationwide, navigates through the persistent challenges posed by the COVID-19 pandemic, which has inevitably impacted its operations and service delivery.

In preparation for the upcoming grant cycle and to understand the program's current standing and areas for improvement, a thorough review of previous self-assessment data was undertaken. This review was not conducted in isolation but was a collaborative effort involving the program’s management staff, who worked closely with various partners, stakeholders, and parents. These collaborative efforts ensured that the review process was inclusive and reflective of the diverse perspectives and insights of all individuals and entities invested in the program's success.

The data reviewed during this process included information gleaned from previous management meetings, ongoing monitoring reports, and data analysis events. This comprehensive review allowed the team to have a holistic understanding of the program's performance, challenges, and opportunities for improvement. The review process was not merely about understanding the numbers but interpreting them in the context of the program's changing environment, primarily due to the pandemic.

As the program transitions into a post-pandemic world, the primary focus has undergone a significant shift. While initially, the emphasis was on devising strategies to safely provide in-person services amidst the pandemic, the focus has now evolved towards sustaining full enrollment and maintaining adequate staffing levels. This shift is indicative of the program's responsiveness to the changing needs and priorities in a post-pandemic context.

Furthermore, the data under review has been categorized into three distinct phases: “before”, “during”, and “post” emergency status, corresponding to the various stages of the pandemic. This categorization is instrumental in understanding the pandemic's lasting impacts on the communities, families, and children served by the CARD Head Start / Early Head Start Program. It provides valuable insights into how the pandemic has altered the social and educational landscape and how these changes have, in turn, affected the program's target demographic.

The program aims to uncover the lasting impacts of COVID-19 on the communities it serves. Understanding these impacts is crucial for planning and implementing effective strategies to address the emerging needs and challenges faced by children and families in the post-pandemic world. The insights derived from the self-assessment process will be invaluable in guiding the program's future direction and strategies, ensuring it continues to effectively serve and support the community in these unprecedented times.

1. **METHODOLOGY**
2. **An overview of the Self-Assessment process is outlined below.**

The Annual Self-Assessment Report for CARD Head Start and Early Head Start program employs a meticulously designed self-assessment process that is data-driven and inclusive. This process is structured to incorporate aggregated data collected from diverse sources and at different intervals throughout the program year, ensuring a comprehensive and accurate reflection of the program’s performance and impact.

*Formation of Self-Assessment Team:*

A dedicated self-assessment team is constituted to spearhead the review of selected data sets. This team is not monolithic but is a coalition of various stakeholders, each bringing a unique perspective and insight to the table. The team comprises executive board members, policy council members, community representatives, program advisory board members, members from the school readiness task force, professionals from the early childhood education field, health committees, and community partners. These community partners include local educational agencies, mental health consultants, medical professionals, community agency members, parents, and staff members who represent a spectrum of services and fields. This diverse composition of the team ensures a holistic and multi-dimensional review of the data.

*Data Collection and Sharing:*

Post-pandemic, the process of information sharing and collaboration has been revitalized, with a blend of in-person and digital engagements. Formal meetings serve as primary venues for in-person information sharing, while digital formats and social media platforms facilitate continuous communication and collaboration among team members. This hybrid model of information sharing ensures accessibility and participation from all team members, regardless of their geographical location or scheduling constraints.

*Data Compilation and Analysis:*

The management team plays a pivotal role in compiling and analyzing the data. They sift through vast sets of data to identify and extract information that is relevant and can yield valuable insights into the program’s effectiveness and areas for improvement. The data is then transformed into a format that is easily understandable and interpretable, making it accessible for all stakeholders involved in the self-assessment process.

*Focus Areas:*

The self-assessment team operates with a clear focus on key areas critical to the program’s success and the welfare of the participating children and families. These focus areas include full enrollment, continuous improvement, outcomes for children and families, health and safety protocols, school readiness initiatives, and professional development opportunities for staff. The team critically evaluates data in these domains, assessing outcomes, systems, and strengths while ensuring compliance with relevant standards and regulations.

*Outcome-Based Thinking:*

Team members are encouraged to approach the data with an outcome-based mindset. They are prompted to consider the implications of the data on outcomes for children and families, the efficacy of systems in place, the strengths of the program, and compliance with regulatory requirements. This outcome-based approach facilitates a deeper understanding of the program’s impact and effectiveness.

*Report Summation and Availability:*

Upon completion of the data review and analysis process, the management team consolidates the findings into a comprehensive self-assessment report. This report serves as a summative document that encapsulates the key findings, insights, and recommendations derived from the self-assessment process. The report is made readily available to relevant stakeholders, serving as a valuable resource for informed decision-making and strategic planning for the program’s future.

*Conclusion:*

Through this methodical and inclusive self-assessment process, the CARD Head Start and Early Head Start programs ensure a thorough evaluation of their performance and impact. The process engages a wide range of stakeholders, utilizes data effectively, and focuses on key areas of importance, providing a clear roadmap for continuous improvement and success in serving children and families in the community.

**B. Self-Assessment Time Frame**

The Annual Program Self-Assessment Report for CARD Head Start and Early Head Start program operates within a well-defined timeframe, meticulously aligning with the program and budget years to ensure a seamless and comprehensive evaluation process.

*Ongoing Monitoring:*

Throughout the program year, which runs from August to July, there is a continuous process of receiving and analyzing ongoing monitoring reports. Various individuals, including management personnel, policy council members, executive board members, parents, and staff, actively engage in this process. This ongoing monitoring allows for real-time assessment and response to the program's dynamics, facilitating immediate adjustments and improvements as needed.

*Quarterly Reviews:*

Within this annual cycle, quarterly reviews are conducted to analyze child progress data. These reviews are crucial for evaluating the effectiveness of the program in achieving its objectives and school readiness goals. During these quarterly assessments, data related to child safety, including Health and Safety monitoring reports, center staff meeting notes, child injury and staff accident reports, and inspection reports from Head Start/Early Head Start sites, are meticulously reviewed and analyzed.

*Comprehensive Annual Review:*

While preliminary data analysis is a continuous process, the comprehensive review of the “big picture” data begins in early September each year. This stage marks the initiation of the compilation and aggregation of data for the entire program year. The data used for this comprehensive review is extensive, with a partial list provided in subsequent sections of the report.

*Review Process in September:*

Starting in September, various groups, including the policy council, work groups, committees, and subcommittees, engage in reviewing and analyzing the compiled data. These groups play a pivotal role in understanding the implications of the data, identifying trends, and making informed recommendations for improvement. During this period, the review groups also pay close attention to the impact of external factors, such as the COVID-19 pandemic, on the program's data and overall performance.

*Data Availability in August:*

It is noteworthy that the most complete and comprehensive set of data is available in August each year. Since the program operates twelve months a year, the data available in August provides a full view of the program’s activities, outcomes, and challenges over the entire year, serving as a robust foundation for the annual self-assessment process.

*Conclusion:*

The timeframe for the Annual Self-Assessment Report is strategically designed to facilitate both ongoing monitoring and a comprehensive annual review. With the program year running from August to July and the budget year from November 1st to October 31st, the self-assessment process is well-positioned to utilize the most complete data sets, engage various stakeholders in the review process, and conduct a thorough evaluation of the program’s performance and impact over the year. This structured timeframe ensures that the self-assessment process is not only systematic but also reflective of the program’s true impact and effectiveness in serving children and families.

1. **Data collection tools used**

The Annual Program Self-Assessment Report for CARD Head Start and Early Head Start programs utilizes a diverse array of data collection tools to ensure a comprehensive and accurate evaluation of the program’s performance, impact, and needs.

*Child Plus Reports:*

Child Plus is a pivotal tool that generates various reports crucial for the assessment. These reports include attendance records, health markers, enrollment data, Individualized Family Service Programs (IFSP) reports, Individualized Education Plan (IEP) reports, program demographics, families’ social services data, and referral records. These reports provide a granular view of each child’s participation, health status, educational plan, and the services they and their families receive, offering insights into the program’s reach and effectiveness.

*Curriculum Reports (TS GOLD & DRDP):*

Reports generated from the Teaching Strategies GOLD (TS GOLD) and Desired Results Developmental Profile (DRDP) curriculum tools offer valuable data on children’s developmental progress and learning outcomes. These tools help in tracking and assessing each child’s development and learning, providing a basis for individualized instruction and intervention.

*Aggregated Child Progress & DLL Information:*

Aggregated child progress data and Dual Language Learner (DLL) information are collected to understand the overall progress made by children in the program and to assess the effectiveness of the program's support for DLLs.

*Quality Measures (CLASS, QCIT):*

Quality measures, including Classroom Assessment Scoring System (CLASS) and Quality Counts IT (QCIT), are employed to evaluate the quality of teacher-child interactions and the overall quality of the program's early childhood education environment.

*Health/Safety Monitoring Reports:*

These reports provide crucial data on the health and safety conditions within the program, offering insights into the program’s compliance with health and safety standards and the effectiveness of its health and safety protocols.

*Financial Reports:*

Financial reports offer a detailed view of the program’s financial health, expenditures, and budgetary compliance, providing a basis for financial planning and accountability.

*Child File Review Data:*

Child file review data provides individualized records of each child’s participation, progress, and needs, serving as a valuable resource for individualized planning and support.

*Maintenance and Facility Reports:*

These reports offer insights into the condition and maintenance needs of the program’s facilities, providing a basis for facility planning and maintenance.

*Licensing Reports:*

Licensing reports provide data on the program’s compliance with licensing requirements and standards, offering insights into its legal and regulatory standing.

*Human Resource Reports:*

Human resource reports offer data on staff recruitment, retention, development, and performance, providing insights into the program’s human resource needs and challenges.

*PIR Data:*

Program Information Report (PIR) data provides a comprehensive view of the program’s services, staff, children, and families, offering insights into its reach, impact, and compliance with Head Start Performance Standards.

*Community Assessment Information:*

Community assessment information offers data on the needs, resources, and demographics of the community served by the program, providing a basis for community engagement and service planning.

*COVID-19 Tracking Tools (Added Since 2020):*

Since the onset of the COVID-19 pandemic in 2020, new tools have been incorporated for tracking COVID-19 data. These tools collect data from various websites and the program’s internal records on COVID-19 positive cases and exposures among children, families, and staff. This data was actively monitored through May 2023 to understand the impact of the pandemic on the program and to inform its health and safety planning and response.

*Conclusion:*

The diverse data collection tools employed by the CARD Head Start and Early Head Start ensure a comprehensive, accurate, and multi-dimensional evaluation of the program’s performance, impact, and needs. These tools collectively provide a wealth of data on children, families, staff, services, facilities, and the community, serving as a robust foundation for the program’s self-assessment, planning, and continuous improvement efforts.

1. **Key Insights**

**A. Strengths**

The CARD Head Start and Early Head Start programs boast a myriad of strengths that have been illuminated through the Annual Self-Assessment Report, underscoring their commitment to serving impoverished communities effectively and innovatively.

*Community Integration:*

CARD Head Start/Early Head Start is deeply entrenched in the communities it serves, having established a robust presence and trust among community members. The program is not merely a service provider but an integral part of the community fabric, working diligently to address the unique needs and challenges faced by impoverished communities.

*Valuable Community Partnerships:*

One of the program's standout strengths is its valuable partnerships with various community entities. These partnerships enhance the program's capacity to offer a wide range of services and resources to children and families. Collaborations with local agencies, non-profits, and community organizations enable the program to extend its reach and impact, providing comprehensive support to those in need.

*Parental Engagement and Employment:*

The program actively engages parents, not just as beneficiaries but as partners and contributors to the program's success. There is a concerted effort to train and employ parents associated with the program, fostering a sense of ownership and participation among families while providing them with employment opportunities.

*Investment in Technology and Curriculum:*

Significant investments have been made in technology, curriculum, training, and materials to support both home-based and center-based services. These investments ensure that children, families, and staff have access to the latest tools and resources to facilitate effective learning and service delivery, whether at home or in the program’s centers.

*Experienced and Qualified Staff:*

The program prides itself on having a team of staff members who are not only experienced but also highly qualified. Many staff have been with the program for multiple years, providing continuity and stability. The leadership team is well-educated, holding a variety of certifications and degrees that underscore their competence and commitment to early childhood education and development.

*Focus on Social/Emotional Support and Trauma-Informed Practices:*

Recognizing the importance of social and emotional well-being, the program has invested in strengthening support in these areas. Trauma-informed practices have been integrated into the program’s approach, ensuring that children and families who have experienced trauma receive sensitive and appropriate support.

*High-Quality Staff Training:*

There is a strong emphasis on providing high-quality training to staff. This focus on professional development ensures that staff are equipped with the knowledge and skills needed to deliver top-notch services to children and families, adapting to the evolving needs and challenges in the field of early childhood education and development.

*Innovative Marketing and Problem-Solving Strategies:*

In response to the challenges posed by the pandemic and the post-pandemic environment, the program has launched new marketing strategies and explored innovative solutions to address needs and challenges. This proactive and creative approach to problem-solving and outreach underscores the program’s commitment to adapting and thriving in changing circumstances.

*Competitive Compensation Packages:*

To attract and retain qualified and committed staff, CARD has prioritized the allocation of quality improvement funds for salaries. The program has also implemented cost-of-living adjustments (COLA) to improve compensation packages, making positions within the program more attractive and competitive in the job market.

*Conclusion:*

The strengths of the CARD Head Start and Early Head Start program, as highlighted in the Annual Program Self-Assessment Report, underscore their effectiveness, resilience, and commitment to serving children and families in impoverished communities. From community integration and partnerships to staff qualifications and innovative practices, the program’s strengths provide a solid foundation for its continued success and impact in the communities it serves.

**B. Systemic issues**

The CARD Head Start and Early Head Start program has encountered and navigated through various systemic issues, many of which were either created or exacerbated by the COVID-19 pandemic. These challenges have not only persisted but have also evolved, necessitating a dynamic and responsive approach to ensure the continued provision of high-quality care and services.

*Evolving Challenges Post-Pandemic:*

Since the onset of the COVID-19 pandemic in March 2020, the programs have been in a constant state of adjustment and course correction. The challenges brought about by the pandemic are not static but continually changing, requiring the program to adopt a flexible, creative, and improvisational approach to navigate through the post-pandemic landscape effectively.

*Economic Disparities and Income Eligibility:*

The economic upheavals caused by the pandemic have led to increases in wages and inflation. However, income eligibility criteria for program participation have not been adjusted accordingly. This discrepancy has created a gap where families may earn too much to qualify for the program but not enough to afford the care and services they need, highlighting a need for revisiting and adjusting income eligibility thresholds.

*Need for Full-Day Care:*

There is a growing demand within the community for full-day care services, combining Head Start/Early Head Start program with extended day services. This need reflects the changing work and life dynamics of families in the post-pandemic world, necessitating more extended care options to support working parents.

*Staff Recruitment and Retention Challenges:*

Hiring qualified staff has become increasingly challenging in the competitive job market. The program faces difficulties in attracting and retaining skilled and committed staff, with competitive wages and benefits being a significant factor. The stressors of the post-pandemic environment, including health concerns and economic uncertainties, further complicate staff recruitment and retention efforts.

*Staff Health and Absenteeism:*

Staff members have experienced higher susceptibility to illnesses in the post-pandemic period, leading to higher than usual rates of absenteeism. This increased absenteeism affects the program's capacity to deliver consistent and high-quality services, highlighting a need for enhanced health and wellness support for staff.

*Need for Holistic Health and Wellness Strategies:*

The pandemic has underscored the importance of health, mental health, and wellness for children, families, and staff. There is a clear need for stronger and more comprehensive strategies to promote and support health and wellness among all program participants and staff, addressing not only physical health but also mental health and emotional well-being.

*Impact of Staff Turnover:*

Staff turnover has a cascading effect on all aspects of the program. When staff leave, it disrupts the continuity of care and services for children and families, affects team dynamics and morale, and necessitates the investment of time and resources in recruiting and training new staff. The stressors of the post-pandemic environment, including health concerns, economic uncertainties, and the challenges of navigating through a changed world, contribute to staff turnover, creating a cycle of disruption and adjustment for the program.

*Conclusion:*

The systemic issues identified through the Annual Program Self-Assessment Report highlight the complex and evolving challenges faced by the CARD Head Start and Early Head Start programs in the post-pandemic world. These challenges require a multifaceted and adaptive response to ensure the continued provision of high-quality care and services for children and families while supporting the health, well-being, and retention of staff. Addressing these systemic issues is crucial for the program's stability, effectiveness, and long-term success in serving its community.

**C.\_Progress in meeting goals and objectives**

1. **Goal #1: Enhancing Educational Services**

Goal #1 of the CARD Head Start and Early Head Start programs is dedicated to enhancing the educational services provided to enrolled children and families. This enhancement aims to improve the academic experience of participants, thereby increasing their potential for school readiness and subsequent success in their educational journey.

*Objective #1:* Extend Program Hours

*Objective Description:*

The initial objective under this goal was to extend the duration of Head Start classes, aiming to offer a total of 1,020 hours per year to each enrolled child.

*Outcome*: This objective was not achieved.

*Progress and Challenges:*

* COVID-19 Impact: The advent of the COVID-19 pandemic significantly impacted staffing levels, making it challenging to extend program hours and open additional classrooms as initially planned.
* Extended Care Program: While there was some success in implementing an extended care program at select sites, the consistency of this initiative was hindered by pandemic-related shutdowns and staff absences.

*Objective #2:* Open Classes for Normative Group Sizes

*Objective Description*:

Introduced at the beginning of the fifth year, this objective aimed to open classes that would accommodate normative group sizes, moving away from the reduced sizes necessitated by COVID-19 precautions.

*Outcome:* This objective was not achieved.

*Progress and Challenges:*

* Partial Progress*:* While there was progress in opening more classrooms, the program did not achieve its target of opening all intended classrooms for normative group sizes. The exact number of classrooms opened fell short of the program's objective.

*Objective #3***:** Provide Targeted Training Based on School Readiness Data

*Objective Description*:

This objective focused on delivering training based on the School Readiness data collected by the program, ensuring that educational services are aligned with the identified needs and goals of school readiness.

*Outcome*: This objective was achieved.

*Progress and Challenges:*

* Targeted Training: The program successfully conducted training in specific areas identified through the analysis of School Readiness data. This targeted approach allowed for a more effective and relevant training process.
* Focus on Social/Emotional Development: In response to the challenges posed by the COVID-19 pandemic, the program prioritized training related to social and emotional development. This focus aimed to support the well-being of children, families, and staff during a period of unprecedented stress and uncertainty.

*Conclusion***:**

While Goal #1's objectives faced significant challenges, primarily due to the impacts of the COVID-19 pandemic, there was notable progress in specific areas. The program successfully implemented targeted training initiatives based on School Readiness data, although it faced challenges in extending program hours and opening classrooms for normative group sizes. The lessons learned from the challenges and successes of meeting these objectives will be invaluable in guiding future planning and implementation efforts to enhance educational services for enrolled children and families.

1. **Goal #2: Strengthening Health and Wellness**

Goal #2 is meticulously crafted to fortify the health and wellness of staff, families, and children involved in the CARD Head Start and Early Head Start programs.

*Objective*: Holistic Health and Wellness Support

*Objective Description:*

The objective under Goal #2 is holistic, encompassing health, mental health and wellness, financial literacy, nutrition, social services, and trauma. It is designed to identify, educate, and offer referral services to meet the diverse needs of families, providing a support network that extends beyond education to address the multifaceted challenges families may face.

*Outcome:* This objective was successfully achieved.

*Progress and Challenges:*

* Evolution of Goal: Initially, the objective was conceptualized around Adverse Childhood Experiences (ACEs), preventive healthcare, exercise, healthy life choices, mental health, and parenting. However, the unprecedented advent of the COVID-19 pandemic necessitated a reevaluation and evolution of this goal to more adequately support staff, children, and families during these challenging times.
* Focus Shift: The program strategically shifted its focus towards social and emotional well-being, recognizing the acute stress and anxiety experienced by many due to the pandemic. This shift was not just theoretical but was operationalized through the implementation of various training programs.
* Implemented Trainings: A suite of trainings was rolled out, including but not limited to language and literacy, social and emotional development, mental wellness, ACE, Baby Doll Circle Time, self-care strategies, brain development strategies, and Family Development cohorts. Each training module was designed to address specific needs identified among the program's participants.
* Medicaid Expansion Support: The expansion of Medicaid for adults significantly bolstered the program’s health and wellness goal by extending coverage to more families, thereby improving their access to essential healthcare services.
* Family Services*:* An impressive 92% of families enrolled in the program received at least one program service during the last program year, underscoring the program's extensive reach and impact.
* IDEA Evaluation: 100% of children who were referred for eligibility determination under the Individuals with Disabilities Education Act (IDEA) received an evaluation, ensuring that no child was left behind in receiving necessary support and intervention.
* Mental Health Consultation*:* Every classroom benefitted from the expertise of a mental health consultant through either observation or consultation, enhancing the program’s capacity to address the mental health needs of children proactively and effectively.
* Preventive and Primary Healthcare: There was a substantial increase in the number of children who were up-to-date on a schedule of age-appropriate preventive and primary healthcare, according to the relevant state's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) schedule for well-child care, from enrollment to the end of enrollment.

*Conclusion:*

Goal #2 has witnessed significant progress despite the unforeseen challenges presented by the COVID-19 pandemic. The program not only achieved its objective but also demonstrated agility and responsiveness in adapting its strategies to meet the evolving needs of staff, children, and families during a global health crisis. The success in strengthening health and wellness is evidenced by the wide reach of services, the implementation of targeted training programs, and the support provided to families in accessing healthcare, showcasing the program's commitment to fostering a healthy and supportive environment for all.

1. **Goal #3: Professional Development Planning for Staff**

Goal #3 is dedicated to enhancing the professional development planning process for all staff members within the CARD Head Start and Early Head Start program. The overarching aim is to foster a more integrated, flexible, and comprehensive approach to Professional Development Plans (PDPs).

*Objective:* Individualized, Strengths-Based, and Dynamic PDPs

*Objective Description***:**

The objective under Goal #3 is to craft Professional Development Plans that are individualized, strengths-based, and dynamic. The plans are designed to be tailored to each staff member’s unique skills, needs, and career aspirations. For direct service staff, the program endeavors to support training that can be applied towards earning a credential, renewing a credential, or obtaining a degree. The ambitious target set was to implement some aspect of the revamped PDP for at least 20% of the staff each year.

*Outcome:* This objective was successfully achieved.

*Progress and Challenges:*

* PDP Revision: The program undertook a systematic revision of the Professional Development Plans for all teachers and family workers. This revision process was not a one-size-fits-all approach but was meticulously individualized, considering the unique strengths and development needs of each staff member.
* Planning Revision for Selected Positions: Beyond teachers and family workers, planning was also revised for selected positions within the program. This selective revision process allowed for a more focused and effective approach to professional development, ensuring that staff in these positions were equipped with the skills and knowledge needed to excel in their roles.
* Support for Certifications and Degrees: The program provided robust support to staff members pursuing various certifications and degrees. This support facilitated the attainment of credentials such as the Child Development Associate (CDA), Family Development Credential (FDC), as well as Associate and Bachelor’s degrees. By supporting staff in these educational endeavors, the program not only invested in the professional growth of individual staff members but also enhanced the overall quality and expertise within the team.
* Achievement of Target: The program successfully met its target of implementing some aspect of the revised PDP for 20% of staff each year. This achievement reflects the program’s commitment to and investment in continuous professional development for its staff.

*Conclusion:*

Goal #3 has been successfully realized, with the program making significant strides in enhancing the professional development planning process for staff. The achievement of individualized, strengths-based, and dynamic Professional Development Plans marks a significant milestone in supporting the continuous learning and growth of staff members. The support provided for certifications and degrees further underscores the program’s commitment to building a highly skilled and qualified team capable of delivering exceptional services to children and families. The progress made under Goal #3 lays a strong foundation for ongoing professional development initiatives in the years to come, supporting the program’s mission of excellence and continuous improvement.

 **4.\_Continuing work:** *Post-Pandemic Challenges*

Post-pandemic, CARD Head Start and Early Head Start program is addressing the ongoing struggles faced by children, families, and staff.

*Trauma-Informed Practices:*

* *Focus:* Implementing trauma-informed practices is crucial for providing a supportive environment for all participants dealing with pandemic-related trauma.

*Health and Self-Care:*

* *Focus*: The programs emphasize health and self-care initiatives to bolster the physical and mental well-being of everyone involved.

*Mental Health Services:*

* *Focus:* Strengthening available mental health services is a priority to offer necessary support and resources effectively and without stigma.

*PFCE Programming Enhancement:*

* *Focus*: Improving Parent, Family, and Community Engagement (PFCE) programming is vital for fostering supportive relationships among families, communities, and the programs.

*Data and Software Use Improvement:*

* *Focus:* The program is enhancing data and software use for better planning, monitoring, and evaluation, aiming for increased efficiency and effectiveness.

*Staff Retention Training:*

* *Focus*: With staff retention being crucial, targeted training initiatives are being implemented to promote long-term staff commitment and satisfaction.

*Marketing Training:*

* *Focus*: Investing in marketing training will improve program promotion, participant attraction, and community engagement.

*Conclusion:*

Navigating the post-pandemic environment, the program is actively working to support children, families, and staff through various initiatives and improvements in practice and engagement, aiming to provide a resilient and supportive atmosphere for all.

1. **Recommend areas for program improvement**

In the upcoming year, CARD Head Start and Early Head Start programs aim to regain the progress lost since 2020 due to the pandemic, with a primary focus on achieving full enrollment and maintaining a stable, fully staffed team with minimal turnover. The following areas have been identified for growth and improvement:

1. **Enhanced On-boarding Process:**

*Objective:* Revise and enhance the on-boarding process for new hires.

*Strategy:* The improved process will offer greater support to newcomers, expedite the delivery of educational content, and facilitate more frequent interactions with supervisors. This approach aims to integrate new staff more effectively and provide them with the necessary tools and support from the outset.

1. **Parent and Staff Education Improvement:**

*Objective:* Elevate the education and skills of both parents and staff to better meet the needs of families.

*Strategy:* Implement educational initiatives and workshops designed to empower parents and staff with the knowledge and skills required to support family needs effectively.

1. **Parental Support for Child Development:**

*Objective:* Engage parents more deeply in supporting their children’s growth and development.

*Strategy*: Conduct informative sessions and provide resources to parents, helping them understand and actively participate in their child’s developmental journey.

1. **Targeted School Readiness Training:**

*Objective:* Offer targeted training designed to positively influence school readiness, with content informed by relevant data.

*Strategy:* Develop and implement training modules that address specific areas identified through data analysis as crucial for enhancing school readiness among children.

1. **Staff Support and Retention:**

*Objective*: Focus on staff retention, stabilization, equity, wellness, and support.

*Strategy*: Introduce initiatives and policies that create a supportive and equitable work environment, promoting staff wellness and stability, which in turn will contribute to higher retention rates.

1. **Recruitment of Needy Families:**

*Objective:* Implement dynamic and effective strategies for recruiting families most in need of the programs’ services.

*Strategy*: Develop and execute targeted recruitment campaigns that effectively reach and engage families who stand to benefit most from the program.

1. **Enrollment Goals:**

*Objective*: Achieve 97% enrollment in both Head Start and Early Head Start programs.

*Strategy:* Implement proactive enrollment strategies and campaigns to reach and maintain the target enrollment rate, ensuring that the programs are accessible to as many eligible families as possible.

*Conclusion:*

The outlined areas for growth represent a strategic roadmap for the CARD Head Start and Early Head Start program in the coming year. By focusing on these areas, the program aims to not only regain lost ground but also to forge ahead in providing enhanced support to children, families, and staff, thereby contributing to the overall development and well-being of the community served.