



## Head Start Community Program of Morris County, Inc.

18 Thompson Avenue, Dover, NJ 07801

[www.headstartmc.org](http://www.headstartmc.org)

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### 2022 SELF-ASSESSMENT REPORT & PROGRAM IMPROVEMENT PLAN

#### I. Introduction

##### a. Program description

Head Start Community Program of Morris County (HSCPMC) partners with families to provide comprehensive support for child development and school readiness, from prenatal to kindergarten ages, for the community's most vulnerable children. The vision of our program is to empower diverse families and strengthen communities. The program has a 57-year history of supporting at-risk children and families in Morris County, with its main site located in the heart of Dover. With the award of a second Head Start/Early Head Start grant in September 2019, which is now consolidated with our original grant, we provide free child development services for a total of 199 children through center-based Head Start programs, and 109 infants, toddlers and pregnant women through center-based and home-based Early Head Start programs, serving a total of 308 individuals. School district collaborations for Head Start/public pre-k services at the Dover site includes five Dover Public Schools classrooms and one Wharton Public Schools classroom. In addition to the Dover site, the program's 17-year collaboration with the County of Morris supports a site with six state-of-the-art classrooms at the Robert C. Grant Head Start Center (RCG), formerly the Central Avenue Complex, in Parsippany. A four-classroom collaboration at the RCG provides Head Start/public pre-k services for Morris School District. One satellite classroom at Duffy Elementary School in Wharton also provided community pre-k services in the public school building, as part of an extended partnership with the school district.

For the 2021-2022 school year, the program served its full funded enrollment in-person, with occasional brief pivots to virtual services for classrooms impacted by positive COVID-19 cases. Policies and procedures were developed, in accordance with guidance from the Office of Head Start and New Jersey state regulatory agencies, to support continuation of services during COVID-19 outbreaks. A concerted effort by staff and administration worked to address the challenges of the pandemic with



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creative and practical solutions, focusing on health and safety as a continued priority for the program in order to provide in-person services.

### **b. Context and Methodology**

Despite the challenges of the COVID-19 pandemic, HSCPMC continued to make progress on program goals and objectives. Data to assess progress was obtained from multiple sources, including ongoing monitoring, health and safety/facilities reports, child and family outcomes, management systems, staff and parent feedback, the prior year's Self-Assessment Report and Program Improvement Plan, and review of outcomes on grant application goals and objectives. Identified areas of focus were examined to address systemic issues and develop innovative approaches to improve quality. With a strength-based focus, the 2022 self-assessment provided a key framework for program management, planning and oversight.

We were able to conduct much of the self-assessment data gathering and analysis process using technology, a process which has evolved since 2020, responsive to the pandemic. Platforms to support sharing of data included Zoom, Google Documents and Google Meet, Survey Monkey, and Creative Curriculum Cloud. Staff, parent, and community partner surveys provided key information for community assessment and self-assessment. The leadership team, Board of Directors, and Policy Council (including Parent Committee) reviewed Ongoing Monitoring reports which shared data on Program Governance and Leadership; Management Systems; Eligibility, Recruitment, Selection, Enrollment & Attendance (ERSEA); Comprehensive Services; Fiscal Management; Environmental Health and Safety; and School Readiness Outcomes, along with PIR data. Progress on goals and objectives was examined through these lenses. Data was also reviewed from external monitoring by the Office of Head Start in 2021. Quantitative data in aggregate, along with qualitative data, were examined from multiple sources including professional development records; TSGOLD; Creative Curriculum Fidelity Tool; and CLASS/ITERS/ECERS/TPOT observations. Inquiries were supported by reference to standards and documents including the Head Start Early Learning Outcomes Framework; Head Start Program



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Performance Standards; NJ Birth-to-Three Early Learning Standards; and NJ Preschool Teaching and Learning Standards, as well as the Goals and Objectives in the Head Start/Early Head Start Application.

The self-assessment timeline was spring 2022. During May 2022, the HSCPMC leadership team met to plan the self-assessment design, review training materials and raw data, and manage team assignments. During May and June, self-assessment data was reviewed and discussed via Zoom meetings with staff (June 7), the Health Advisory Committee (May 23) the Policy Council (June 21 and 28), and Board of Directors (May 24 and June 28). The self-assessment team participating in these meetings was comprised of staff, parents and Policy Council members, members of the Board of Directors, and community representatives.

The process for Self-Assessment involved five key steps: 1) Gather and analyze data on key issues; 2) Identify program strengths; 3) Highlight progress on grant goals and objectives; 4) Identify opportunities to improve services to children and families; and 5) Develop plans and strategies for continuous improvement.

Team members looked at outcomes data and discussed strengths, challenges, trends and solutions. Recommendations were compiled for development of this final report to guide planning for program improvement and share with stakeholders.

## **II. Key Insights: Successes and Opportunities for Improvement**

Noted strengths of HSCPMC over the 2021-2022 program year included the continued delivery of safe, high-quality, in-person services despite ongoing challenges presented by the COVID-19 pandemic which began early in 2020. Health and safety systems developed over this two-year period in response to the pandemic were reinforced with training on policies and procedures, and reviewed through regular ongoing monitoring. Safety and security continue to be an ongoing focus, in terms of pandemic-responsive systems along with structures and processes to ensure that facilities are secure. Staff reported feeling satisfied that the program was implementing health and safety measures to protect children, as well as adults working with the program. Thanks to CARES ACT funding provided



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through the Office of Head Start, substantial infrastructure, technology, and materials investments in the program supported safe, responsive services.

Our School Readiness goals around strengthening systems to support children's school readiness in alignment with the HSELOF, NJ Preschool Teaching and Learning Standards, and NJ Birth to Three Early Learning Standards were an area of strength. Outcomes data from Teaching Strategies GOLD reflected overall steady progress by children in the program, with most children below widely held expectations at the fall checkpoint, showing growth at mid-year, and the overwhelming majority within or exceeding widely held expectations at the final checkpoint in spring. In terms of learning environments, CLASS and ECERS (conducted in partnership with public pre-k staff) assessments pointed to consistently high-quality environments. For Early Head Start, ITERS assessments were paused due to the pandemic-related restrictions on classroom materials and staffing challenges. ITERS checklists were used to ensure ongoing focus on quality, and EHS CLASS assessments also guided continuous improvement. The CLASS instrument was administered in all classrooms by Reliable staff from the educational leadership team. CLASS Reliability for educational leadership was achieved/maintained and members of the team also completed training in the Creative Curriculum Fidelity tool. The positive outcome of our coaching focus on the Instructional Support domain of CLASS was evident, with scores in this domain surpassing national averages. Additionally, another School Readiness goal was achieved in that Inter-rater Reliability in Teaching Strategies GOLD was a standard achieved / maintained by all instructional staff.

The outcomes examined led us to a deeper exploration of three specific issues where opportunities for improvement are sought: 1) Retaining and supporting a highly-qualified workforce with a focus on staff wellness; 2) Supporting children's social-emotional development and mental health; and 3) Addressing current child health issues faced by our community: Access to dental care, and issues around nutritional status. Analysis of data around these topics took place in the context of a COVID-19 responsive lens.

Data from our Human Resources analytics highlighted the need to work on retaining and supporting a highly-qualified workforce, with a focus on staff wellness. Out of 100 staff positions, 18%



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left the program since the previous school year, almost half of the turnover occurring due to accepting another job. Nearly half of our workforce had lengths of service under five years. We were not fully staffed until February 2022, and teaching positions were the most difficult to fill. COVID-19 impacted the program in multiple ways: staff absences, staff need for childcare, and loss of staff due to the federal vaccination mandate.

Anecdotal data from staff surveys provided important information. Teaching staff noted paperwork and multiple classroom observations as being negative aspects of the job, and workplace stress was noted by many respondents to our staff survey. The greatest challenges identified by staff were: finding time to complete tasks; lack of facility space and COVID-19, as well as communication and children's challenging behaviors, factors referenced as stressors for staff. Positives identified by the staff were helping families, teamwork, dedication to children, strong support systems, and making a difference.

Teaching Strategies GOLD, our Case Management process, and TPOT observations identified the need for social-emotional supports for children. It was clear that many children were entering the program with stress behaviors, difficulty adjusting, and challenges around interactions. With intentionality, we continued to focus on program-wide implementation of the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children. A trauma-informed lens provides the perspective that children's social emotional outcomes were adversely impacted by the many challenges that the COVID-19 pandemic brought to a community characterized by poverty.

Our goal to strengthen parent, family and community engagement processes and supports for family well-being and positive parent-child relationships was an area of progress, with effective, robust parent engagement. Implementation of the Positive Solutions for Families/PIWI parenting curriculum (127 families) and our popular Fatherhood Initiative (46 fathers) received strong positive feedback from parents. Despite parent volunteers in the classroom being curtailed during the pandemic, home engagement and connection with classrooms increased. Monthly School Readiness Calendars, full of activities to support parent-child relationships and child development, were an important source of



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non-federal match. Parents regularly completed the daily activities, returning their completed calendars with notes, work samples and photos, connecting learning at home with our programs.

Community and family engagement with HSCPMC was a source of support and resources for enrolled children, staff and community members, in an area heavily impacted by COVID-19. Family Engagement and Health Services Specialists continually conducted family needs assessment via phone and electronic surveys. Community connections helped with food and nutrition, clothing, diapers, COVID testing, COVID vaccines, housing, employment referrals and wraparound child care. Rampant inflation made for continued economic hardships for many of our families, despite improvement in employment numbers attributable to the ending of COVID restrictions and return to in-person child care locally.

In terms of our goal to establish best-practice program design and management systems to support staff professional development, attract and retain highly qualified staff, and ensure long-term fiscal stability, significant progress has occurred, although many challenges remain due to factors outside of our control. Over the 2021-2022 program year, staff retention and wellness were prioritized, with many new programs and strategies implemented to support staff wellness. An important area for our focused improvement efforts is staff wellness, an area that has also been prioritized nationally by the Office of Head Start. Because every staff member plays an essential role in supporting children and families, staff wellness is critically important. We are and will continue to invest with intentionality in programs leading to staff who are happier, healthier, and less stressed.

Significant progress was made on our facilities plan, with key improvements around outdoor spaces. At the RCG, a state-of-the-art playground was donated by the New York Jets Foundation and several other sponsors. At the Dover site, AMERICAN RESCUE PLAN (ARP) funding, along with donations, provided an additional outdoor play space for gross motor and social emotional activities in our central courtyard, a previously under-utilized area.

Plans for expansion at the Dover site continued to be stalled, with another year of multiple submissions and returns of our facility major renovation applications for OHS approval. We have submitted for federal approval for three connected applications, including a supplemental application



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to support a major renovation with startup funds under our second HS/EHS grant (now consolidated into a single grant), as well as a major renovation with ARP funding. The delay in obtaining federal approval for these projects has brought additional obstacles, including the exponential increases in costs, necessitating revisions in the project concept. A further concern is that the project will not be able to be completed before the expiration of the project period under the terms of the grant funding.

**III. SUMMARY OF SELF-ASSESSMENT & PROGRAM IMPROVEMENT PLAN**

Focus Area	Outcomes/Progress	Plans & Strategies for Improvement – 2022/2023 program year
COVID-responsive health and safety policies and procedures to support school readiness and comprehensive family services	<ul style="list-style-type: none"> <li>● With input from Health Advisory Committee and Board of Directors committee members, updated COVID-19 Standards Compliance Policy to reflect current guidance for 2022-2023 school year</li> <li>● Paychex App for staff updated to reflect current guidance and organizational policy</li> <li>● Preservice training provided to staff on COVID-responsive health and safety policies and procedures</li> <li>● PPE provided to staff and students; physical spaces updated consistent with guidance</li> <li>● Security system upgrades increased audio access to systems messages and two-way communications</li> <li>● Building access was limited to essential visitors who completed health screenings</li> <li>● The local community continued to be impacted by COVID-19. Economic and employment impacts to families were significant, with availability of childcare and rising costs of goods and services presenting challenges to financial wellness.</li> </ul>	<ul style="list-style-type: none"> <li>● Continue to review OHS, CDC and NJ DoH guidance and accordingly update COVID-19 Standards Compliance Policy</li> <li>● Continued facility security and building access limitations will remain in place with reinforced staff training for 2022-2023 school year</li> <li>● Continue with health screenings for visitors to buildings</li> <li>● Vetted, fully vaccinated contractors and volunteers will be able to enter facilities to support program services</li> <li>● Parents may sign in and complete health screenings to briefly enter buildings to attend to the wellbeing of their child</li> <li>● Staff and families to self-screen for illness symptoms</li> </ul>

Focus Area	Outcomes/Progress	Plans & Strategies for Improvement – 2022/2023 program year
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<p>Systemic Issue: Retaining and Supporting a Highly-Qualified Workforce with a Focus on Staff Wellness</p>	<ul style="list-style-type: none"> <li>● Staff newsletter (in English and Spanish) supports morale and communication; recognizes staff birthdays/work anniversaries/special events and achievements, also provides key information and updates. Each month a different staff member is highlighted, with their photo, biography and story.</li> <li>● Staff childcare classroom/slots provide free pre-k care for up to 10 staff children (by seniority)</li> <li>● Staff Wellness Committee created to prioritize activities to build positive organizational culture and nurture staff</li> <li>● Wellness activities/programs included: Jeans Fridays; Spirit Days; Bonus provided program-wide to recognize hardships endured by staff; Ice Cream Socials; Head Start Heroes boards; Cooking night; Online clothing store for staff; monthly birthday celebrations at each site; supervisor affirmation program to recognize staff when they go above and beyond</li> <li>● Staff mental health and wellness program facilitated by Montclair University for Autism and Early Childhood Mental Health provided consultation meetings in virtual format to support staff with strategies and address issues in service delivery for children and families</li> <li>● Testimonial from HS graduate now at university shared with staff to express appreciation and affirm their work</li> <li>● Healthcare contribution expense for staff minimized with contribution from CARES funding</li> <li>● Staff onboarding process updated to incorporate multiple departments and follow up at 30-day and 90-day intervals</li> </ul>	<ul style="list-style-type: none"> <li>● Staff Wellness Committee collecting data on staff members wants, needs and personal preferences to support wellness and motivational activities</li> <li>● Recognize staff service anniversaries with congratulations and commemorative anniversary pins</li> <li>● Continue to support inter-departmental communication through monthly meetings between Family Services staff members and Education members who support the same families</li> <li>● Annually review possibility for payout of unused sick/PTO time at end of Employment Year. Not a regular policy but can be addressed situationally, along with 401K payout, if funds remain at end of budget year.</li> <li>● Annually review possibility of contribution to 401K accounts</li> <li>● Continue to seek minimal levels of staff contribution toward healthcare premiums</li> <li>● Continue to review salary structure and standardize ranges for positions. Any</li> </ul>
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	<ul style="list-style-type: none"> <li>● Staff overwhelmingly reported feeling satisfied with health safety measures taken to protect children and adults</li> <li>● Most staff feel respected, well-prepared for their jobs, and have good communication with their supervisor</li> <li>● Staff reported taking pride in helping children and families as a positive aspect of their work</li> <li>● Challenges and causes of stress reported by staff included finding time to complete tasks, lack of office space, technology, need for more PTO, language and communication, paperwork, the number of meetings requiring their attendance, technology, children’s challenging behaviors, staff absences and COVID-19</li> <li>● Staff turnover levels at 18%; most staff left for higher pay</li> <li>● Many staff feel underpaid</li> <li>● Education positions were especially difficult to fill</li> <li>● Education staff reported feeling overwhelmed and stressed about time due to the number of observations, data requirements and meetings</li> <li>● Coverage for educational staff positions was frequently challenging, with Mondays and Fridays being days most impacted by staff absences</li> <li>● Staff requested that they be allowed to take PTO in hourly increments rather than ½ day increments; supervisors confirmed this would be easier to cover</li> <li>● Staff parking at Dover managed with automated parking system (FlowBird). There is still a need for more parking closer to the facility; the lot designated for HS staff use is shared with another nonprofit (which has another lot available to them).</li> </ul>	<p>opportunities for budget relief will continue to prioritize more competitive staff wages.</p> <ul style="list-style-type: none"> <li>● Supplemental application pending for one-time grant to pay off mortgage and support construction— impact of funding, if granted, will provide some space in budget to raise staff wages in key areas of program need</li> <li>● Updated MOU with Montclair Center for Autism and EC Mental Health Services will revise wellness and mental health consultation meeting format and frequency.</li> <li>● For HS children, use one (rather than multiple) early screening instrument per site, consistent with local school districts</li> <li>● Add language to employment letters for floating staff to facilitate their movement between both sites, and conduct background check clearances with each site</li> <li>● Update Employee Handbook/Personnel Policy to allow staff to take PTO in hourly increments as opposed to half-day increments</li> </ul>
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	<ul style="list-style-type: none"> <li>• Negotiations took place with Dover officials to improve parking for Head Start parents at drop off and pickup times.</li> </ul>	<ul style="list-style-type: none"> <li>• Review feasibility of a wellness retreat type of PD event on a day when all program staff would be available.</li> <li>• Continue to request support from Dover municipal officials in designating available parking for HS Staff and follow up on timelines for planned on-street parking improvements</li> </ul>
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Focus Area	Outcomes/Progress	Plans & Strategies for Improvement – 2022/2023 program year
School Readiness Outcomes	<ul style="list-style-type: none"> <li>• OHS Region II Staff requested disaggregation of child assessment data for children with IEPs/IFSPs for separation of data analysis</li> <li>• Goal for Staff Professional Development was achieved: All Teachers/Teacher Assistants achieved Interrater Reliability in Teach Strategies GOLD</li> <li>• Quality professional development provided through a variety of sources and platforms, including Grow NJ Kids, Teaching Strategies, in-house Zoom presentations, Google Docs, email links, and hybrid training models</li> <li>• Practice based coaching by School Readiness Coordinator, Director of Education, EHS Manager and other members of LT is informed by outcomes data and targets identified areas of need</li> <li>• Staff are brought in for a full week of training prior to start of school year</li> <li>• Professional Learning Communities take place via departmental Zoom trainings at regular intervals and address areas of need identified through outcomes data</li> </ul>	<ul style="list-style-type: none"> <li>• Director of Education connected with Teaching Strategies GOLD staff to build capacity into system for separate data collection (OSEP Child Level Mandated Report). For 2022/2023 year, data is being pulled separately for children with IEPs/IFSPs</li> <li>• Plan for leadership staff PD opportunities for Reliability as available (ECERS/ITERS/CLASS, TPOT, TPITOS)</li> <li>• Continue working toward full implementation of the TPOT and TPITOS instruments and the Creative Curriculum Fidelity Tool in classrooms</li> <li>• Continue to seek federal approval of 1303 application for major renovation project</li> </ul>



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	<ul style="list-style-type: none"> <li>● For EHS, Teaching Strategies GOLD assessment data showed that most children entered the program in the fall below or close to the bottom of Widely Held Expectations (WHE). In winter and spring, the number meeting WHE increased substantially.</li> <li>● For HS, most children were meeting expectations, with some below, at the fall checkpoint</li> <li>● For HS winter and spring data checkpoints, most children were meeting or exceeding expectations overall</li> <li>● By end of school year, children were performing within WHE. Most of the children transitioning to kindergarten who were below WHE at spring checkpoint were identified through case management and were eligible or in the evaluation process for special educational services.</li> <li>● TSG data for all children across programs showed significant growth over the course of the year</li> <li>● Areas of highest growth: EHS - Literacy and Mathematics; HS three-year-olds - Language and Cognitive; HS four-year-olds – Language, Cognitive and Mathematics</li> <li>● Areas in need of continued support: EHS – Social Emotional and Language; HS three-year-olds – Social Emotional, Literacy and Mathematics; HS four-year-olds – Social Emotional and Literacy</li> <li>● Goal achieved: Educational leadership team members achieved or maintained Reliability in the Classroom Assessment Scoring System (CLASS)</li> <li>● HS CLASS scores exceeded national averages. Instructional Support, a key area of focus in accordance with our school readiness goals, was an area of strength. EHS CLASS scores fell into the mid/high range, although national norms are not available.</li> <li>● Goal for achievement of quality ECERS/ITERS outcomes was partially achieved: Program-wide ECERS-3 scores were consistently high,</li> </ul>	<p>to increase Dover facility classroom space</p> <ul style="list-style-type: none"> <li>● Continue to seek space in community for offices, meetings, and Home-based socializations</li> <li>● Continue interdepartmental team meetings between Education staff members and Family Services staff to ensure alignment of communications and addressing child and family needs</li> <li>● Prioritize focus on children’s social-emotional development and mental health with mental health consultation services, staff training around implementation of the Pyramid Model for Promoting Social- Emotional Competence in Early Childhood, and conduct TPOT observations to support classroom environments</li> <li>● Continue to provide coaching support for implementation of curriculum to fidelity</li> <li>● Continue to post monthly literacy or social-emotional support messages for families, and to provide new children’s books at family engagement events.</li> <li>● Continue to conduct CLASS observations as part of ongoing monitoring and to inform coaching needs during the school year.</li> </ul>
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	<p>averaging 5.59 (5.0 indicative of quality program). ITERS-3 was paused due to COVID-19 staff transitions, but focused walk-throughs and ITERS staff training was conducted throughout the year.</p> <ul style="list-style-type: none"><li>● Each HS classroom received two (Teaching Pyramid Observation Tool) TPOT assessments over the course of the school year, with teacher feedback and follow-up. Areas for teacher coaching include teaching children to express emotions, teaching behavior expectations, and teaching friendship skills.</li><li>● Goal achieved: Educational leadership team members completed the training program for Coaching to Fidelity for Creative Curriculum</li><li>● Most classrooms achieved strong fidelity in curriculum implementation. Head Start areas of strength included physical environment, lesson plans, structure/ schedule, and interactions. Areas for coaching and additional support included social-emotional, language and literacy, math and science.</li><li>● Early Head Start areas of strength included physical environment, positive classroom climate, and structure/schedule. Areas for coaching and additional support included transitions, conversations, and challenging behaviors.</li><li>● Monthly school readiness activities calendars were provided to families to support children’s learning at home and the home-school connection.</li><li>● Gross motor space was added and upgraded at Dover site with the addition of HS play area with social-emotional components in central courtyard and improvements to EHS playground. State-of-the-art playground at</li></ul>	
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	<p>RCG site was donated through partnership with NY Jets, United Way, and NRG.</p> <ul style="list-style-type: none"> <li>● Use of Child Plus for data-informed decision making was increased with additional staff training to input screening data and reports connected with school readiness</li> </ul>	
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Focus Area	Outcomes/Progress	Plans & Strategies for Improvement – 2022/2023 program year
Family Outcomes and Wellbeing	<ul style="list-style-type: none"> <li>● Families benefit from HSCPMC health programs to keep up-to-date with children’s immunizations, check-ups and health records</li> <li>● Families had difficulty with access to dental screenings and care. Providers were limited, with a turnover of dental professionals in the community and long wait times to schedule appointments. Collaborations with local providers, including the local Federally Qualified Health Center’s dental van, were prioritized, and services brought to HSCPMC’s locations.</li> <li>● Higher rates of child obesity have been identified during the COVID-19 pandemic. Families noted that the pandemic impacted opportunities for outdoor gross motor activities and children with babysitters may have spent increased amounts of screen time. It was also noted that families may have responded by engaging in weight control behaviors such as restricting a child’s food intake.</li> <li>● Fatherhood Initiative has been a successful program for 7 years, with strong attendance and positive feedback, despite pivot to mostly virtual format during pandemic</li> <li>● Positive Solutions for Families has been very well received as parenting curriculum program. Attendance has been strong and parent feedback positive.</li> </ul>	<ul style="list-style-type: none"> <li>● Continue to support and develop community partnerships with health and especially dental providers in close proximity to Head Start sites.</li> <li>● Continue to provide families with resources, ideas and direction to help connect with local opportunities for children’s exercise and outdoor gross motor play, as well as supports for exercise inside the home during winter months.</li> <li>● Continue to focus on parent education about healthy eating, exercise, and lifestyles. Ensure that safeguards are in place to increase education and knowledge about Body Mass Index (BMI) and ascertain that BMI calculations are accurate, using appropriate equipment, responsive language to communicate BMI assessment data and with the lens that considers</li> </ul>



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	<ul style="list-style-type: none"> <li>• Areas of strength included children’s continuous health care, up-to-date immunizations, and health insurance</li> <li>• Child obesity continued to be a community issue.</li> <li>• Summer subsidy program offered to pre-k students prioritized social-emotional health and outdoor gross motor play</li> </ul>	<p>the circumstances and history of individual children. Continue to work with community providers on supporting parent education.</p> <ul style="list-style-type: none"> <li>• Continue to share information to facilitate community access to free or low-cost nutritional food sources (fresh fruit and produce)</li> <li>• Aftercare (Extended Care Program) to meet the needs of working families will resume for the 2022-2023 school year.</li> </ul>
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**2022 Self-Assessment Participants**

- Theresa Alonzo, Family Services Manager, HSCPMC
- Analia Amigon, Parent; HSCPMC Policy Council
- Brenda Andrade Parent; HSCPMC Policy Council
- Carlos Caprioli, M.D., Executive Director, Excellence Family Success Center; HSCPMC Policy Council
- Yazmín Carvajal, Parent; HSCPMC Policy Council
- Diana Choudhury, School Readiness Coordinator, HSCPMC
- Johanna De Leon, Parent; HSCPMC Policy Council
- Rachelle Marie De Los Reyes, Senior Technical Assistance Specialist, District and Head Start, Grow NJ Kids Technical Assistance Center Northern Region
- Juan P. Fernandez, Facilities Manager, HSCPMC
- Sangly Fuentes, Parent; HSCPMC Policy Council
- Gladys Garcia, Family Support Coordinator, HSCPMC
- Nancy Grande, M.D. HSPMC Board of Directors



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Robert C. Grant, President, HSCPMC Board of Directors

Diana Grisi, Retired Child Care Director

Chris Herdman, Superintendent of Schools, Wharton Borough School District

Jenny Herrera, Parent; HSCPMC Policy Council

Judy Josephson, Vice-President, HSCPMC Board of Directors

Ashley Kindberg, Executive Director, Richard Blake Children's Center

Rebecca Kolpa, Chief Fiscal Officer, HSCPMC

Kathy Kwasnik, Director, United In Care, United Way of Northern New Jersey

Francy Leal, Parent; HSCPMC Policy Council

Alejandro Martínez, CEO, Lakeland Hills Family YMCA; Vice-President, HSCPMC Board of Directors

Melissa Martínez, Office Manager, HSCPMC

Felipe Molina, HSCPMC Board of Directors

Gabriela Nochebuena, Former parent; HSCPMC Policy Council

Susan O'Donnell, Chief Executive Officer, HSCPMC

Aura Perez, Parent; HSCPMC Policy Council

Marianne Perry, Robert C. Grant, Site Director, HSCPMC

Danual Pompa, Parent; President, HSCPMC Policy Council

Michelle Priester, Dover Site Director, HSCPMC

Joann Quattro, Executive Director, Children on the Green

Julio Quevedo, Parent; HSCPMC Board of Directors

Yosemira Rodas, Parent; HSCPMC Policy Council

Isabela Rodriguez, Vice-President, HSCPMC Policy Council; Parent

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