

NORTH CAROLINA PARENTS AS TEACHERS



**SELF-ASSESSMENT REPORT
2008**

North Carolina Parents as Teachers Self-Assessment Executive Summary

The Parents as Teachers (PAT) standards and quality indicators establish a blueprint for quality implementation of the PAT *Born to Learn*[™] model, based on best practice in the field of early childhood home visitation. The PAT standards provide a mechanism for assessing and strengthening services, program operations, and program management. Through the self-assessment process, PAT programs are able to demonstrate the quality of services – a critical part of being accountable for child and family outcomes.

North Carolina Partnership for Children (NCPC) has set a high priority on quality service provision. In an effort to ensure quality in Smart Start funded PAT programs, NCPC is requiring that all Smart Start funded PAT programs adhere to the PAT National Center (PATNC) recommendations for self-assessment. In the 2007-2008 program year, NCPC required PAT programs that have been operating for at least three years to complete the PATNC Quality Standards Self-Assessment. As a result, 48 North Carolina PAT programs engaged in self-assessment.

Each of the eight Quality Standards include quality indicators that reflect best practice within the areas of service delivery or program management. Programs rate their performance against these indicators at 5 levels of performance. The benchmarks set by PATNC indicate the desired rating for indicators to be Fully (5.0) or Substantially Met (4.0). Based on the self-assessment results of 46 NC PAT programs, 86% of the 190 indicators were rated at Fully or Substantially Met.

A program's overall self-study results demonstrate areas of strength and opportunities for growth. The average rating of NC PAT programs for each of the PAT quality standards are as follows: 4.6 (Personal Visits), 4.5 (Resource Network), 4.5 (Program Management), 4.5 (Group Meetings), 4.4 (Screening), 4.4 (Recruitment and Retention), 4.3 (Professional Development), 4.2 (Evaluation). Each standard demonstrates overall performance at the highest levels.

PATNC has grouped the standards into three strands: Procedures, Strategies/Techniques for Working with Families, and Record Keeping/CQI (Continuous Quality Improvement). The highest level of performance by NCPAT programs is in Strategies/Techniques for Working with Families, which indicates strength in program service delivery (92% Fully or Substantially Met). The strand that identifies the greatest need for support in NC PAT programs is Record Keeping and CQI (79% Fully or Substantially Met).

Upon review of the completed CQI plans, it is apparent that there are overlapping issues and strategies, particularly with regard to written policies and procedures, supervision, and professional development. While each program is to address the issues identified through their own self-assessment, many of the issues can be addressed or supported through regional network opportunities, technical assistance and professional development opportunities available at the state level. The NC PAT State Office will incorporate the findings of the self-assessment and the CQI plans in its own strategic planning to support programs to achieve the highest level of quality in service delivery and program operations.

Introduction

The Parents as Teachers (PAT) standards and quality indicators establish a blueprint for quality implementation of the PAT *Born to Learn*[™] model, based on best practice in the field of early childhood home visitation. The standards are intended to not only provide programs and parent educators with clear guidelines for implementing the PAT model, but also to continually propel programs to even higher levels of excellence in serving families.

The PAT standards provide a mechanism for assessing and strengthening services, program operations, and program management. Through the self-assessment process, PAT programs are able to demonstrate the quality of services provided – a critical part of being accountable for child and family outcomes. (See Appendix A for list of Quality Standards)

The Parents as Teachers National Center recommends that PAT programs in their first and second years of implementing the PAT Born to Learn model use the standards to guide practice. Established programs are encouraged to engage in self-assessment once they have implemented the model for 3 years. The self-assessment process is then completed every 3 years.

The PAT Quality Standards were created to allow programs to measure the implementation of the model against best practice. While all of the quality indicators reflect best practice, not all PAT programs are exactly alike. Programs differ in their program structure and service delivery based on their target population, community resources, and funder expectations. Therefore, the PAT National Center does not expect, or require, programs to meet 100% of the indicators. Rather, the standards and quality indicators are to be used to move a program towards aligning practice with the quality indicators as they reflect on their structure and service delivery mechanisms.

North Carolina Partnership for Children (NCPC) has set a high priority on quality service provision. In an effort to ensure quality in Smart Start funded PAT programs, NCPC is requiring that all Smart Start funded PAT programs adhere to the PAT National Center recommendations for self-assessment. In the 2007-2008 program year, NCPC required PAT programs that have been operating for at least three years to complete the PATNC Quality Standards Self-Assessment. As a result, 48 programs engaged in self-assessment.

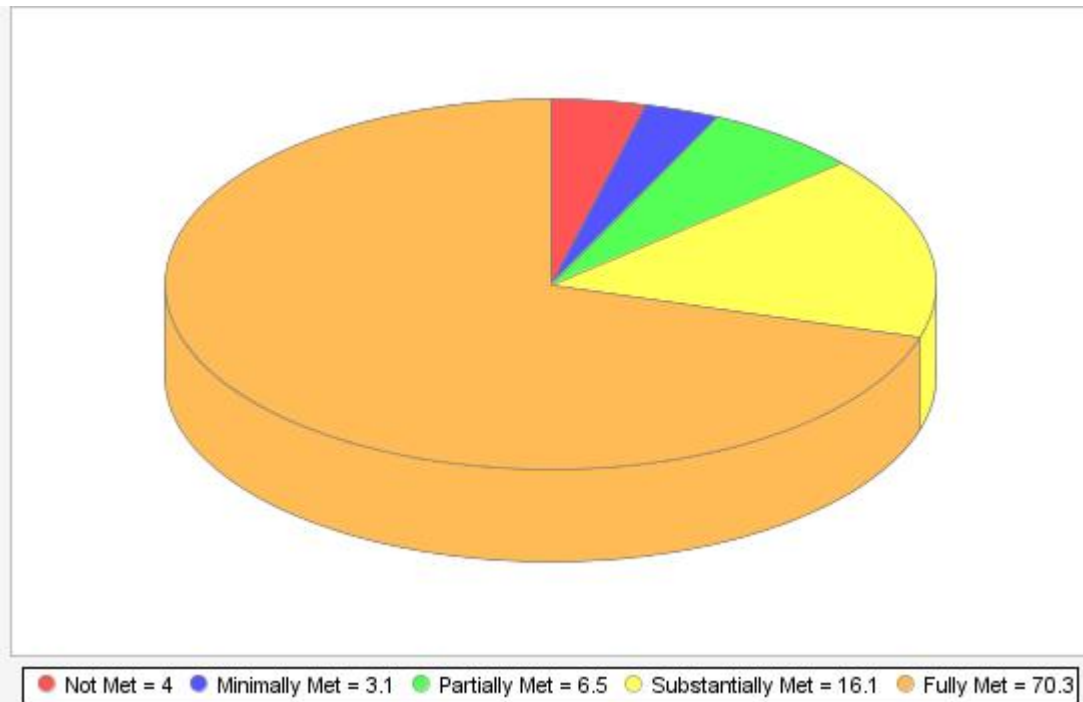
This report will highlight the findings of self-assessment, common areas identified for follow-up, and strategies for continuous quality improvement.

Self-Assessment Results

Every program engaged in self-assessment is asked to enter their rating results into the on-line self-study tool provided by PAT National Center. This on-line tool allows programs to enter indicator ratings, issues for follow-up and strategies to move a program towards continuous quality improvement. Programs receive a summary of their results in the form of charts and graphs allowing them to see at a glance their performance in each standard area. PAT National Center, upon request of NC PAT State Coordinator, has compiled the self-assessment data for NC PAT programs. This aggregate of data provides a picture of model fidelity and program quality of PAT programs in North Carolina.

Overall Results

Within each of the eight Quality Standards there are quality indicators that reflect best practice in the areas of service delivery or program management. Programs rate their performance against these indicators at 5 levels of performance: Fully Met, Substantially Met, Partially Met, Minimally Met, and Not Met. (See Appendix B for explanation of ratings). Based on the self-assessment results of 46 programs, NC PAT programs meet 86% of the 190 indicators at Fully or Substantially Met.



PATNC has established benchmarks of performance based on percentages of indicators met by programs. Of the 48 program required to perform self-assessment, 46 have completed the process and entered their data on-line. The majority of programs (80%) are performing at the Excellence or Quality Level. Below is a summary of performance based on the benchmarks.

21 programs performed at the **Excellence** level meeting at least 90% of the quality indicators at Fully or Substantially Met, and 90% of the indicators within Personal Visits and Program Management at Fully or Substantially Met.

16 programs performed at the **Quality** Level meeting at least 80% of the quality indicators at Fully or Substantially Met, and 80% of the indicators within Personal Visits and Program Management at Fully or Substantially Met.

6 programs performed at the **Merit** level meeting at least 70% of the quality indicators at Fully or Substantially Met.

3 programs performed at the **Not Yet Merit** level meeting less than 70% of the quality indicators at Fully or Substantially Met. The table below demonstrates the percentages of indicators met at the 5 rating levels for these 3 programs.

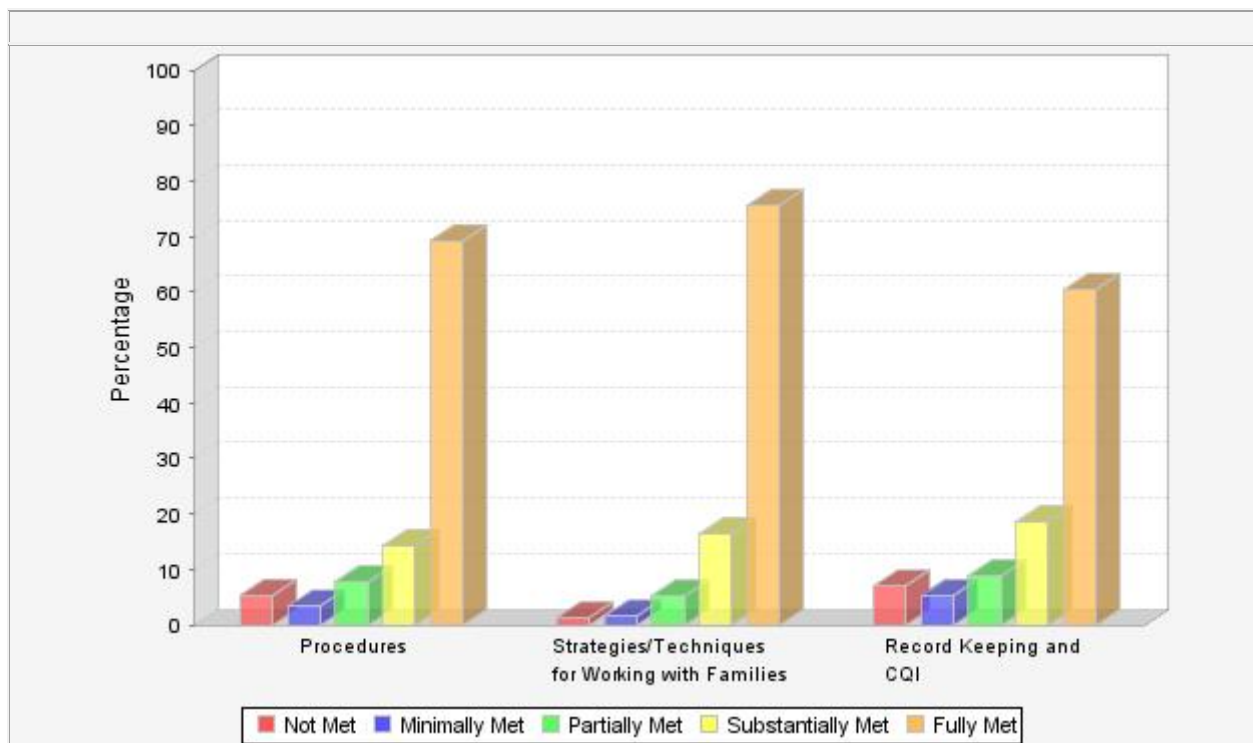
Programs of Not Yet Merit	Fully Met	Substantially Met	Partially Met	Minimally met	Not met
Program one	41.6	18.9	18.9	10.5	10.0
Program two	5.8	20.0	38.4	26.8	8.9
Program three	56.3	23.2	7.9	6.8	5.8

Percentages indicate that the number of indicators rated Not Met are low, however, indicators that are Partially or Minimally Met need to be strengthened through continuous quality improvement strategies.

Strand Results

PATNC has grouped the standards into three strands: Procedures, Strategies/Techniques for Working with Families, and Record Keeping/CQI (Continuous Quality Improvement). Below is a breakdown of percentages of indicators met in each of these strands for all 46 programs.

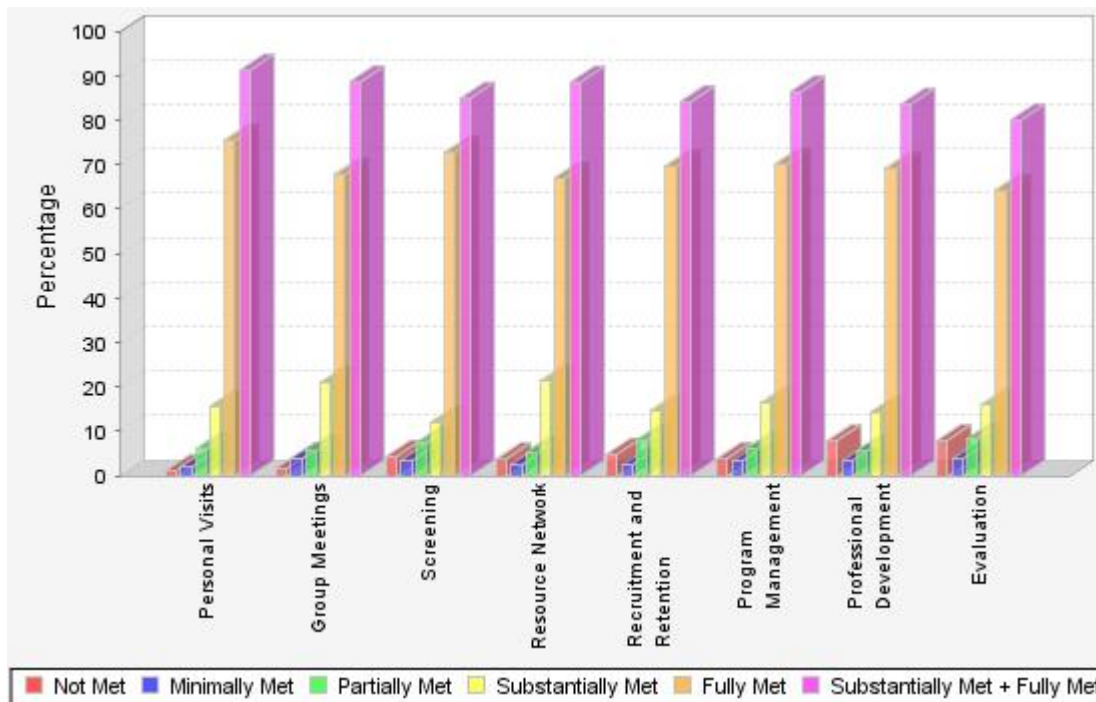
Strands	Fully Met	Substantially Met	Partially Met	Minimally met	Not met
Procedures	69.3	14.2	7.7	3.3	5.4
Strategies/Techniques for Working with Families	75.5	16.4	5.2	1.6	1.3
Record Keeping and CQI	60.3	18.5	8.8	5.4	6.9



The benchmarks set by PATNC indicate the desired rating for indicators to be Fully or Substantially Met. The above scores demonstrate a high level of performance overall for PAT program in all three strands. The highest level of performance is in Strategies/Techniques for Working with Families which indicates strength in program service delivery (92% Fully or Substantially Met). The strand that identifies the greatest need for support is Record Keeping and CQI (79% Fully or Substantially Met).

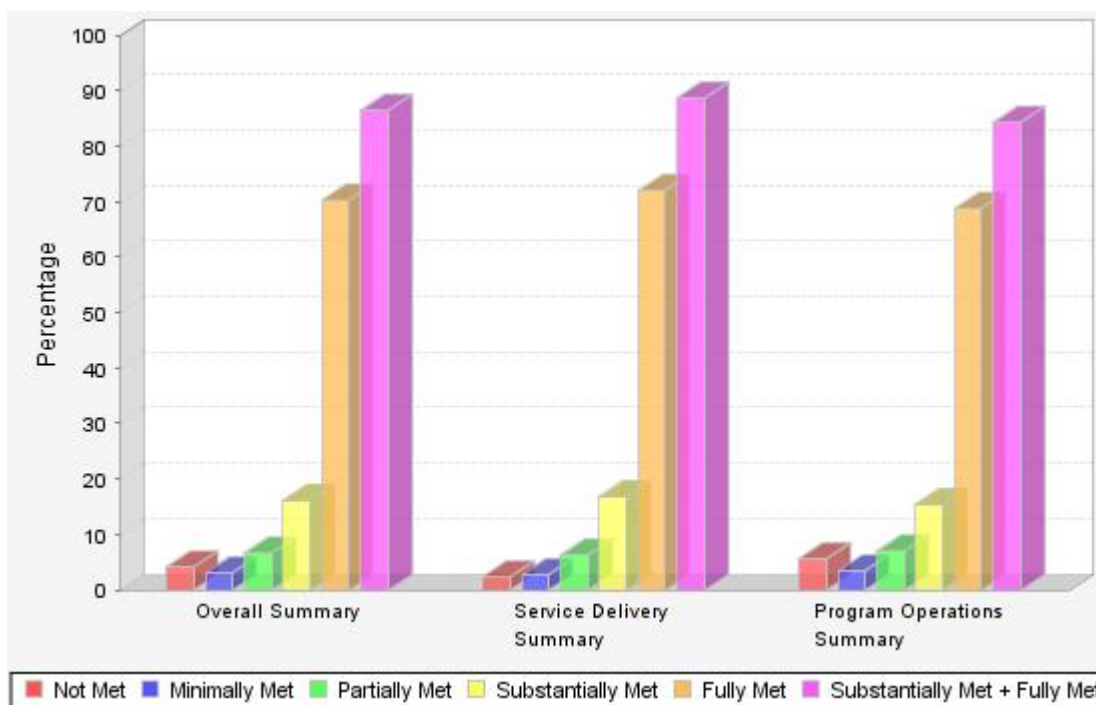
Indicator Results

The report provided by PATNC breaks down the average ratings for each indicator. The chart below demonstrates the average ratings of indicators for each standard.



The standards are separated into Service Delivery and Program Operations. The table below demonstrates overall performance as broken down into these 2 categories.

Overall Summary	Fully + Substantially Met	Fully Met	Substantially Met	Partially Met	Minimally met	Not met
Overall	86.4	70.3	16.1	6.5	3.1	4.0
Service Delivery Summary	88.7	71.0	16.8	6.2	2.8	2.3
Program Operations Summary	84.2	68.7	15.5	6.9	3.4	5.6



While overall ratings indicate high performance in both Service Delivery and Program Operations, there are twice as many indicators not met in Program Operations as in Service Delivery.

Another breakdown of the indicators by standards reveal more specifically that Professional Development and Evaluation have the highest number of indicators Not Met. The highest number of indicators rated at Fully or Substantially (F-S) Met are found in Personal Visits, Group Meetings and Resource Network.

Ratings	PV	GM	SC	RN	RR	PM	PD	EV
F-S Met	91.1	88.7	84.7	88.4	84.2	86.4	83.4	80.0
Not Met	1.1	1.7	4.4	3.7	4.9	3.8	7.7	7.9

Below is a listing of specific indicators that, on average, are rated below a 4.0 (less than Substantially or Fully Met).

Personal Visits

PV 3: Parent educators involve fathers in personal visit.

PV 6: Personal visits are offered more than once a month to each family with high needs.

PV 18: Parent educators use the Born to Learn™ video or DVD segments to support key points about development.

Group Meetings

GM 9: Parents are used as a resource to: identify topics for group meetings, plan group meetings, and facilitate group meetings

Screening

SC 19: A sample of each parent educator's completed developmental screening protocols are reviewed at least annually by the supervisor or mentor parent educator for accurate administration and scoring.

Recruitment and Retention

RR 17: Staff contacts families that have exited the program to identify strengths, gaps, and weaknesses in the program

Program Management

PM 14: The program follows and annually reviews with staff its policy governing appropriate procedures for addressing child abuse and neglect in alignment with state law.

PM 18: Program hires parent educators with a bachelor's degree or beyond in early childhood education or a related field and supervised experience working in the early childhood field.

PM 28: Program accesses consultants (especially mental health consultants) who provide guidance to parent educators regarding their work with families.

PM 38: A current summary of services record for all families served by each parent educator is maintained and reviewed at least quarterly for accuracy by the program supervisor.

PM 39: Supervisor or mentor parent educator reviews a sample of each parent educator's files for accuracy, completeness, and overall quality on at least a quarterly basis.

Professional Development

PD 8: First year parent educators receive more frequent personal visit and screening observations, with the first observation taking place within the first eight weeks of delivering services

PD 11: The program supervisor or mentor parent educator observes each parent educator administering developmental screening and provides feedback at least once every 3 years

PD 12: On an annual basis, parent educators set written professional development goals and evaluate progress toward these goals

PD 16: Program staff access ongoing training to assure that screenings are administered and scored accurately

Evaluation

EV 2: At least 5% of the annual program budget is allocated for evaluation, including self-assessment activities

EV 7: Stakeholders, including families, are involved in planning and discussing the results of program evaluations

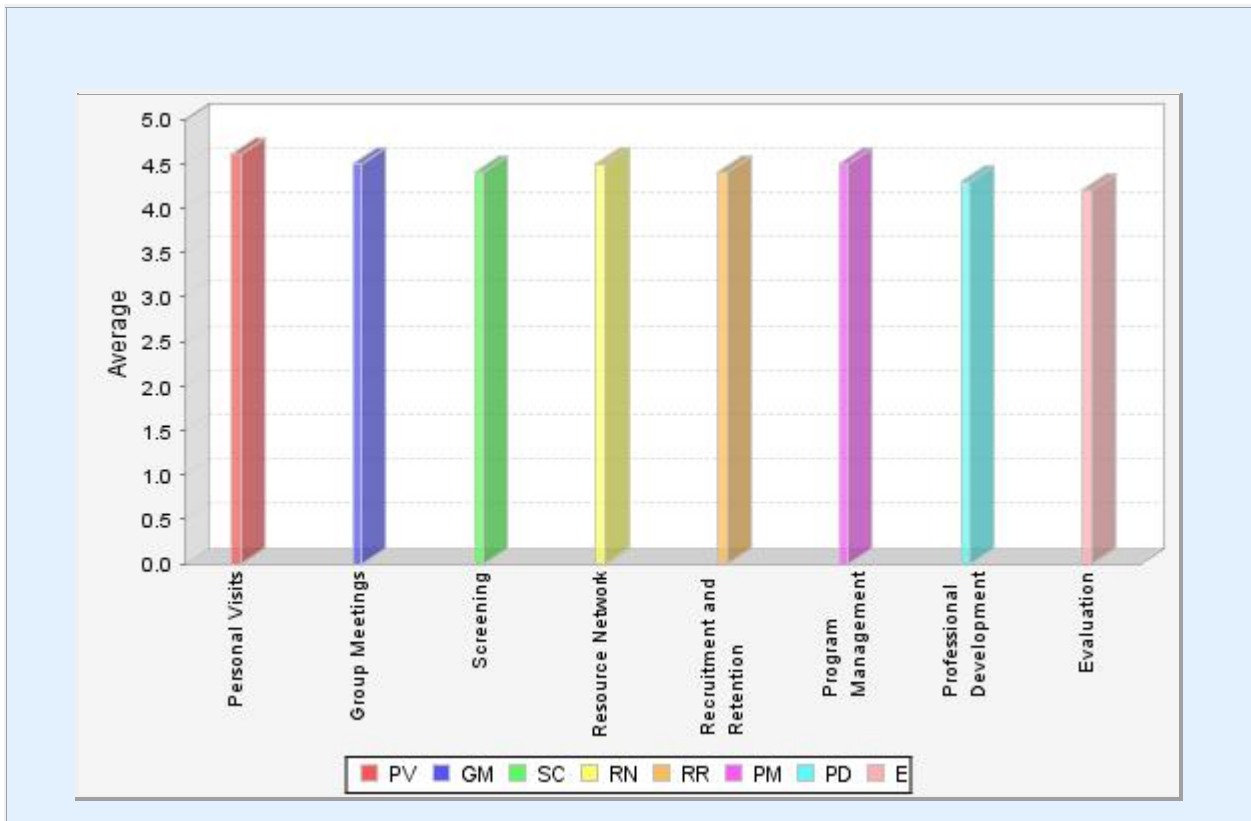
EV 18: The program tracks child outcomes until kindergarten entry, and ideally beyond, to demonstrate the impact of the program on children and families over time.

Conclusion

A program's overall self-study results demonstrate areas of strength and opportunities for growth. The following graph illustrates the overall results of self-assessment by quality standards. This graph highlights overall performance for every quality standard at a level of excellence.

The average rating for the quality indicators in each area of the PAT standards:

4.6 (Personal Visits), 4.5 (Resource Network), 4.5 (Program Management), 4.5 (Group Meetings), 4.4 (Screening), 4.4 (Recruitment and Retention), 4.3 (Professional Development), 4.2 (Evaluation)



Continuous Quality Improvement Plans

Although overall ratings for NC PAT programs are high, there is always room for Continuous Quality Improvement. This section will summarize the areas of focus as identified by the NC PAT programs and strategies for follow-up within each quality standard. (* indicates the most frequently mentioned issues for follow-up) It is important to keep in mind that while there are specific areas of follow-up identified, these are not indicative of the performance of all programs in these quality standard areas.

Personal Visits

Involving fathers* in the home visit was the most frequently identified issue in personal visits. The average score for this indicator was 3.6 which reveals programs are meeting this indicator but at a lower rate than the standards would indicate as best practice. Only 51% of programs rated this indicator at substantially or fully met. Programs offered flexible scheduling, incentives, and intentional recruitment of fathers as possible strategies.

Equally important was the need to complete reports within 24 hours*. Although 78% of programs reported meeting this indicator at substantially or fully met, it was frequently listed as an issue for follow-up. Strategies for follow-up include scheduling 30 minutes per personal visit for record keeping tasks following the visit, reviewing time management strategies with staff, and purchasing laptop computers for parent educators to enter reports while in the community.

Many of the issues identified for follow-up within personal visits dealt with the content of the personal visit. Issues included:

- Use of PAT Born to Learn videos*
- Use of milestones and screening results in planning lesson plans
- Sharing brain development information with parents
- Setting parent goals
- Sharing the rationale with parents
- Emphasizing the follow-up activity
- Use of knowledge of adult learning styles in presenting information

To address these content areas the following strategies were documented:

- Develop parent goals and document in Annual Individual Service Plan
- Revisit parent goals monthly for planning and review parent goals annually with family
- Use periodic file reviews to track content delivery and record of delivery
- Use BTL videos in group meetings or during First Visit
- Purchase portable DVD player to use in homes that do not have DVD players
- Discuss content delivery issues in monthly staff meetings or individual supervision sessions
- Implement peer mentoring or peer support groups with other programs
- Provide training to parent educators on specific issues

Other issues worth noting are the need to set professional boundaries, which will be addressed through professional development, and addressing the challenges of intensity and caseload. Strategies to address the challenges of intensity and caseload will include prioritization of services based on risk factors, exploring more flexible schedules, and assessing schedules and caseloads based on family needs, coordination with other services families receive, travel time, and other parent educator responsibilities.

Group Meetings

Parent input* was the most frequently identified issue in Group Meetings. Parent input can be used for planning and identifying topics for group meetings, determining best location and times for meetings, facilitating group meetings and evaluating group meetings. A variety of strategies were suggested for follow-up: parent questionnaires and/or surveys at program entry or at the end of program year, group meeting evaluations to be completed by parents immediately following the

meeting, and parent focus groups. In many of the CQI plans, the importance of follow-through with parent input and using parent input for long range planning was emphasized.

Other issues identified in Group Meetings include:

- Keeping records of group meeting plans, activities, and evaluations*
- Targeting specific populations that are being served (i.e., Spanish speaking families, fathers, teens, etc.)
- Challenge of identifying topics, speakers, and facilitating parent networking

Strategies suggested for these issues include:

- Implementing new record keeping and management strategies
- Utilizing parent input to offer meetings that best meet the schedules and needs of targeted parents
- Being intentional about planning targeted or content specific group meetings
- Offering a broader variety of formats (parent focused with child care, parent-child activity, play groups, etc.)

Screening

Although several issues were identified for follow up in Screening, the most frequently identified issue centered on peer and supervisor review of screening practice and record keeping*.

Strategies included an annual review of family files to assess screening records and supervisor observation of the parent educator performing a screening at least once a year.

Other issues focused on the training of parent educators and written procedures. Programs indicate accessing further trainings for administering the ASQ, hearing and vision functional assessments, and dental screenings. Procedures for screenings, referrals, consent for sharing information, professional development, record keeping and sharing screening information with parents will be written or revised.

Using screening information* for planning Personal Visits and helping parents become better observers of their child(ren) was indicated by many programs as an area of needed follow-up. Peer mentoring, reflective supervision, and observation of parent educator performance were suggested as strategies to strengthen these areas.

Resource Network

Several issues were equally identified as needing follow-up in Resource Network. These include

- Resource Directory* – need to create, locate or update
- Follow-up with parents to see if they accessed resources or found resources to be helpful*
- Documenting referrals and follow-up actions
- Outreach and connection to community resources
- Provide information and resources for parents

Strategies for follow-up included:

- Utilizing expertise and connection of community council/advisory board members to establish community partners and to increase awareness of community resources
- Participate in LICC or other community boards
- Search for updated resource directories in community
- Create referral and follow-up forms for records and establish procedures for how to use

- Create a “transition packet’ for families exiting the program
- Create newsletter for outreach to families
- Locate community lending library for parents

While some programs indicated a lack of a resource directory or a lending library, strategies indicated a collaborative approach to meeting this need rather than trying to create and fund their own.

Recruitment and Retention

Programs have identified the need to gather parent feedback upon exit of the program to identify strengths, gaps, and weaknesses in the program* as the primary issue for follow-up with Recruitment and Retention. Strategies include creating an exit survey for families, follow-up phone calls with families after they have exited the program, exit interviews, and follow-up with children to track further development.

Programs have also identified the lack of procedures for recruitment and retention as an area of need. Procedures need to include recruitment strategies, waiting lists, and timeframe for beginning services with new families.

Program management

In the CQI plans, Program management had the largest number of issues and strategies for follow-up. The issues include:

- Parent educator professional development: setting goals*, stress reduction, support of new parent educators, supervisor observation of parent educators.
- Written procedures*: staff handbook, parent handbook, personal safety, child abuse recognition and reporting*
- Establishing an advisory board*
- Record keeping issues: summary of services, data collection, regular record review*
- Adequate funding*
- Staff issues: staff size, staff input, salaries, education level, regular relationship-based (reflective) supervision*

Strategies for follow-up included in the CQI plans do not adequately address all of these issues. They do include written procedures for addressing child abuse and neglect, additional training and professional development for addressing child abuse/neglect and personal safety, file reviews to ensure completed records and use of summary of services form, reviewing parent educator qualifications, utilizing web-based data system, and establishment of a leadership council or advisory board. The NC PAT State System will also review the CQI plans to address these areas through professional development, peer support through regional networks and technical assistance.

More specifically, strategies include:

- Parent educator professional development: annual performance evaluations, schedule monthly staff meetings with supervisor, schedule monthly individual supervision sessions
- Written procedures: creation of a staff handbook outlining staff requirements and program policies, establish personal safety guidelines, establish procedures for addressing child abuse and neglect.
- Establish leadership council or advisory board: invite community partners to participate

- Record keeping: peer and supervisor file reviews will occur regularly to ensure that summary of services is utilized and that records are complete, including screening information.
- Staff issues: Supervisors will research and seek additional funding for adequate staffing and appropriate caseloads. Job descriptions with qualifications will be written. Programs will prioritize hiring to include those with bachelor degrees and/or early childhood experience. Supervision will include individual sessions as well as staff meetings.

Professional Development

Three issues for follow-up stand out within Professional Development: Staff orientation*, observation by supervisor of parent educator performance, and training for screenings*. Each of these fall under a larger goal of supporting the development and growth of the parent educator.

Strategies to address the specific indicators within Professional Developments include:

- Development of a new parent educator orientation
- Providing opportunities for a new parent educator to observe an experienced parent educator on a home visit.
- Supervisor observes of a new parent educator within the first 8 weeks of delivering home visits.
- Supervisor, or mentor/peer parent educator, observes parent educators on home visits, leading group meetings, and performing screenings on an annual basis.
- Parent educators will set personal goals and review yearly.
- On-going training for screening protocols will be available to parent educators.

CQI plans also include utilizing opportunities to attend state and national conferences for professional development. Other professional development needs identified include setting professional boundaries, address child abuse and neglect, recruitment and retention, self-care, and stress reduction.

Evaluation

In the area of Evaluation, the CQI plans are primarily focused on parent involvement in evaluation* and tracking children through kindergarten entry*. Parent involvement in the evaluation process is a key component to successful evaluation and programs have made plans to include parents at every step of the process: planning, participate in surveys and questionnaires, and receiving evaluation summary results. Strategies include involvement of parents on leadership councils, written procedures for administering parent surveys/questionnaires and collecting data, and providing evaluation summaries to parents, as well as other community stakeholders.

Tracking children through kindergarten entry is important to understand long range impact. Programs have identified strategies that will work with their current relationship to families and the schools. Some will work with the school system directly while others will receive permission to follow-up with the family once the child has entered school.

Evaluation indicator #18 states that programs should have 5% of their budget set aside for evaluation. This is the only indicator in the overall average that was rated below 3.0. However, despite the overall low rating, this issue is addressed in the CQI plans submitted only twice. The strategy is to advocate for additional funding from funders for this purpose.

Overall CQI Plan Summary

Upon review of the completed CQI plans, it is apparent that there are overlapping issues and strategies, particularly with regard to written policies and procedures, supervision, and professional development. While each program is to address the issues identified through their own self-assessment, many of the issues can be addressed or supported through regional network opportunities, technical assistance and professional development opportunities available at the state level. The NC PAT State Office will incorporate the findings of self-assessment and the CQI plans in its own strategic planning to support programs to achieve the highest level of quality in service delivery and program operations.

NC PAT Network Response

The NC PAT Network exists to provide the support, professional development, technical assistance, and advocacy necessary to develop a network of quality PAT programs. The information presented through the self-assessment summary provides direction for the state training and technical assistance team to fulfill the mission of the state office. Based on the identified indicators that were rated below 4.0 and the summary of continuous quality improvements plans, the following activities will be implemented over the next three years to support programs in their quest for continuous quality improvement. The NC PAT State Advisory Board will engage in further strategic planning to more adequately address these findings.

Technical Assistance

- Site visits to local programs will continue to be available to those that request such based on the levels of technical assistance as defined by the NC PAT Training and Technical Assistance Team.
- Technical assistance on specific issues for follow-up will be provided to regional networks as requested by the regions or at NC PAT statewide coordinator's meetings (i.e., record keeping, personal visit observations, data collection, evaluation, recruitment and retention, engaging fathers, etc.)
- Participation in regional networks will be encouraged for peer mentoring and sharing.

Professional Development

- ASQ trainings offered 2-3 times per year
- Training dates and information from Prevent Child Abuse NC for Recognizing Child and Abuse and Neglect will be provided to local programs as available.
- Identify possible training for engaging fathers. Provide support materials to programs to encourage father involvement.
- At least one supplemental PATNC training will be brought to NC annually.
- Trainings on hearing and vision functional assessments will be provided to local programs and regions as requested.
- Trainings on reflective supervision and/or supporting the development of the parent educator will be offered to supervisors at least once a year.
- As appropriate, PD for supervisors will be addressed at NC PAT statewide coordinator meetings (i.e., goal setting, record reviews, parent educator observations, etc.)
- NC PAT State Office will continue to partner with, and submit proposals to, state level conferences to provide PD opportunities to local programs.