Organizational Overview

For more than 100 years, the Center for Transforming Lives (CTL) has given women and their families the tools they need to move out of poverty and into independence. Founded in 1907 as the YWCA® of Fort Worth and Tarrant County, early programs included housing, an employment bureau, and child care for working mothers beginning in the 1930s. In 2015, the organization changed its name to the Center for Transforming Lives to more clearly articulate its longstanding mission. Today, we help women, children, and families on the path out of poverty and into self-sufficiency by providing safe and affordable independent housing, early childhood education, and financial empowerment services, including one-on-one financial coaching, matched savings, and job training and placement. With its two-generation trauma-informed approach, the organization is uniquely positioned to meet the intensive and complex needs of women and children in poverty.

Child Development Program Overview

The primary goal of CTL’s Child Development Program is to increase the school readiness of young children. The first 5 years of a child’s life marks a critical period of brain development. Beginning at birth, a child’s brain takes in an abundance of information and immediately begins using it to develop the cognitive, physical, linguistic, and social-emotional abilities she will need to grow and thrive throughout her lifetime. Young children need nurturing, low-stress environments filled with language, learning, physical activity, and positive social interactions. Parents and families are the first source for children to receive the care they need. However, with approximately 70% of children under the age of 6 in Tarrant County living in single parent or dual-earner households¹, our community also needs child care environments to be strong sources of support in order for parents to work and children to succeed. Moreover, providing high quality, affordable child care and early childhood education for impoverished children and their families makes good economic sense².

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¹ U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates
CTL has an 87-year history of fostering healthy growth and development for children ages 6 weeks to 5 years through positive relationship-building, literacy-rich early education, and daily access to healthy foods and physical activity. Recognizing the transformational impact that high-quality child care has in the lives of impoverished children\textsuperscript{3}, our Child Development Programs are designed for children in working poor and homeless families. Because cost is a significant barrier, private and public child-care subsidies cover full tuition for homeless children and partial tuition for low-income children based on ability to pay.

Our three centers, one located in downtown Fort Worth, one in the high-poverty community of Polytechnic Heights in southeast Fort Worth, and one in central Arlington on the campus of the University of Texas at Arlington, have a combined daily capacity to serve 242 children from infancy through pre-kindergarten. CTL has also partnered with Texans Can Academy and Allstars Learning Centers in Arlington and Fort Worth which provide services for an additional 64 children. In total, CTL and their program partners have a combined daily capacity of 306 children.

In March 2015, CTL was selected to receive a federal Early Head Start-Child Care Partnership (EHS-CCP) grant, which funds child care services for 64 homeless and low-income children ages 0-36 months and their families, including pediatric health, mental health, nutrition supports, and intensive case management provided by three full-time Family Advocates (i.e. family service workers). In 2017, CTL was awarded an expansion to this grant, serving an additional 72 children and families in three additional locations. Furthermore, CTL offers parent education, family engagement activities, and resource referrals to help parents promote their children's healthy development and literacy outside of the classroom. One of these educational opportunities is Parent Cafés an evidence-based program approved as part of the state’s initiatives to address the high rate of child abuse and neglect in Texas, are open to all families enrolled in CTL and partner child care centers. It is a peer-to-peer learning model that focuses on strengthening families from the inside out. These comprehensive services are especially helpful for families who have children with disabilities and may need additional support to help their children.

CTL is committed to serving the most vulnerable of children and families despite the challenges it comes with and the resources it may take to ensure they are set up for success in life. This past year CTL served more children (311 to 392), but with more of them experiencing poverty and homelessness than in prior years. 100% of the Early Head Start (EHS) children were from low-income families, including 41% who were experiencing homelessness. For the first time through the generous support of The First Street Methodist Mission, homeless or formerly homeless children older than three, the age at which eligible children are unable to transition into a Head Start program due to a long waitlist, are able to enroll at Rosie K. Mauk’s center. Rosie K. Mauk alone saw an increase in the percentage of children experiencing homelessness from 32% to 44% from the prior year.

While poverty and homelessness are significant stressors, 27% of children and families in the EHS program also experienced at least one emergency or crisis event, 16% received child abuse

\textsuperscript{3} Li, W., Farkas, G., Duncan, G. J., Burchinal, M. R., & Vandell, D. L. (2013). Timing of high-quality child care and cognitive, language, and preacademic development. \textit{Developmental Psychology}, 49(8), 1440-1451
or neglect services, and 4% of children were placed in state care due to abuse or neglect. Of the 16 EHS children enrolled in the Allstars – Arlington site, 10 are from refugee/immigrant families. In addition to the combined effects of poverty, homelessness, abuse and/or neglect, and other risk factors, many of the children we serve are also diagnosed with developmental delays. At Rosie K. Mauk and Polytechnic centers, 25% of Early Head Start children were determined eligible to receive early intervention services under the Individuals with Disabilities Education Act, as well as 17% of the EHS children at Texans Can Academy.

Program Goals and Strategies

The Child Development Programs serve a dual purpose. First, the child development centers offer high-quality early education to foster individual learning at every stage, from infancy through pre-kindergarten. Dedicated teachers help children develop the social-emotional, cognitive, physical and language skills they need for successful transition to pre-kindergarten and kindergarten. Research shows that 85% of a child’s brain is developed within the first 3 years of life. For children experiencing poverty and homelessness, a lack of consistent, focused care and engagement in early learning activities can delay development, putting them years behind their more economically advantaged peers even before the first day of kindergarten.

To help close the gap, CTL’s three Child Development Centers and their three partners offer nurturing care, positive relationships, and literacy-rich learning environments for impoverished children as young as 6 weeks old through pre-kindergarten graduation. All classrooms are child-centered, with plenty of one-on-one attention and support given to each child; frequent group activities to strengthen social skills and build community; books, toys, and other learning materials organized on small-scale shelving for children’s easy access to ignite a love of learning; and daily, healthy meals (breakfast, lunch, and an afternoon snack) and outdoor time to fuel children’s physical growth and development.

CTL’s teachers as well as teachers at partner organizations structure classroom daily lesson plans using the Frog Street Press curriculum for Infants, Toddlers, and Pre-Kindergartners – designed to provide intentional learning opportunities on a developmentally appropriate continuum. Lessons are individualized using this curriculum to address any specific strengths or weaknesses observed in a child’s abilities or skills. Individualization is also supported by reviewing the results of Ages & Stages Questionnaires (ASQ), Third Edition, a developmental screener for children from 1 month to 5 1/2 years. All children are screened within the first 45 days of enrollment and the results suggest which children should be referred for further assessment. The companion activities book includes over 300 developmentally appropriate activities that both classroom staff and parents use to support children’s development and encourage parent/child interaction. Activities are divided by age range and developmental domain which ensures activities are tailored to a child’s specific need. ASQ:SE (Social-Emotional) is used in our EHSCCP program to accurately screen infants and toddlers and determine who would benefit from an in-depth evaluation in the area of social-emotional development. Parents complete the

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questionnaires specific to their child’s age and if the results warrant a further, full evaluation, they are referred to MHMR Early Childhood Services.

Second, as part of a dual-generation approach to poverty reduction, the Child Development Programs are offered year-round, Monday through Friday, from 6:30am to 6:00pm to give parents the time and support they need to find and maintain work or further their education to strengthen their family’s financial stability and well-being. The Early Head Start Family Advocates (FA’s) work directly with families to support family goals and outcomes that focus on areas that are critical to reducing poverty such as helping them meet their basic needs, improved health, adult education and employment, financial literacy, healthy parent-child and other family relationships and community connections. Family Advocates provide effective case management that involves coordinating linkage of families to referrals and resources, evaluating progress with actions and strategies while engaging and supporting the family (Transforming Lives Scale-Family Assessment). Family Advocates meet formally with the parents to set goals and to assess progress on reaching their goals. Additionally, FA’s meet informally with parents in the child care centers on a frequent basis to discuss their child’s development, school attendance, and health issues. These informal meetings are also a rich source of information regarding family stability and give clues to new or ongoing stressors, changes in employment, health and other concerns. The unique structure of CTL allows the Family Advocates to coordinate with our Housing, Financial Empowerment and Career Coaching services for a seamless approach to supporting the families’ goals toward self-sufficiency.

CTL’s integrated services, which include Housing and Financial Empowerment, are designed to help the whole family become sustainably independent. All parents and guardians have access to free one-on-one financial coaching to begin developing the skills they need to become financially stable and improve the family’s economic well-being. In addition, CTL offers Rapid Re-Housing, which is designed to quickly move families out of emergency shelters and into their own homes, providing safety and stability.

Program leadership is provided by the Director of Child and Family Services, with day-to-day management at each site provided by three Center Directors. Across the centers’ 19 classrooms, 49 teachers guide, teach, feed, nurture, and care for the children and commit themselves to the children’s healthy development. Through partnership with the Arlington Independent School District, two pre-Kindergarten classrooms for 3- and for 4-year-olds at the Arlington Child Development Center are led by a full-time teacher certified by the Texas Education Agency. Partnerships with Allstars Learning Centers Arlington and Fort Worth, as well as Texans Can Academy, add an additional 8 classrooms and 20 teachers.

Evaluation

CTL uses Teaching Strategies GOLD® – an evidence-based, online assessment system for measuring children's learning and developmental progress. It has the capacity to measure progress and early childhood outcomes for children from 6 weeks to 6 years of age. Specifically, it is able to assess the following developmental domains and learning content:

- Social-Emotional Development
- Physical Development
- Language Development
- Cognitive Development
- Literacy
- Mathematics

The assessments are based on teachers’ daily observations of each child’s knowledge and capabilities, and feedback from parents’ observations of their children’s skills and abilities. Teachers then identify individualized goals and strategies to help each child reach milestones, and provide specific data, tools, and resources to their families to work collectively toward the child’s school readiness.

CTL also tracks and analyzes children’s attendance. Regular attendance is necessary to receive the full benefits of early childhood education and is a major indicator of children's future success at school. CTL’s desired measurable outcome is a monthly average daily attendance rate of 85% or higher, which aligns with EHS guidelines and expectations. The data is also used by Family Advocates to identify and engage families who need individualized support to overcome obstacles to maintaining regular attendance.

Family Advocates also use CTL’s Transforming Lives Scale with EHS-CCP families to help identify the specific barriers they face to achieving self-sufficiency and develop action plans with measurable steps to remove the obstacles and achieve targeted outcomes.

**Methodology**

The evaluation process of the children and families in CTL’s Child Development Centers includes three main components: 1) Teaching Strategies GOLD®, 2) attendance, and 3) the Transforming Lives Scale.

Teaching Strategies GOLD® measures children ages 0-5 years across 36 objectives organized into six domains: 1) social-emotional development, 2) physical development, 3) language development, 4) cognitive development, 5) literacy, and 6) mathematics. Each domain has several objectives. For example, the domain social-emotional development has the objective, “regulates own emotions and behaviors.”

Children are observed in the context of their everyday experiences and teachers document how these observations relate to objectives.

Teachers review the data on a regular basis to track learning progression, prevent gaps, and respond to developmental and learning delays as early as possible. New students are assessed after they have been in the program for 10 days and progress checkpoints occur every 4 months. Program leadership reviews and analyzes all aggregated data at four checkpoints during the year.

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7 EHS-CCP students and families are the most vulnerable in our population. Therefore, the Transforming Lives Scale is only used with them.
(August/October/January/May) and work with teachers to adjust the curriculum based on the needs of the students.

Furthermore, as part of the evaluation of the two-generation approach, CTL uses the Transforming Lives Scale – an instrument designed to measure family’s progress on their journey from poverty to independence. This scale is completed with families who have children enrolled in our EHS-CCP program. A Family Advocate works with each family to complete the scale, which measures 15 domains: transportation, access to child care, housing wage, education, grit/self-efficacy, assets, income, employment, mental health, physical health, legal, life skills, substance abuse, safe relationships, and natural supports. Family Advocates complete the initial scale with the family approximately 1 week after program admission. The scale is then completed every 4 months until program completion or exit.

The TS GOLD® assessment was administered to all children enrolled during the 2018-2019 program year (September 1, 2018- August 31, 2019). As the TS GOLD® assessment is used to indicate which children are on-level for their age/grade, only children with complete assessments in the Spring of 2019 were included in the results.

Additional data (including average attendance, length of stay, and Transforming Lives Scale results) is analyzed for children who were continuously enrolled for a minimum of a six month period. Of the unduplicated 41 EHS children enrolled at the partner site Texans Can Academy, 16 were continuously enrolled for 6 months.

**Results**

The total number of children served across all six centers from September 1, 2018 thru August 31, 2019 was 392 children (Figure 1).

*Figure 1*

![Number of Students by Center](chart)

Nearly half of the students were black/African American, with almost a quarter of all students being of Hispanic ethnicity (see Figure 2). The percentage of children in each age group was fairly evenly distributed with slightly fewer older children and slightly more young children, which is to be expected (Figure 2c).
Figure 2

**Child Race**
- Black/African American: 45%
- Anglo/White: 40%
- Asian: 2%
- Multi-racial: 6%
- Other: 4%
- Unknown: 3%

**Child Ethnicity**
- Hispanic: 23%
- Non-hispanic: 77%

**Child Age**
- Infants (6 wks. -17 mos.): 18%
- Toddlers (18 mos. - 3 yrs.): 43%
- Preschool (3-5 yrs.): 35%
To determine if the students were properly prepared, the percentages of students meeting or exceeding expectations on the Teaching Strategies GOLD® assessments were calculated (see Table 1). For example, as of May 31, 2019 (the date of the final checkpoint for the 2018-2019 academic year), of toddlers aged 18 months to three years, 91% met or exceeded the social emotional development goals. When looking at overall performance across age groups, 87% met or exceeded the cognitive development goals, 84% for the social-emotional development domain, and 81% in the literacy content area.

Table 1

<table>
<thead>
<tr>
<th>Domain</th>
<th>Infants</th>
<th>Toddlers</th>
<th>Pre-K</th>
<th>All Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social-emotional</td>
<td>62%</td>
<td>91%</td>
<td>79%</td>
<td>84%</td>
</tr>
<tr>
<td>Physical</td>
<td>62%</td>
<td>83%</td>
<td>78%</td>
<td>79%</td>
</tr>
<tr>
<td>Language</td>
<td>62%</td>
<td>76%</td>
<td>81%</td>
<td>76%</td>
</tr>
<tr>
<td>Cognitive</td>
<td>95%</td>
<td>88%</td>
<td>84%</td>
<td>87%</td>
</tr>
<tr>
<td>Literacy</td>
<td>100%</td>
<td>85%</td>
<td>70%</td>
<td>81%</td>
</tr>
<tr>
<td>Mathematics</td>
<td>100%</td>
<td>79%</td>
<td>70%</td>
<td>78%</td>
</tr>
</tbody>
</table>

Children Enrolled in Our Early Head Start-Child Care Partnership Program

Children ages 0-3 enrolled in our EHS-CCP program represent the most vulnerable population our child development centers serve. Table 2 below provides the developmental and learning outcomes of our children in our EHS-CCP classes. Notably, cognitive and literacy were two of the domains in which the highest percentages of children in EHS-CCP classes met or exceeded widely held expectations at each of the centers.

Table 2

<table>
<thead>
<tr>
<th>Domain</th>
<th>Social-emotional</th>
<th>Physical</th>
<th>Language</th>
<th>Cognitive</th>
<th>Literacy</th>
<th>Mathematics</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARL</td>
<td>83%</td>
<td>89%</td>
<td>83%</td>
<td>100%</td>
<td>94%</td>
<td>67%</td>
</tr>
<tr>
<td>RKM</td>
<td>46%</td>
<td>46%</td>
<td>46%</td>
<td>85%</td>
<td>85%</td>
<td>85%</td>
</tr>
<tr>
<td>POLY</td>
<td>95%</td>
<td>90%</td>
<td>55%</td>
<td>90%</td>
<td>95%</td>
<td>55%</td>
</tr>
<tr>
<td>ALLSTARS ARL</td>
<td>50%</td>
<td>50%</td>
<td>63%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>ALLSTARS FW</td>
<td>89%</td>
<td>84%</td>
<td>89%</td>
<td>100%</td>
<td>95%</td>
<td>95%</td>
</tr>
<tr>
<td>TEXANS CAN</td>
<td>100%</td>
<td>85%</td>
<td>90%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>All Centers</td>
<td>80%</td>
<td>76%</td>
<td>73%</td>
<td>96%</td>
<td>95%</td>
<td>83%</td>
</tr>
</tbody>
</table>
**Kindergarten Readiness of “Graduating” Children**

Teaching Strategies GOLD® is used to measure the school readiness of children who were age-eligible to graduate from our centers into kindergarten. A majority of age-eligible children *met* or *exceeded* the school readiness standard in the language and cognitive domains. However, literacy and physical skills need particular attention because just more than half of the children *met* or *exceeded* expectations in this domain (Table 3).

- **Table 3**

<table>
<thead>
<tr>
<th>Children who were age appropriate for kindergarten (PreK 4/5) who met or exceeded the GOLD® school readiness standard at the end-of-year checkpoint, by domain (N=32)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social-emotional</td>
</tr>
<tr>
<td>59%</td>
</tr>
</tbody>
</table>

**Attendance**

Overall, children enrolled at CTL centers attended 88% of operating days, exceeding the attendance goal of 85%. Children enrolled in the Arlington Child Development Center met or exceeded the desired 85% average daily attendance goal in 7 out of 10 months between September 2018 and August 2019. The Rosie K. Mauk Child Development Center met or exceeded the attendance goal for 4 out of 10 months and the Polytechnic Child Development Center also met or exceeded the attendance goal for 4 of 10 months. Early Head Start children in the Allstars partner centers (Arlington and Fort Worth) achieved 95% attendance average for the year; in the CTL EHS Arlington classrooms they achieved 88% attendance average for the year. Although Rosie K. Mauk and Texans Can Academy achieved less than 85% attendance average for the year, they also have the highest number of children enrolled who experienced homelessness.

<table>
<thead>
<tr>
<th>Yearly average daily attendance rate (234 days) Of children in our EHS-CCP program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yearly Actual Enrollment Attendance</td>
</tr>
<tr>
<td>Allstars Arlington</td>
</tr>
<tr>
<td>Allstars FW</td>
</tr>
<tr>
<td>Arlington</td>
</tr>
<tr>
<td>Polytechnic CDC</td>
</tr>
<tr>
<td>Rosie K. Mauk</td>
</tr>
<tr>
<td>Texans Can Academy</td>
</tr>
<tr>
<td><strong>Goal Met</strong></td>
</tr>
</tbody>
</table>

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8 Note that December and March tend to be lower attendance months due to winter holidays and Spring Break.
Length of Stay

Recognizing the importance of children receiving continuous high-quality early childhood education and care over time, CTL’s goal is that more than 50% of all children in our child development centers will achieve a length of stay (i.e., enrollment) of 6 months or more (CTL partner sites are not included in the length of stay data). Each of our three centers exceeded the length of stay goal (Table 4). Across all centers, 70% or more of children in the EHS-CCP program were consistently enrolled for at least 6 months.

Table 4

<table>
<thead>
<tr>
<th></th>
<th>Arlington</th>
<th>Rosie K. Mauk</th>
<th>Polytechnic</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHS-CCP</td>
<td>25 (81%)</td>
<td>16 (70%)</td>
<td>30 (77%)</td>
<td>71 (76%)</td>
</tr>
<tr>
<td>All</td>
<td>114 (73%)</td>
<td>70 (65%)</td>
<td>30 (77%)</td>
<td>214 (70%)</td>
</tr>
</tbody>
</table>

Families of Children Enrolled in Our Early Head Start-Child Care Partnership Program

Knowing that there is no effective educational solution for children in poverty that does not include solutions for parents and families, CTL intentionally increased its depth of family services and advocacy in the 2017-2018 program year and has continued to do so and measured the impact of our efforts using our Transforming Lives Scale. Since September of 2018, 93% of primary caregivers of children ages 0-36 months enrolled continuously for a minimum of 6 months in our EHS-CCP program have shown improvement of one level in 3 or more of the 15 domains on the Transforming Lives Scale-Family Assessment. For the families of children in our EHS-CCP program, the improvement reported for the various domains included the following:

- In our Arlington Center, 58% of families saw an improvement in Employment Stability, 41% increased in Physical Health, and 81% of families improved in at least 5 domains.
- In our Rosie K. Mauk Center in downtown Fort Worth, 20% of families saw an improvement in Transportation, 23% improved in the Physical Health domain, and overall 100% of families improved in at least 3 domains.
- In our Polytechnic Center in southeast Fort Worth, 52% of families improved in the Education domain and 80% of families improved in 3 or more domains.
- At our partner site Allstars in Arlington, 100% of families saw an increase in Income and 99% of families improved in 5 or more domains.
- At our partner site Allstars in Fort Worth, 100% of families saw an increase in Income, 80% increased in Employment Stability and Grit, and 99% of families saw an improvement in 3 or more domains.
- At our partner site Texans Can Academy, 100% of families saw an increase in Income, 20% improved in Employment Stability, and 86% of families improved in 3 or more domains.
Furthermore, familial stability is indicated when children have a medical home, a primary care physician or medical group to which the child is assigned. 93% of the children in the EHSCCP program were enrolled in a medical home.

**Recommendations and Actions Based on Findings**

Due to program expansion and inclusion of community partners we have been able to increase our number of children served by 26%. Children in our child development programs performed well on the end of year TS GOLD® assessment with the majority in each domain meeting or exceeding expectations. Overall, 87% met or exceeded the cognitive development goals, 84% for the social-emotional development domain, and 81% in the literacy content area. Our families also saw improvements this past year with many reporting increases in Employment Stability and Income. Though these successes are undoubtedly valuable to the children and families who achieved them, we will continue to strive for even greater improvements in child and family outcomes in the coming year.

In order to further improve instruction and outcomes, we have identified areas of focus for the 2019-2020 academic year:

To better serve children and families in our Early Head Start program, there will be an increase in Parent Cafés, parent education and support workshops. Parent education workshops will focus on meeting the needs of the families in the areas of parent-child relationships, fostering literacy at home, healthy child growth and development, and coping with stress. Additionally, to support the increased number of Early Head Start children with an identified disability, a mental health/disability specialist has been hired to work with families and children to support the Individualized Family Service Plan (IFSP) provided by the Early Childhood Intervention program (MHMR-ECS). The specialist will also work with classroom teachers to ensure they are prepared to fully integrate the IFSP and work collaboratively with the families.

Regular attendance is necessary to receive the full benefits of early childhood education and is a major indicator of a child's future success in school. Specifically, the goal was a monthly average daily attendance rate of 85% for 10 out of 12 months at each center (December and March are historically low enrollment months due to holidays and spring break and therefore, are not included in the attendance analysis). Unfortunately, that goal was not met by the CTL child development centers, though there were successes and improvements over the prior year.

Rosie K. Mauk and Polytechnic centers have a high percentage of children experiencing homelessness and this has a negative impact on their attendance goal. For children residing in homelessness, there are daily challenges of transportation, shelter demands on the parent’s time, and frequent illnesses. In the coming year, CTL plans to work more closely with community partners that provide shelter and rapid re-housing to communicate the importance of attendance for the children they serve, dispel any misunderstandings about attendance (children may attend even if they arrive later in the morning) and identify ways to facilitate increased attendance. Early Head Start will supply bus tokens to eligible families and all families will be eligible to

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apply for assistance with one-time barriers that prevent them from working regularly (uniforms, car inspections, etc.). CTL staff will review attendance data regularly and identify students with chronic absences. Parent education, individually and in group settings, will continue to focus on why regular attendance is important and the long lasting impact it has on a child’s educational attainment. Health and wellness is important not just for attendance but also for a child’s ability to focus and learn when in the classroom. Children under the age of three have a higher than normal rate of illness and this issue is tackled through parent and staff education, including a year-round Hand Washing Awareness project. Additionally, family Advocates encourage EHS families to secure a Medical Home and to regularly participate in well-child visits, as a strategy to prevent illness and in turn boost attendance.

The results of the TS GOLD® assessment indicate that nearly all of the EHS-CCP students across all 6 centers are meeting or exceeding expectations in the cognitive and literacy domains. An additional Education Coordinator and Coach have been added to the Early Head Start Staff which will allow staff more time to individualize education and coaching support provided to the Early Head Start teachers. Coaches will continue to regularly provide on-site mentoring and assist the teachers in best practices for the TS GOLD® assessment and the data that it provides about each child’s individual strengths and weaknesses. They will provide detailed training to ensure that all teachers are knowledgeable about the assessment program, accurate when observing and assessing the students, and know how to use their data to identify areas for additional instruction.

The Kindergarten Readiness results were disappointing and much lower than in previous years. After a careful review of the data, several issues were identified that most likely contributed to the lower than expected outcomes. Of the 32 children “graduating” pre-kindergarten children, 11 (34%) were living in homelessness at some time during the program year, a much higher percentage than in prior years. The trauma and uncertainty of living in homelessness, especially for young children, has a negative impact on their ability to focus in the classroom, participate fully in activities and develop friendships with their peers. Additionally, their rate of attendance is low which further complicates their ability to integrate into the classroom learning environment. Opportunities for children living in homelessness to develop their fine and gross motor skills outside of the classroom are limited and translate frequently into trying to “catch-up” to their peers.

To address the lower than expected developmental outcomes, all CTL center staff will complete Conscious Discipline and trauma-informed caregiving training to strengthen their abilities to recognize stress and trauma symptoms and to be better equipped to provide positive experiences that lead to a reduction of challenging classroom behaviors. TS GOLD training will focus on taking a team approach to reviewing and understanding individual child reports at each checkpoint. Classroom teachers and center management will review the individual reports, as well as the group reports, to spotlight developmental challenges specific to each child at each checkpoint, or earlier if classroom behaviors or achievement warrants.

Gross and fine motor skills are critical to school success and will need to be elevated in terms of time spent on them during the school day and staff must be more intentional in offering a wider array of activities that build specific muscle groups.