St. Joseph County ISD
Early Head Start-Child Care Partnership (EHS-CCP) Program
2024-25 Self-Assessment & Annual Report

completed 11/21/25

Assessment Overview and Methodology

The St. Joseph County Intermediate School District (SJCISD) annually reviews program data to align with the Head Start Program Performance Standards and as part of the continuous quality improvement process. The SJCISD uses its ongoing monitoring results and an annual self-assessment process to review key areas and identify program strengths, areas for improvement, and to identify any emerging trends. This process allows for data-driven action planning as part of the quality improvement process.

One of the challenges the program has continued to experience is staff turnover. While it may not be a high level of turnover, with a small number of internal staff, any time there is a change, it impacts the program. Much of staff time and energy focused on onboarding new staff and supporting what is already in place. Some goals and action steps were attained while others were delayed. As the team reviewed, they recognized which systems work well and which need to be improved.

Key Insights

Program Strengths or Improvements

Areas staff identified as strengths

- *We have a strong onboarding system for new staff in place now*
- *We have improved our communication methods throughout our department and partnerships*
- *A new pilot of Help Me Grow Michigan will add to our robust recruitment and enrollment process and also the resources available to families are more accessible due to Help Me Grow Michigan*
- *Strong system in place for ongoing professional development in High Scope and Conscious Discipline*
- *Great partnerships in Health care for children and families and our Health and Disability Specialist connects families to these services*
- *A new Mental Health Consultant has been hired and has experience in home visiting and working with parents*
- *Our family committee events have grown this past year with a commitment from our Early Head Start Coordinator*
- *Increased male involvement overall*
- *A consistent Policy Council attendance has been in place this past year and have brought about some changes to our program*
- *Eligibility and enrollment process has improved with streamlining paperwork and putting the process in writing*
- *Variety of program options to meet families' needs*
- *Care management meetings have significantly improved communication and services*

- *Strong connection with Early On for children with disabilities or developmental delays*
- *Five bilingual staff*
- *Strong system for menu review and communication with nutritionist*
- *Strong relationship with Pivotal for mental health services and doctor's offices*
- *Making progress on goals and capturing data*
- *Improvement in health services including immunizations and well child visits*

Recruitment and Enrollment

- 20% of enrolled children are in foster care
- 54% of enrolled children were eligible for through Public Assistance
- 85% of children were enrolled for the second or third year
- 45% of enrolled children live with one parent, mostly their mother
- 5% live with Grandparents
- Continue to work with a social media company for recruitment
- Need more spots for infants in child care; most children under 18 months enroll initially in home visiting
- Looking for additional partners on an ongoing basis

Additional Services for Children with Disabilities

- 31% of overall enrollment are children with disabilities
- Special education or early intervention services provided on site with child care providers/centers

Family Services

- All families created a goal
    - 68% completed their goal
    - .02% are 3/4 of the way to completion of their goal
    - .04% are half way to completion of their goal
    - .06% are a quarter of the way to completion of their goal
    - 20% started their goal
- 53% of families participated in their child's screening and assessment results
- 72% of families received at least one family service
- At the beginning of enrollment 48 children were enrolled whose parent was employed, in job training, or in school; at the end of enrollment, there were 61
- Four of our family services staff are bilingual (Spanish/English)
- Our Parent Committee grew a lot this year. Last year we would only have 1-2 parents participate in the Parent Committee and this past year we would have at least 15 but sometimes as many as 25 parents, grandparents and family members participating in our Parent Committee and events.

Health Services

- 98% of children enrolled had health insurance upon enrollment

- 97% of children had a source of ongoing health care at the end of enrollment
- 43% of children had a source of ongoing dental care

Mental Health Services

- All sites received regular mental health consultation
- The Mental Health Consultant, with a mental health background, provided continued support for children, families, and child care providers; including Family Coaching as needed for individual families
- In January 2024, the program hired a Mental Health Consultant to meet the requirements of a mental health provider per the Head Start Program Performance Standards and continues to contract with a Mental Health Therapist to provide quarterly visits and support to the Mental Health Consultant monthly. Our Mental Health Consultant resigned in August 2025 and then we hired a new Consultant in October 2025.

Education Services

- The Great Start to Quality Program shifted to a new level system and one provider is Demonstrating Quality, four are Enhancing Quality - Validated, two are Reflecting on Quality and one is new and Maintaining Health and Safety. We are supporting each program to move them to Enhancing Quality.
- Five of the eighteen child care providers, lead teachers, or assistants have a Child Development Associate credential or higher. The other thirteen that have not yet received theirs are enrolled in a degree or credential program.
- Our Child Development Specialist/Coach is working hard to support providers and teachers in boosting their Program Quality Scores.

School Readiness

- By summer of 2025, at least 70% of children in the program were meeting or exceeding the national levels in the areas of:
    - Approaches to Learning
    - Creative Arts
    - Mathematics
    - Physical Development and Health
    - Science and Technology
    - Social and Emotional Development
    - Social Studies

Leadership and Governance

- Full Policy Council the last 2 years
- Supportive Board of Education
- Supportive Superintendent: For example, the superintendent completed the process to become a substitute for the EHS program and meets at least monthly with the Early Head Start Director

Fiscal & Human Resources

- Fiscal systems working well
- Strong Program - Fiscal approach with monthly meetings and regular communication

- No findings during audit reviews
- The ISD Marketing and Communications Specialist has supported EHS in promoting engagement, which has lead to more leads for applications
- We also contract with an outside Social Media company that runs our Facebook page and our Help Me Grow website

Discussion and Recommendations

Areas for Improvement

Throughout the process, several areas for improvement were identified and prioritized by the Self-Assessment team.

Family Engagement

The impact of the pandemic made it difficult to recruit and engage parents in the parent committee over the past several years. When meetings were held, no parents attended. This happened even with call and text reminders. The program identified that some families have a lack of relationships and connections that can help support their family in times of need. In 2024-25 we were finally able to connect with families and get them to attend our family events/meetings.

What	Who	By when	Update
Continue to establish and build the parent committee and guidelines for parent committee	EHS Coordinator, Family Advocates	December 2025	November 2025 we had an increase in attendance from 1-2 parents to over 15 parents attending this year.
Strengthening parent to parent relationships and connections as determined by the Parent Committee (such as parent meet and greet, parent cafes)	Parent Committee and EHS staff	September 2025 and ongoing	We have held 3 parent activity events over the past year and they have been very well attended and parents reported that they enjoyed them.

Male Engagement

The program has been working with their Early Childhood Specialist to improve in involving males in their child's development and program activities. The baseline data collected for the 2024-25 school year is: the highest percentage of fathers (33%) participated in the child development services, followed by 25% in family

assessment; 25% in family goal setting; 4% in program governance; and 4% in parenting education workshops. We made gains in all of the areas last school year, but we will continue to focus on male engagement this next year.

What	Who	By when	Update
Providers will collect data on males attending home visits and parent teacher conferences after each checkpoint period	Providers and teachers	November 2024, February 2025, June 2025, August 2025	We had an increase in all areas from last year to this year
Family Advocates collect data on males attending family assessment, goal setting, program governance, and parent workshops	Family Advocates	September 2025 and ongoing	We had an increase in all areas from last year to this year
Continue to utilize the system created to track male involvement at other program events	EHS Coordinator	April 2024 and ongoing	We have collected signatures of all males attending events and participating in activities this past year

Supporting children in foster care

On average, the program enrolls about 23% of children in foster care. This area was identified in the last self-assessment. While some progress was made (25% 2023-24), the program would like to continue to improve in this area. The team wanted to review and explore how we can best support children who are in foster care, with particular consideration of both the foster care families and the biological families when the goal is reunification.

What	Who	When	Update
Continue to work on developing policy and procedure on supporting children in foster care including transitions to another home, care management role, authorizations to share	Family Advocates Care Management Team	9/30/25	The team is now entering the Foster care data into Child Plus. We are revamping the Foster Care policy currently.

information and consider how to enter information into ChildPlus			

Non-Federal Share Match

This area was identified for improvement through the Focus Area 2 Monitoring process. This action item was unable to be completed until the program would be collecting non-Federal share match, which will occur for the 2024-2025 grant period.

What	Who	When	Update
Test period non-Federal share waiver timing	Director of Early Childhood Services and Assistant Superintendent of Finance, Operations, and HR	2024-2025 grant period	Collecting Non-Federal Share continues to be challenging. Documenting the in-kind is the issue. We have put new procedures in place to increase our Non-Federal share collected.

Other discussion

The following is a summary of the discussion and consideration of other potential areas of improvement. Given the amount of current action plans and targets in these areas, the team chose to keep these as touchpoints as other items are completed and will be used as feedback for program implementation.

Notes:

Family and Community Engagement

- The team discussed the structure of the EHS program. Due to the nature of the child care partnerships, the Family Advocates are not on site daily to support parents by seeing them everyday. Child care providers have strong relationships with their families with the informal discussions at drop off and pick up. This information can be used to consider how to best support parent involvement and engagement.
- The team would like to strengthen referral with other community agencies, which has continued to be impacted by staff turnover.

Education

- Our EHS coach will be using the PQA as an ongoing coaching tool to boost quality in the programs instead of just administering the PQA once per year. She will use it throughout the year to reflect a more accurate score and the chance to coach on a deeper level.

- The program is continuing to work with teachers and child care providers on quality lesson planning and boosting their PQA scores.

Health

- There is a lack of pediatricians in the area. One pediatrician left in 2023 and was not replaced. Our Family Advocates worked with families to find a new option.
- Some medical providers do not do immunizations on site, so that results in an additional appointment for families.
- The program is seeing an increase in children with food allergies and learning how to navigate that with the Child and Adult Care Food Program.
- There continues to be very few dental providers that will see children under 3 years old. Additionally, the dental providers are booking far out in advance, so it is difficult to meet the program dental requirements for families.
- There is a lack of mental health providers in the area and even fewer for those under 5 years old.
- There is some resistance from parents not interested in services or not following up when there are mental health concerns. At the same time, the program is seeing a need for mental health services for enrolled children.
- We have a great Nutritionist that works with us monthly and provides support with menus and food choices.

Other data review and discussion

- Implement working interviews in which the candidates are given time in the classroom to show their skills.
- The community has a high amount of Medicaid paid births. The team noted that the qualifications for Medicaid is a higher threshold than EHS program eligibility. They also noted that the community needs more medical providers who accept Medicaid.
- Staff has noticed that there are more visibly homeless individuals and families in the community. While the program has enrolled children who are homeless, it is difficult due to lack of transportation for the family and lack of public transportation in the community.
- The community data showed that there are many children living in families with single parents.
- Prenatal care is a challenge in the community. There is only one hospital in the county that delivers babies. Families often need to travel to get prenatal care.
- Our onboarding of new staff and child care providers has been streamlined and it has improved our overall services as everyone has the information they need when they begin the partnership.
- Our plan is to incentivize parent referrals for EHS. Parents who refer a family who ends up enrolling will receive a gift card (donated from outside sources).
- We would like to start a “wish well” committee that would provide support to staff throughout the year by planning activities and providing encouragement.

Updates

Child Care Provider Partner Slots

In order to be fully enrolled, child care provider partners must be onboarded. Part of the challenge has been the loss of child care providers in the community overall. St. Joseph County is nearly a child care desert; for every spot available in the community, 2.8 children are vying for it.

What	Who	When	Updates	Update 2024-25
Support new providers in opening a family child care home	EHS staff	9/30/25	We will work to secure 2 more providers to be prepared to service our EHS families. By September 2025 we will have 2 more onboarded and ready to service families.	We have brought on 2 new providers this past year (1 center and 1 home provider) and we have 2 more we are getting started.
Continue to explore other program options such as additional home visitation or a locally designed option	EHS staff	9/30/25	The program added services to pregnant women as a program option in 2023-24.	We are continuing the pregnant women program option.

Low attendance

Prior to the pandemic, the program stayed at or above the 85% threshold for overall attendance. Once the pandemic hit, the attendance rates decreased. In 2023-24 59% of children exhibited chronic absences throughout the year. In 2024-25 36% of children showed severe absences throughout the year.

What	Who	When	Updates	
Family Advocates will continue to monitor monthly attendance by ChildPlus report and during care	Family Advocates and H/D Specialist	Monthly	This is reported on the care management document. Family Advocates also text providers weekly to	Family Advocates are checking in with families and providers when there is an absence. Our Early

management meeting			remind them to put in attendance if it is not in when they check and to check on any children that had more than one absence on the report.	Childhood Executive Assistant ensures all providers are inputting attendance each week.
Pull attendance percentages by month and analyze by site what is happening	Family Advocates and H/D Specialist	3/2025 and monthly	Continuing to pull attendance and work with families on obstacles.	Family Advocates are monitoring absences monthly.

Father engagement

The team reviewed the Program Information Report data on father engagement. The baseline data collected for the 2023-24 school year is: the highest percentage of fathers 33% (28% in 2023-24) participated in the child development services, followed by 25% (24% in 2023-24) in family assessment; 25% (24% in 2023-24) in family goal setting; 6% (1.4% in 2023-24) in program governance; and 6% (1.2% in 2023-24) in parenting education workshops. We made gains in all of the areas last school year, but we will continue to focus on male engagement this next year.

What	Who	When	Updates	Update 2024-25
Collecting Male Engagement data effectively and ongoing	EHS Staff with T/TA	4/30/23	The program shifted how they gather information at home visits and conferences to capture the male involvement that is happening. We are continuing to collect this data.	We were able to collect more data and we also had more male involvement this past year.
Explore avenues for male role models	EHS Staff	9/30/25 and ongoing	The education team met with Jenny our T/TA and discussed that all male role models in the home and community can	Our EHS Coordinator was able to increase male engagement at our Parent events/meetings

			be part of this. The program includes community members that are males in events when possible. We hired an EHS Coordinator this past year who is focusing on getting more male engagement	going from 1-2 attending meetings/events to 5-10 male role models attending our parent events/meetings.

Supporting children in foster care

On average, the program enrolls about 25% of children in foster care. The team wanted to review and explore how we can best support children who are in foster care, with particular consideration of both the foster care families and the biological families when the goal is reunification. Through the self-assessment process, the program wants to continue to strengthen this area to ensure the highest quality care for all children.

What	Who	When	Updates	Updates 2024-25
Develop policy and procedure on supporting children in foster care including transitions to another home, care management role, authorizations to share information	Family Advocates Care Management Team	9/30/25	We have started the policy/procedure but it isn't completed yet. We are still gathering information from Foster Care workers and our Grantee Specialist for support.	We have not completed the Foster Care policy due to gathering contradictory information from other EHS programs. We will continue to explore this option.
Training staff on confidentiality in foster care and bio parents situations	Child Development Specialist and Foster Care Workers	3/1/25	The staff were trained in Foster Care procedures and will continue to be given training in this area as staff turnover and as an annual reminder.	Staff were trained about Foster Care procedures and will get another training this upcoming year.

Non-Federal Share Match

This area was identified for improvement through the Focus Area 2 Monitoring process. The program will complete the Corrective Action Plan and wants to continue its focus on non-Federal share match with program staff and partners.

What	Who	When	Updates	Updates 2024-25
Continue to training to all EHS staff and onboard new staff on what qualifies for non-Federal share match	Director of Early Childhood Services	9/30/25	Early Head Start Providers and education staff were trained in non-Federal share match at the August 2024 meeting and will be trained annually on this issue.	Our Non-Federal Match collections have improved. We have more areas that we are collecting NFS in as well.
Test period non-Federal share waiver timing	Director of Early Childhood Services and Assistant Superintendent of Finance, Operations, and HR	Future period - Waiver requested for 24-25 budget period	Not yet applicable	It increased slightly but will still be requesting a waiver most likely due to reduced community partners and staff turnover.