

**New River Community Action Head Start Program**  
**Self-Assessment Report**

2019-2020

**Section 1: Introduction**

**Program Description**

New River Community Action Head Start (NRCA HS) is a program of New River Community Action, Inc. New River Community Action Head Start serves families throughout four counties and the City of Radford in the New River Valley. The New River Valley is located in southwestern Virginia amid the Blue Ridge and Allegheny Mountains. This 1,458-square mile region is bordered on the northwest by West Virginia and along the southeast by the Blue Ridge Mountains and is mainly very rural.

The NRCA Head Start program has eleven sites with nineteen classrooms in five jurisdictions. Program options include ten five-day full-day classrooms, five part-day classrooms for three-year old's, and four Virginia Preschool/Head Start braided classrooms. All four of the VPI/Head Start classrooms are in public schools. One of the five-day full-day classrooms is located on the campus of New River Community College. NRCA has built strong relationships with the communities in which they serve and partnerships with local public school systems and universities. Total funded enrollment for FY 2019/2020 was 319 Head Start children.

NRCA Head Start closed all sites on March 16, 2020 due to the COVID – 19 Pandemic. The program continued to provide services to children and families until the end of the program year. Staff utilized video conferencing communication platforms, facetime, emails, and phone calls to check weekly with parents. Staff delivered hands on materials aligned with Creative Curriculum to children, and local public schools delivered meals to all children in the Head Start program.

**New River Community Action Head Start has four broad goals for our five-year (2019-2024) project period:**

- Goal 1: Ongoing monitoring data systems that compares, identifies strengths, and improves School Readiness Outcomes.
- Goal 2: Implement a Parent Assessment tool (s) to identify and assess Trauma/Substance Abuse Related Issues.
- Goal 3: Implement Program-Wide Positive Behavioral Interventions and Supports (PBIS)
- Goal 4: Restructure the Coaching System.
- Goal 5: Find Accurate and Age-Appropriate Hearing and Lead Screening Equipment.
- Goal 6: Maximize Family Engagement.

## Context for Self-Assessment

1. The administrative team reviewed last year's self-assessment and data collected in MyHeadStart, center newsletters, TSG, and the Director's Manage by Information Report.
2. The team reviewed the NRCA Head Start and Agency Community Needs Assessment draft. The Planning Director for New River Community Action, Inc. is currently conducting the Self-Assessment. All families and children in the NRCA Head Start service area have been affected by the COVID – 19 Pandemic, but no other updates to needs were identified.
3. After meeting and reviewing the Self-Assessment and data in MyHeadStart from the previous program year, the administrative team determined which areas would qualify as strengths of the program and areas that needed continuous quality improvement. Members of the admin team shared these strengths and areas to improve with their self-assessment committees in each of the service areas and the Head Start Management Systems. Next, the self-assessment committees made recommendations for improvement.
4. Tri-annually, the Admin team reviewed the ongoing data collected to track the outcomes of the program's five-year goals. Although some goal outcomes were affected by the Pandemic, overall five-year goals were on track for the first year of the five-year project period.
5. **The following documents include the Methodology, Key Insights (which have the Program's Strengths, Systemic Issues, Progress in meeting our goals and Objectives), and Recommendations. These will include the following:**
  - a. PROGRAM MANAGEMENT & DESIGN
  - b. FINANCE/HUMAN RESOURCES
  - c. EDUCATION/COACHING
  - d. ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT & ATTENDANCE
  - e. MENTAL HEALTH
  - f. DISABILITIES
  - g. HEALTH
  - h. NUTRITION
  - i. DATA
  - j. FACILITIES & TRANSPORTATION
  - k. IT

## Head Start Annual Program Self- Assessment Report—2019-2020

(Completed Fall 2020 using data from PY 2019-2020)

**Service Area: Program Management and Design**

**Specialist Reporting: Sheryl Helm**

**Committee Members: Program Management and Design:** Sheryl Helm – Director of Early Childhood and Family Services, Kathy Harrell – COO, Tabitha Greenhalgh – HR Manager, Administrative Team, and Michael Goodman – IT Coordinator

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

Data Reviewed: MyHeadStart data reports, Self-Assessment 2018-2019, Manage by Information Reports, Staff Feedback.

**List the strengths identified for the Service Area:**

- Partnerships with local public schools continue to strengthen, and the NRCA Head Start program is well-respected in all jurisdictions.
- Completed the Focus Area I Review during the Pandemic, and there were no findings.
- Staff completed ongoing monitoring virtually of all Head Start Management Systems on a tri-annual basis and adjusted planning as needed.
- All NRCA Head Start staff, policy council members, and board members received the Program's Five-Year Goals reports monthly.
- The program improves upon collecting data, analyzing data, and using the data outcomes for planning and monitoring purposes, even while working from home.
- NRCA Head Start fully implemented the PIR, Self-Assessment, TSG, and Community Needs Assessment to set program goals and to make program decisions.
- Due to online virtual training, all staff attended the United Way of Southwest Virginia "Love of Children" Conference.
- NRCA Head Start was able to add a classroom at Margaret Beeks Elementary in Montgomery County, lowering the number of children with behavioral issues in other high needs classrooms using the Quality Improvement funding.

Data reviewed: Paylocity reports and Staff feedback.

## **Human Resources**

### **List the strengths identified for the Service Area:**

- NRCA implemented Paylocity, cloud-based payroll and human resources management system, in January 2020, two months ahead of NRCA's shutting the main office due to COVID.
- Paylocity provided the convenience of an electronic timesheet. All timesheets were submitted on time.
- Paylocity enabled NRCA Head Start to continue with the hiring process. Employment applications, resume, and reference letters were reviewed in Paylocity.
- Paylocity provides a standardized hiring and onboarding process.
- Through Paylocity, online training continued along with documentation of the training for all NRCA staff.
- NRCA Head Start retained all staff during the program year. New employees were hired using COVID Supplemental funding and Quality Improvement funding.

## **Finance**

### **List the strengths identified for the Service Area:**

- Agency contracts outside agency to conduct an annual audit of agency financial systems and controls. The auditee is considered a low-risk auditee. The audit for PY 2018/2019 resulted in one low risk finding.
- Head Start funding for all employees continued to the end of the program year although staff were working from home and some staff were not able to work their regular hours.
- Head Start received CARES funding from local sources to purchase hands-on materials for at-home learners and computers for teachers to meet virtually with parents and children.
- Finance completed all tasks, although the finance staff was working from home.

**Committee Members:** Serena Ming—Parent/Policy Council Member, Stephanie Smith – Supervisor of Early Childhood MH Services, NRVCS, Sheena Asconi—LT Christiansburg Center, Rebecca Jackson—LT Floyd Center, Jessica Hale—AT Pearisburg Center, Jodi Roop—Disabilities and mental Health Specialist, Alison Harris—Teaching Practices and Coaching Specialist

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.** Teaching Strategies Child Assessment Program reports, CLASS observations:

- Before Covid quarantine, the program was on target to meet annual growth scores, with over 90% of children scoring to meet or exceed their developmental growth band in all five domains. Period 3 scores were lower than expected, probably because teachers did not have access to complete observations on all TSG objectives or have the opportunity to provide instruction to children. Physical and Social-Emotional met expectations, but Cognitive, Language, Literacy, and Math domains were all above 80 percent.
- Most CLASS observations were completed before Covid closure. The data suggests a continued struggle with Instructional Support scores and some classrooms scoring lower in Emotional Support and Classroom Organization than usual. The difference in scoring in the mid-range versus the high range for these two domains. The average Instructional Support score was 3.0, just into the mid-range scores. Teaching teams with one or both staff new to Head Start or CLASS had the lowest scores.
- Both parents and teachers are concerned about the learning gaps during COVID and recognize that children need consistent schedules to make the most gains. 2019/20 the impact is in more of the traditional academic areas. The 20/21 effect they are seeing is also impacting social and emotional. In particular, friendship skills and parent engagement as well.

**List the strengths identified for the Service Area:**

- We provided the staff with quite a few professional development resources when they were working at home.
- PBIS significantly impacted the behavioral support scores with staff having in-depth PD on trauma and setting consistent rules.
- We were able to provide materials for classrooms to support sensory needs and AL's Pals lessons. (Al's Place cubes, feelings and emotions books, play dough, kinetic sand, sensory timers, and manipulatives.)

- We provided a day-long workshop with teachers on identifying teaching practices in CLASS and PBIS.
- We were able to purchase additional resources for Creative Curriculum studies.
- Though scores were lower, all children made gains in all five domain areas.

**List additional areas (not on the 5-year Goals) that you have identified for improvement. Use the attached form to outline the action steps needed, the timeline for completion, and any recommendations from the Self-Assessment Committee. See Recommendations for Improvement.**

**Service Area: Coaching**

**Specialist Reporting: Alison Harris**

**Committee Members:** Serena Ming—Parent/Policy Council Member, Stephanie Smith – Supervisor of Early Childhood MH Services, NRVCS, Sheena Asconi—LT Christiansburg Center, Rebecca Jackson—LT Floyd Center, Jessica Hale—AT Pearisburg Center, Jodi Roop—Disabilities and mental Health Specialist, Alison Harris—Teaching Practices and Coaching Specialist

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

- The committee reviewed overall BIR data and TPOT data.
- Only have three months of BIR data and did not have an endpoint TPOT score for 2019-2020 due to COVID.
- Covid restrictions have significantly impacted coaching cycles and implementation of some Pyramid model practices like teaching friendship skills.

**List the strengths identified for the Service Area:**

- Data showed growth in Pyramid Practices program wide.
- Data showed growth in CLASS scores for coached teams.

**Committee Members:** Serena Ming—Parent/Policy Council Member, Stephanie Smith – Supervisor of Early Childhood MH Services, NRVCS, Sheena Asconi—LT Christiansburg Center, Rebecca Jackson—LT Floyd Center, Jessica Hale—AT Pearisburg Center, Jodi Roop—Disabilities and mental Health Specialist, Alison Harris—Teaching Practices and Coaching Specialist

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

- Teaching Strategies Child Assessment Program Report
- PIR entry for number of children with IEP's
- My Head Start for number of new child referrals.
- Charts reflecting total number of children referred.

**List the strengths identified for the Service Area:**

- Early compliance of 10% mandate. The program met the 10% mandate in September 2019, beginning the year as we have the past several years. Most LEA referrals were completed prior to Covid quarantine March 2020. Covid did not impact this and the number of children referred was comparable to the past several program years.
- Early referrals for many children who were then able to complete referral process. Children who were near the end of their testing were able to complete the referral process which continued in a virtual capacity when possible. Eligibility and new IEP meetings were held virtually, and some children were able begin modified services.
- For those who were referred in January or February, the referral process had to be put on hold till early Fall 2020 when school systems returned and were able to see children in person. Schools contacted families to acquire documentation for this process. Several parents chose to stop the process until later.
- Annual IEP review meetings were also held virtually. Teachers and Disabilities Specialist were able to attend with the parents in this capacity.
- LEA creativity and persistence in reaching out to families for support, resources, and services. While virtual services are not optimal, the LEA's worked with families to deliver many services, resources and supports.
- Head Start capacity to equip staff with Smart Phones to complete virtual meetings while in quarantine. As school began in Fall of 2020, families were given options of in-person, conference call or "" Google Meet"" to accommodate their needs.

**Committee Members:** Serena Ming—Parent/Policy Council Member, Stephanie Smith – Supervisor of Early Childhood MH Services, NRVCS, Sheena Asconi—LT Christiansburg Center, Rebecca Jackson—LT Floyd Center, Jessica Hale—AT Pearisburg Center, Jodi Roop—Disabilities and mental Health Specialist, Alison Harris—Teaching Practices and Coaching Specialist

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

- Teaching Strategies Child Assessment Program Report.
- My Head Start for number of new referrals and services to children.

**List the strengths identified for the Service Area:**

- PBIS had a significant impact in the behavioral support scores with staff having in depth PD on trauma and setting consistent rules prior to quarantine. PBIS training was completed in Fall of 2019 for all staff, and implementation of key concepts were focused on throughout the program. MH Consultants were trained with staff and attended meetings together. The BIR system was implemented and was a topic discussed as the PBIS leadership team met monthly till quarantine.
- Staff had continued opportunities to participate in many Webinars and other Professional Development events during quarantine on the topics of Trauma for adults and for children, Mindfulness, Self-Care, and Supporting Children with Behavioral issues, plus many more.
- Safe and Successful meetings were developed based on PBIS principles to begin in fall 2020.
- Continued commitment from Mental Health Professionals through NRVCS for resources and support for children, families, and staff. The collaboration between Head Start and New River Valley Community Services, and the delivery of services to children and families remains strong. MHC and Case Managers are in the classrooms and working with all staff in the delivery of MH services.
- As we went to quarantine, systems were developed to reach out to families and children through social media and other means to maintain contact, support and resources during quarantine. While this is not optimal as stated above, contacts with families were able to be made, and assistance given to parents in being at home with their young children.
- A new MH referral system was put in place during recruitment to reach more families due to the stress and trauma caused by Covid and quarantine – more families were referred; families received earlier services. MH professionals were able to provide virtual services through the spring and summer prior to children returning to/starting school.



Committee Members: Tonia Winn- NRCA Board Member; Sarah Greene – NRCA Board Member, Emily Perkins – NRCA Giles County Site Administrator; Catherine Gardner – Policy Council; Parent

List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes:

Data reviewed: 2019/2020 Classroom attendance percentages chart. The documentation of the number of applications received online.

- School abruptly ended in March 2020. F/HAs had to finish the year by providing all information/services either virtually or by phone (we were not prepared). This type of service was something new, never have had to give these types of services before, did not have the technology we needed to support contacting all the families), some staff did not have good internet connections at their homes.
- Did not complete the annual parent survey to get their thoughts on the school year.
- Going from always interacting face-to-face and regular contact to just talking to someone on the phone or through text every week or every other week was hard to feel a connection, doing your job, making a difference, etc.
- All staff began working from home in March 2020.
- All the family events went to virtual information – unable to hold in-person events (lose of social connection)
- Unable to complete door to door recruitment and attend recruitment events/festivals. Local public schools canceled recruitment events.
- Due to parent fear upon sending their child back to school and two day a week schedule not working for families, currently not at full enrollment.

**List the strengths identified for the Service Area:**

- Due to F/HAs beginning to understand PFCE outcomes into MyHeadStart better, reports could be run demonstrating outcomes being achieved.
- Completing applications went online. We received 233 applications (April 2020- December 2020). I feel this was a successful way to reach families during the Pandemic.

- All recruitment efforts went to social media for several months (April-June) and then began to mail flyers to potential clients. Clients could also start to stop by centers in July to complete an application if they chose to.
- NRCA Head Start purchased laptops and additional phones for staff to communicate with families and work from home if necessary.
- Sent out a parent survey in summer. Received 82 parent surveys asking about which days of the week they would prefer to attend and how they feel about returning to school.

List additional areas (not on the 5-year Goals) that you have identified for improvement. Use the attached form to outline the action steps needed, the timeline for completion, and any recommendations from the Self-Assessment Committee. **See Recommendations on Improvement.**

**Service Area: Health and Nutrition**

**Specialist Reporting: Trina Porterfield-Pifer**

**Committee Members:** (Committees must have at least 1 Policy Council member or parent participating) (Participants will sign in on a volunteer in-kind sheet) Laura Jirsa (Director of Dental Programs and Patient Engagement of the Community Health Center of the New River Valley), Catherine Boston (Christiansburg Head Start parent and Policy Council member), and Rhonda Seltz (Virginia Poverty Law Center, specializing in health insurance)

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes:** PIR" health report – although incomplete, it still gave a good snapshot for two-thirds of the program year for where children were concerning health areas.

- Committee looked at the number of children without health insurance – 42 (14%) of children.
- Number of children with medical home (97%) up to date immunizations (94%) were on target.
- Children on a well-child checkup (57%) schedule, dental checkup (31%) – these areas were low. Due to COVID -19, our program closed to onsite attendance and reduced contact with parents to discuss needed children's health care. Also, many doctors' and dentists' offices closed for a time, preventing children from being seen for appointments. And parents commented they were just not comfortable taking their children to these types of medical appointments with COVID lurking.
- The Radford University and the New River Health District standing order agreement allowed lead and hemoglobin testing to be conducted onsite for our enrolled children. During the fall

of 2019, we were able to have 46 children receive blood testing for lead and hemoglobin. All 46 came back with normal results. Had we not had this agreement, there could have been 76 children without this necessary testing; 30 (8.6%) children program-wide were without the testing.

- Appropriate and effective policies were not in place when COVID-19 hit. NRCA Head Start Admin team developed policies and procedures as information became available.

**List the strengths identified for the Service Area:**

- The RU department of nursing and NRHD signed an agreement for a standing order for onsite lead and hemoglobin testing.
- NRCC department of the nursing agreement allows student nurses to provide health screenings for our children during Fall 2019.
- Local Lions Club members provided vision screenings using the SPOT vision equipment- simple, quick testing with accurate results for children.
- Health Services Advisory Committee (HAC) continued strongly committed membership.
- A dedicated/caring/trained/creative staff.
- Health and Nutrition Advocacy Specialist connected families to resources for children's meals available through local public-school systems in mid-March when schools closed due to the coronavirus pandemic.

<b>Service Area: Data</b>	<b>Specialist Reporting: Sheryl Helm</b>
---------------------------	--

**Committee Members:** Sheryl Helm - Director, Program Support and Data Technicians – Debra Taylor and Amy Beecher, Robin Lambert – Family Health Advocate, Faith Nichols – Family Health Advocate

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

Reports reviewed include the MyHeadStart database, Measure by Information reports, and the 2018-2019 Self-Assessment.

- COVID forced staff to build their technology skills, learn more about the MyHeadStart database, and rely more on virtual and digital capabilities.\
- The program identified the lack of technology for all staff to implement a virtual platform.

- The program identified that the most rural areas that we serve (Giles, Floyd, and Pulaski) did not have internet access or broadband needed.

**List the strengths identified for the Service Area:**

- The staff have gained skills in using technology.
- Staff are becoming more knowledgeable in the use of MyHeadStart. (MyHeadStart made updates and is now more user friendly).
- The staff had time to complete online training on data collection and the use of MyHeadStart.
- COVID funding was used to purchase the needed computers, smartphones, and hotspots for all staff involved in the virtual implementation plan. (Due to Covid, the shutdown forced staff to learn to use TEAMS, Zoom, and other collaboration platforms.)
- Staff are better able to analyze data.

<b>Service Area: Facilities and Transportation</b>	<b>Specialist Reporting: Katie Collins</b>
--	--

**Committee Members:** Katie Collins – Facilities and Transportation Coordinator, Kevin Moser and Kevin Elliot – Maintenance Technicians, and Kathy Harrell – COO

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

The maintenance team had to shift their focus on routine facility and playground improvements to ensure that sites were safe for staff and children to return. While all Head Start staff teleworked, the maintenance team continued to work on-site. Maintenance completed the following:

- Secured PPE for all sites (gloves, masks, hand sanitizers).
- Built partitions/barriers for children and staff who may not be able to physical distance.
- Assisted education team rearrange classrooms, removing large furniture.
- Assembled and delivered new furniture.
- Ordered and installed signage for staff to keep safe.
- Created guidance for COVID – 19 Prevention: Routine cleaning, Deep cleaning, and Disinfection.
- Developed systems to ensure HVAC filters are changed more frequently.
- Deep cleaning facilities prior to staff and children returning to centers.
- Developed a safety plan to ensure that the maintenance team remains safe and healthy to provide continuity of services to staff.

**List the strengths identified for the Service Area:**

- Flexible – the maintenance team has the skills to address emergencies when they occur and prioritize work orders.
- Ability to think outside the box. Example - building barriers for classrooms. At one point lumber and plexiglass were hard to come by. The team improvised and found new materials that were not in high demand to build the partitions.
- Strong system in place to ensure all work orders are filled within five business days.
- Strong focus on Health and Safety of staff and children, going above and beyond HS Performance Standards and VA Licensing Standards.

**Service Area: Information Technology (IT)**

**Specialist Reporting: Sheryl Helm**

**Committee Members:** Sheryl Helm – Director of Early Childhood and Family Services, Kathy Harrell – COO, Tabitha Greenhalgh – HR Manager, Administrative Team, and Michael Goodman – IT Coordinator

**List the data or specific report(s) reviewed during your Self-Assessment process. Address the impact of COVID on your Service Area Outcomes.**

Data Reviewed: Work Orders for IT Assistance, Staff Feedback. Due to COVID restrictions, the parent who volunteered to participate in our Program Management and Design Committee could not join us in person or ZOOM.

**List the strengths identified for the Service Area:**

- NRCA Head Start continued services to families and children through teleworking.
- The IT technician had the skills to set up cell phones, hot spots, and new computers.
- IT department worked with staff to set up TEAMS and ZOOM for virtual meetings.
- Added video and audio capabilities to the Agency conference room to be utilized by small groups physical distancing with other staff virtually.
- NRCA Hired an IT Coordinator with advanced IT knowledge and skills.

## Action Plan for Areas Identified for Improvement

Area to be addressed	Action Step(s)	Person Responsible	Timeline for Completion	Recommendations from Self-Assessment Committee
Program Management and Design	Request that the agency Grant Writer research funding opportunities to fund technology for all staff.	Director of Early Childhood and Family Services	Ongoing	Research funding for staff to continue to use smart phones after COVID supplemental funding is gone.
Human Resources	Provide additional time needed for staff training on the capabilities of Paylocity.	Human Resource Manager, COO	Ongoing	The agency received a low risk finding in the annual audit. Develop a plan to identify the administrative cost in Paylocity.
Finance	Identify the administrative cost in Paylocity	COO, Finance Manager	January 1, 2021 and ongoing	Create a plan to include administrative cost in Paylocity and to address the audit low risk finding.
Education	Practice teaching skills learned in professional development and complete self-reflections.	Teaching Staff	Beginning of 2021 Program Year	yes
Education	Implement a beginning of year study incorporating specific PBIS and AI's Pals activities systematically.	Teaching Staff, Early Education and Program Planning Specialist, Teaching Practices and Coaching Specialist	Beginning of 2021 Program Year	yes
Education	Provide more professional development on teaching practices and how to use a self-study coaching approach within teaching teams.	Teaching Staff, Early Education and Program Planning Specialist, Teaching Practices and Coaching Specialist	Beginning of 2021 Program Year	yes
Coaching Teaching Practices Reflection	Explore capabilities of 365 to determine if an electronic sharing platform is available to staff	Early Education and Program Planning Specialist, Teaching Practices	May 2021	yes

		and Coaching Specialist.		
<b>Education CLASS teaching practices</b>	Set up a monthly meeting routine with staff not in coaching to review teaching practices	Early Education and Program Planning Specialist, Teaching Practices and Coaching Specialist	20-21	yes
<b>Education CLASS teaching practices</b>	Incorporate a new beginning of the year study to focus on ES and CO, allowing for more in- depth IS practices.	Early Education and Program Planning Specialist, Teaching Practices and Coaching Specialist.	20-22	yes
<b>Disabilities</b>	Monitor children with referrals that were put on hold to ensure timely start-up of new referrals.	Disabilities and Mental Health Specialist	20-22	yes
<b>Disabilities</b>	Continue to work with Early Intervention and Schools Systems for enrollment of children with identified and suspected needs.	Disabilities and Mental Health Specialist	20-22	yes
<b>Disabilities</b>	Plan for Distance Learners for screenings, referrals and services if still utilizing this model	Disabilities and Mental Health Specialist	20-22	yes
<b>Mental Health</b>	Continue and expand Safe and Successful meetings	Disabilities and Mental Health Specialist	20-22	yes
<b>Mental Health</b>	Continue to identify barriers and solutions for communication between MH staff and HS staff	Disabilities and Mental Health Specialist	20-22	Continued expansion of the Safe and Successful meetings and regular meetings with F/HA and SA will be extremely important for coordinated services.
<b>ERSEA</b>	Ask store managers if a Head Start sign could be posted beside WIC	Family Services and ERSEA Specialist	By end of April 2021	yes

	approved foods in grocery stores.			
ERSEA	Partner and connect with local Departments of Social Services to recruit potential Head Start families.	Family Services and ERSEA Specialist	By end of March 2021	yes
ERSEA	Post recruitment messages on all types of social media.	Family Services and ERSEA Specialist	By end of February 2021 and then on-going messages posted	yes
ERSEA	Advertise through Billboards	Family Services and ERSEA Specialist, Director	By end of January 2021	yes
ERSEA	Being sure to remind and talk with parents about scheduling appointments after school hours to prevent child from missing instructional time.	FHAs, SAs, and Family Services and ERSEA Specialist	On-going	yes
ERSEA	Review application data to determine if there were higher attendance percentages when each jurisdiction ran with their public- school calendar.	Family Services and ERSEA Specialist, Director	On-going	No (just some good research and data)
ERSEA	Survey families to find out what was the barrier, what changed, or why their child's attendance decreased.	FHAs, SAs, and Family Services and ERSEA Specialist	On-going	yes
ERSEA	Reach out to other programs to determine if our attendance trends are like other areas in the state. Determine if our attendance percentages compare with other Head Starts in state.	Family Services and ERSEA Specialist	On-going	yes



<b>Family Engagement</b>	Post more interactive messages in Facebook groups (fun things), children be judges – parents vote on specific things or have more polls for them to vote or comment on	Family Services and ERSEA Specialist, SAs and F/HAs	By end of February 2021	yes
<b>Family Engagement</b>	Send a survey to families to get their feedback: what would you like to see more of, what has worked for you, what went well, what did you like best, what did you like least?	Family Services and ERSEA Specialist	Send out parent satisfaction survey to families by first week of April 2021	Prepare a parent survey and send out by paper copy, by email and Facebook.
<b>Health – Reduce the number of uninsured children</b>	Assist parents with getting connected to the CHC, and Virginia Poverty Law representative to explore ways to obtain health insurance	Family/Health Advocates (with assistance of Nutrition/Health Advocacy Specialist)	ongoing (as the need arises)	For non-citizens: The Virginia Poverty Law representative mentioned that families who are in the US legally with Visa status of S1, S2, F1,F2 or a green card should be eligible for insurance found through the health insurance marketplace. And after a family has been in the US for five years (and has worked cumulatively between both parents for 40 quarters) the children are eligible for Medicaid.
<b>Health- Consider maintaining/ implementing the policies developed for COVID when similar situations occur such as flu outbreak</b>	After COVID, if that ever happens, continue to implement the policies developed for COVID to prevent the spread of other diseases such as flu, norovirus, etc.	Head Start staff (it may be that the policies need revisions to be more generic about the process instead of COVID focused – if so this would be done by HS Admin staff for those specific to HS)	Ongoing	Policies are meant to be changed and improved as the situation needing them also change. It may be that we continue to wear masks and have the extra cleaning during times of flu season.

<b>Facilities and Transportation</b>	Continue to follow Health and Safety COVID – 19 Policies and Procedures indefinitely.	Health and Nutrition Advocacy Specialists, Center Aides	Ongoing	Continue to implement the new Routine Cleaning, Deep Cleaning, and Disinfection procedures.
<b>Data</b>	Train staff on what data is being collected and to enter data in a timely manner.	Director of Early Childhood and Family Services, Family Health Advocates, Family Services and ERSEA Specialist, and Site Administrators	Beginning of 2021-2022 Program Year	Communicate to staff what data is being collected and why. Family information is not often shared between teacher and Family Health Advocates. Educate staff on the importance of timely data entry.
<b>Data</b>	Require staff to enter all contact notes in MyHeadStart.	Family Health Advocates, Family Services and ERSEA Specialist, and Site Administrators	Beginning of 2021-2022 Program Year	Avoid lost family contact information. For staff to have access to all family information, enter contact notes in MyHeadStart. Family Health Advocates that work at two sites, will be able to enter information from either location.
<b>Data</b>	Fully utilize the MyHeadStart.com database and train staff	Family Services and ERSEA Specialist, Family Health Advocates	Beginning of 2021-Program Year and ongoing	Allow staff to utilize the MyHeadStart.com data system. This is a costly database and there are many functions that could save time for Head Start staff.
<b>Data</b>	Bridge MyHeadStart.com to the agency data system.	Data technicians, Director, Family Services and ERSEA Specialist	Beginning of 2021-Program Year and ongoing	For staff to be able to provide more services or support services from other agency programs, a system to link the programs within NRCA would allow this to happen.
<b>IT</b>	Find the funding resources to allow Head Start staff to keep their smart phones and be able to continue to update technology as needed.	IT Coordinator, COO, Director of Early Childhood and Family Services, and the NRCA Grant Writer	Ongoing	Head Start needs to continue to provide new technology and cell phones for staff. The NRCA Grant Writer should continue to look for funding resources.