B. Continuous Quality Improvement (CQI) Process

SUMCD uses a planning process that is part of a total management system of self-assessment, goal planning, data collection/monitoring, reporting, and communication. The graphic on the next page represents the SUMCD agency planning process, adopted from the Head Start Planning Model. The diagram consists of an outer circle connected to a smaller inner circle and to boxes that name each step in the cycle. Arrows lead from one step to the next, showing the sequence of the steps. Many of the steps occur repeatedly throughout the cycle. Below is a list of the steps in the planning cycle and a brief description of each.

1. **Conduct Self-Assessment**: This step is the first (and last) in the cycle. The information from the Self-Assessment informs the goal-setting process.

2. **Conduct Community Assessment**: This step is not included within the planning process itself, although it is an important step in the planning cycle. The Community Assessment is updated annually as part of the preparation of the HS grant renewal process and informs the next Self Assessment cycle. The Community Assessment is comprehensively conducted for the first year of the multi-year Head Start/Early Head Start Grant cycle and updated annually thereafter.

3. **Set Goals**: Long and short term goals are developed based on the information gathered from their Self-Assessment and Community Assessment.
   - **SUMCD Long Range Plan**: The SUMCD Long Range Plan is developed every three years following completion of the comprehensive Self Assessment. Goals are based on input from staff, management, enrolled parents, Policy Council, and Board members and serve as a guide to the Agency’s Continuous Quality Improvement (CQI) Plan. The Plan is approved by Policy Council and the Board. The Plan is reviewed as part of the annual Self Assessment and development of the annual CQI Plan. See ATTACHMENT II-A for the current SUMCD Long Range Plan.
   - **SUMCD Annual CQI Short Term Goals**: An annual CQI Planning process reviews current Self-assessment information, evaluates progress on the Long Range Plan goals and the previous year’s CQI goals, and develops the CQI Short Term Goals for the upcoming year. See ATTACHMENT II-B for the current SUMCD CQI Plan.

4. **Communicate Goals to Stakeholders**: SUMCD communicates the goals to all relevant stakeholders as follows:
   - Website
   - Director’s Report
   - Newsletter
   - Policy Council Minutes
   - Board Minutes.

5. **Develop a Plan of Action and a Budget That Supports the Goals**: The goals are translated into action through a plan that describes the actions the program
will take to realize its goals, along with timelines, persons responsible, and evidence of success.

6. **Implement the Plan of Action:** Throughout the year, programs carry out the activities included in their plans. They collect data to illustrate what they are doing and how they are progressing toward their goals.

7. **Evaluate Progress Through Ongoing Monitoring:** As they are implementing the plan, staff members are using their monitoring system to evaluate progress toward reaching program goals. This process is ongoing throughout the year.

8. **Continually Respond with Mid-course Corrections:** The ongoing monitoring process may lead to mid-course corrections if the program is not making progress toward its goals.

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**Data Driven Decision Making:**
SUMCD has established processes and procedures to support the use of data in each step of the planning cycle. Through federal and state grants, SUMCD has invested in hardware, software, and staff training to enable data input at the point of service and support data monitoring and synthesis. By continued improvement and refinement of its Information Technology system, SUMCD has access to timely, accurate demographic information and child and family assessment and outcome data.
Below is a list of the steps in the planning cycle, along with the data activities that occur at each step.

1. **Evaluate Progress Through Self-Assessment**
   a. Assess annual progress in achieving goals and objectives
   b. Assess the effectiveness of systems and services
   c. Examine trends and patterns
   d. Communicate results to internal and external audiences

2. **Community Assessment**
   a. Analyze data
   b. Share conclusions
   c. Communicate results to internal and external audiences

3. **Develop Long and Short-Term Goals**
   a. Ensure that goals reflect conclusions from key data sources (e.g., Community Assessment, child records)
   b. Communicate Goals to stakeholders

4. **Develop a Plan of Action and a Budget That Reflect Goals**
   a. Determine evidence
   b. Determine data-collection methodologies
   c. Adjust record-keeping and reporting systems

5. **Implement Plan of Action**
   a. Use record-keeping and reporting systems to collect data
   b. Check the integrity of data (e.g., supervisors monitoring of reports)
   c. Discuss reports with internal audiences at regular intervals

6. **Evaluate Progress Through Ongoing Monitoring**
   a. Aggregate and review attendance data to identify trends
   b. Analyze select data on a scheduled basis, such as by center, program option, staff, and enrollment status
   c. Draw conclusions
   d. Communicate findings with internal audiences

7. **Continually Respond with Mid-course Corrections**
   a. Use record-keeping and reporting systems to collect data
   b. Monitor the integrity of data
   c. Communicate data findings and next steps to internal audiences

The planning process within the Head Start (HS) and Early Head Start (EHS) programs’ planning occurs within the total management systems of SUMCD and is a part of the periodic Long Range Plan and annual CQI Plan. The planning process for HS/EHS also follows the grant application requirements as defined by the U.S. Department of Health and Human Services (HHS). The main components of the HS/EHS planning process are detailed in the SUMCD Annual Self-Assessment Plan chart. (See ATTACHMENT II-C). The Planning Process is reviewed and revised annually by the Management Staff and approved by the Policy Council and the Board of Directors.

Management Staff are assigned sections of the planning process and other staff and stakeholders are identified to provide input into those sections. The assigned managers submit summaries of their assigned sections, which are consolidated into the annual Self-Assessment Report. The Self
Assessment Report consists of the following three parts:

a. Part I is a follow-up to the previous year’s improvements and outcomes.

b. Part II is a report of the identified needs (and HS/EHS compliance issues if applicable) and SUMCD’s response to those needs in the areas of:
   i. Training,
   ii. Program/management improvements, or
   iii. Materials/equipment/facility improvements).

c. Part III is a report of outstanding findings.

The Self-Assessment Report, most recent Community Assessment, and other relevant information are used to draft the agency’s Long-Range Plan and annual Continuous Quality Improvement (CAI) Plan/Short Term Goals, and Professional Development Plan.