

Foster Grandparents Performance Measurement Work Plan and Instrument

Head Start Service Activity

This packet contains:

- **Performance Measurement Work Plan** (page 1)
- ***Foster Grandparent Program Assignment Plan/Instrument (Head Start) Instrument and Instructions*** (page 3)
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Project STAR (800-548-3656) is available to answer questions about the instruments, data collection, analysis and reporting.

Tell us about your experience using these materials. We hope to hear from you soon!

Work Plan: FGP in Head Start Programs
Service Category: School Preparedness
Issue Area: Education

COMMUNITY NEED: Head Start of (enter service area) serves more than (enter number) low-income and at-risk infants and toddlers, pre-school children and their families annually. According to Federal Head Start Performance Standards, all Head Start programs are required to complete developmental screenings to identify children who may be in need of disability services. Developmental screening tools that meet standard and norms are: Ages and Stages, First Steps, Brigance, and Lap D. These tools address domain areas of: cognitive, language/communication, social/emotional, fine and gross motor. (Enter service area) Head Start staff using the (enter screening method used to determine deficiency), will identify children needing extra assistance with specific delays and/or disabilities. Without intervention the identified children will not acquire the skills necessary to be successful in school. Extensive resources and funding for one-on-one intervention is not available; therefore, Foster Grandparents will provide the needed support.

*Additional information or details relating to **community need** in county/service area:*

SERVICE ACTIVITY: Under the supervision of the classroom teacher, Foster Grandparents will assist (enter number) Head Start children to improve their individual skill development and educational needs by engaging them, one-on-one, in activities such as (enter activities volunteer will perform with their assigned children). These activities will happen (enter # of times a week).

*Additional information or details relating to **service activity** in county/service area:*

ANTICIPATED INPUT: (Enter number) Foster Grandparents will serve an average of (enter number) hours annually. (Enter name of program) Foster Grandparent Program will provide (list all supports, ie: 40 hours in-service training, on-going consultation, recognition and other benefits). Head Start will provide (list all supports, i.e. additional training with staff on appropriate classroom practices and language, positive discipline, Head Start philosophy, and planning for individual children assigned, daily supervision, meals and transportation); valued annual in-kind contribution totals (enter dollar amount) per Foster Grandparent.

*Additional information or details relating to **inputs** in county/service area:*

ANTICIPATED ACCOMPLISHMENTS/OUTPUTS: (*Enter number*) Head Start staff-identified children with delays/disabilities will receive one-on-one assistance from Foster Grandparents.

Indicator: Number of children assigned to Foster Grandparents to receive one-on-one support and assistance.

Target: (*Enter number*) Head Start staff-identified children will be matched with a Foster Grandparent to receive one-on-one assistance throughout the school term.

Instrument: Foster Grandparent Program Assignment Plan/Instrument, Section A will be completed by Head Start staff.

ANTICIPATED INTERMEDIATE IMPACT/OUTCOMES: Children receiving one-on-one assistance will show improvement in their specific priority areas of development.

Indicator: Percent of assigned children who show at least a little improvement in two out of three identified priority areas.

Target: (*Enter percent i.e. 85%*) of assigned children receiving assistance will show at least a little improvement in two out of three identified priority areas by mid-year according to Head Start staff observation.

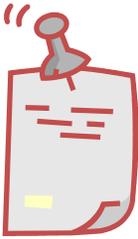
Instrument: Foster Grandparent Program Assignment Plan/Instrument, Section B. 1-9, Column III will be completed by Head Start staff.

ANTICIPATED END IMPACT/OUTCOME: Children assigned to a Foster Grandparent will be promoted to the next level.

Indicator: Percent of assigned children who were promoted to the next level

Target: (*Enter percent i.e. 90%*) of assigned children receiving one-on-one support will be promoted to next level.

Instrument: Foster Grandparent Program Assignment Plan/Instrument, Section B, #10, will be completed by Head Start staff providing yes or no response.



FOSTER GRANDPARENT PROGRAM ASSIGNMENT PLAN/INSTRUMENT (HEAD START)

A Note on the Design of this Instrument

The Foster Grandparent Program Assignment Plan/Instrument (Head Start) is designed to document the needs, activities, and desired results for up to four different children assigned to any one Foster Grandparent. The FGP Assignment Plan/Instrument records which children were assigned to the Foster Grandparent but not that they met regularly. It is recommended that the program/station also record the dates that Foster Grandparents work with the individual children.

Data to address the outcome targets are recorded in section B, column III, items 1 through 10.

Why can't I just ask "yes/no" questions?

The FGP Assignment Plan/Instrument asks Head Start staff to describe the extent to which Foster Grandparent's activities with assigned children improve specific priority areas of development. Since this varies from child to child, and activity to activity, scaled response choices rather than a simple "yes/no" option are used. This allows respondents to better express their answers.

Why can't I ask the Foster Grandparent to complete the assessment?

The expected outcomes have to do with the child's improvement in specific priority areas—areas where the Foster Grandparent provided assistance. Questions should be answered by a third party, someone with an impartial point of view who is in a position to observe the changes. The instrument should **ONLY** be completed by someone who is overseeing the Foster Grandparent-child match, such as the Head Start teacher.

**FOSTER GRANDPARENT PROGRAM ASSIGNMENT PLAN/INSTRUMENT
(HEAD START)
Instrument and Instructions**

Performance Measurement INTERMEDIATE OUTCOME: Children receiving one-on-one assistance will show improvement in their specific priority areas of development.

Performance Measurement END OUTCOME: Children assigned to a Foster Grandparent will be promoted to the next level.

Service Activity: Under the supervision of the classroom teacher, Foster Grandparents will assist Head Start children to improve their individual skill development and educational needs by engaging them, one-on-one, in specified activities.

Foster Grandparent Program Assignment Plan/Instrument (Head Start) Purpose, Preparation, Administration	
Who should complete this instrument	Head Start staff person; it is recommended that the same person complete all sections of the FGP Assignment Plan/Instrument.
Purpose of Instrument	To determine the extent to which Foster Grandparent's activities with assigned children improve specific priority areas of development and result in promotion to the next level.
Data Source	Head Start staff person
Training for person administering this instrument	Provide informal verbal instructions to Head Start staff person about how and when to complete the instrument, and where to turn it in.
When to complete this instrument	<ol style="list-style-type: none"> 1. At the beginning of the Foster Grandparent's assignment (Section A; Section B, Column I and II). 2. After a predetermined # of months (Section B, Column III, 1-9), for the intermediate outcome. 3. At the end of the year (Section B, Column III, #10), for the end outcome.
Other instructions and issues to consider	Before asking the Head Start staff person to complete the FGP Assignment Plan/Instrument, enter the date you would like the staff person to complete Section B, Column III (1-9) to collect data for the intermediate outcome at mid year.

FOSTER GRANDPARENT PROGRAM

Sample Assignment Plan/Instrument (Head Start)

Instructions: It is a federal requirement that all Foster Grandparents have an assignment plan for the children with whom they are assigned to work. The children they are assigned to must have documented exceptional or special needs, verified by an appropriate professional. Your organization should retain on file documentation of the verifying professional's qualifications to assess the children's needs. The Foster Grandparent is assigned to your organization to provide one-on-one assistance and perform duties based on needs of selected children.

Please complete all sections, documenting the child's needs, the activities you want the volunteer to perform, and the desired results of those activities. The completed assignment plan becomes the volunteer's "job description." Please review it with the volunteer to ensure that the required activities and the desired outcomes are understood.

The Foster Grandparent Program recognizes and respects the confidentiality of all of the children involved in the program. Please be assured that all of the information that you provide will only be used in aggregate and no specific child will be identified.

Foster Grandparent: _____

Service Schedule: _____

Volunteer Station/Site: _____

Supervisor's Name: _____

Period this plan covers: _____

A. List Child's/children's Name, Age, and Grade (if applicable) and Exceptional or Special Need:

Identify the child the volunteer will be working with during the period indicated above.

If, for reasons of confidentiality, you are unable to provide the full name of the child, please use the first name or a pseudonym. Keep in mind that the Supervisor and Foster Grandparent will need to be able to identify the child.

Child's Name	Grade	Age	Special or Exceptional Need Choose from the list below and include all that apply.
<i>Example:</i> 1. Anna Smith	N/A	3	SI, HI
1.			
2.			
3.			
4.			

Special or Exceptional Needs:

DD: Development

Delayed/Disabled

VI: Visually Impaired

SI: Speech Impaired

HE: Hearing Impaired

PC: Physically Challenged

ES: Emotional/Social

LC: Language/ Communication

LD: Learning Disabled

HI: Health Impairment

L: Literacy Needs

AN: Abused/Neglected

FC: In Need of Foster Care

AY: Adjudicated Youth

HY: Homeless youth

TP: Teen Parent

PI: Child in need of Protective Intervention

Other: _____

Instructions and Example for Completing Section B

Expected Outcome Area and Examples of Activities the Foster Grandparent will do with the child	EXAMPLE Child <i>Robert R.</i>		
	Complete at the beginning of the year		COMPLETE ON <i>week of 1/7/08</i>
	I	II	III
	Planned Activities: how often , and notes as needed (Indicate Frequency)	Check three priority areas ✓	Outcomes for priority areas: level of improvement Code 1, 2, 3, or 4
1. Cognitive: Learning, thinking <i>Activity: looking at books</i>		<input type="checkbox"/>	
2. Language: Speech, ESL <i>Activity: Tell stories, practice greetings</i>	Daily <i>-make up stories together using new words</i>	<input checked="" type="checkbox"/>	2
3. Social: Friendship, respect, teamwork <i>Activity: Model proper social skills</i>	2/3 times/wk	<input type="checkbox"/>	
4. Emotional: Self esteem, behavior, self-control <i>Activity: Encouragement, redirection, comfort</i>	Daily-model how to use words instead of fist when angry	<input checked="" type="checkbox"/>	4
5. Literacy: Colors, numbers, reading, math <i>Activity: Read stories, play number games, puzzles</i>	Daily-read to her (older child - "listen to her read")	<input checked="" type="checkbox"/>	3
6. Fine Motor: Cutting, drawing, buttoning		<input type="checkbox"/>	
7. Gross Motor: Walking, throwing balls, etc. <i>Activity: Assist with mobility/exercise</i>		<input type="checkbox"/>	
8. Self Help: Independence <i>Activity: Share meals/ help feed</i>	Weekly <i>-have lunch</i>	<input type="checkbox"/>	
9. Health <i>Activity: Wash hands</i>		<input type="checkbox"/>	
10. Complete at the END OF THE YEAR:	Was this child promoted to the next level? ✓ Yes ___ No		

Instructions for Completing Section B

1. Enter each child's name or identification number.

2. At the **beginning** of the Foster Grandparent assignment, complete Column I (Planned Activities) and Column II (Check if priority area):

- Column I. Indicate the activities the Foster Grandparent will do with the child by entering how frequently activities should occur: **daily; 2-3 times per week, weekly.**
In addition, for each identified activity area, note a few key tasks or activities that will be addressed.
- Column II: Check (✓) three areas that are a priority for the child— areas that the child needs the most help from the Foster Grandparent.

3. **After** the Foster Grandparent and child have been working together for **__# months**, complete Column III (Actual Outcome: Level of Improvement) using these **CODES**:

1= No improvement

2 = A little improvement

3 = Moderate improvement

4 = A great deal of improvement.

Respond to only those areas that were checked in Column II. It may take 5-10 minutes per child to complete Column III.

4. At the **end** of the year, answer the question in Row 10: "Was this child promoted to the next level?"

B. Planned Activities and Outcomes

Instructions for Completing Section B: 1.) Enter each child’s name or identification number. 2.) At the **beginning** of the Foster Grandparent assignment, complete Column I (Planned Activities) and Column II (Check if priority area): Column I. Indicate the activities the Foster Grandparent will do with the child by entering how frequently activities should occur: *daily; 2-3 times per week, weekly*. In addition, for each identified activity area, note a few key tasks or activities that will be addressed. Column II: Check (✓) three areas that are a priority for the child— areas that the child needs the most help from the Foster Grandparent. 3.) **After** the Foster Grandparent and child have been working together for # months, complete Column III (Actual Outcome: Level of Improvement) using these **CODES: 1= No improvement; 2 = A little improvement; 3 = Moderate improvement; 4 = A great deal of improvement**. Respond to only those areas that were checked in Column II. It may take 5-10 minutes per child to complete Column III. 4.) At the **end** of the year, answer the question in Row 10: “Was this child promoted to the next level?”

Expected Outcome Area and <i>Examples of Activities the Foster Grandparent will do with the child</i>	Child 1: _____			Child 2: _____		
	Complete at the beginning of the year		COMPLETE ON	Complete at the beginning of the year		COMPLETE ON
	I	II	III	I	II	III
	Planned Activities: how often , and notes as needed (Indicate Frequency)	Check three priority areas ✓	Outcomes for priority areas: level of improvement Code 1, 2, 3, or 4	Planned Activities: how often , and notes as needed (Indicate Frequency)	Check three priority areas ✓	Outcomes for priority areas: level of improvement Code 1, 2, 3, or 4
1. Cognitive: Learning, thinking <i>Activity: looking at books</i>		<input type="checkbox"/>			<input type="checkbox"/>	
2. Language: Speech, ESL <i>Activity: Tell stories, practice greetings</i>		<input type="checkbox"/>			<input type="checkbox"/>	
3. Social: Friendship, respect, teamwork. <i>Activity: Model proper social skills</i>		<input type="checkbox"/>			<input type="checkbox"/>	
4. Emotional: Self esteem, behavior, self-control. <i>Activity: Encouragement, redirection, comfort</i>		<input type="checkbox"/>			<input type="checkbox"/>	
5. Literacy: Colors, numbers, reading, math. <i>Activity: Read stories, play number games, puzzles</i>		<input type="checkbox"/>			<input type="checkbox"/>	
6. Fine Motor: Cutting, drawing, buttoning		<input type="checkbox"/>			<input type="checkbox"/>	
7. Gross Motor: Walking, throwing balls, etc. <i>Activity: Assist with mobility/ exercise</i>		<input type="checkbox"/>			<input type="checkbox"/>	
8. Self Help: Independence <i>Activity: Share meals/ help feed</i>		<input type="checkbox"/>			<input type="checkbox"/>	
9. Health: <i>Activity: Wash hands</i>		<input type="checkbox"/>			<input type="checkbox"/>	
10. Complete at the END OF THE YEAR:	Was this child promoted to the next level? <u> </u> Yes <u> </u> No			Was this child promoted to the next level? <u> </u> Yes <u> </u> No		

B. Planned Activities and Outcomes (continued)

Expected Outcome Area and Examples of Activities the Foster Grandparent will do with the child	Child 3: _____			Child 4: _____		
	Complete at the beginning of the year		COMPLETE ON _____	Complete at the beginning of the year		COMPLETE ON _____
	I	II	III	I	II	III
	Planned Activities: how often , and notes as needed (Indicate Frequency)	Check three priority areas ✓	Outcomes for priority areas: level of improvement Code 1, 2, 3, or 4	Planned Activities: how often , and notes as needed (Indicate Frequency)	Check three priority areas ✓	Outcomes for priority areas: level of improvement Code 1, 2, 3, or 4
1. Cognitive: Learning, thinking <i>Activity: looking at books</i>		<input type="checkbox"/>			<input type="checkbox"/>	
2. Language: Speech, ESL <i>Activity: Tell stories, practice greetings</i>		<input type="checkbox"/>			<input type="checkbox"/>	
3. Social: Friendship, respect, teamwork <i>Activity: Model proper social skills</i>		<input type="checkbox"/>			<input type="checkbox"/>	
4. Emotional: Self esteem, behavior, self-control <i>Activity: Encouragement, redirection, comfort</i>		<input type="checkbox"/>			<input type="checkbox"/>	
5. Literacy: Colors, numbers, reading, math <i>Activity: Read stories, play number games, puzzles</i>		<input type="checkbox"/>			<input type="checkbox"/>	
6. Fine Motor: Cutting, drawing, buttoning		<input type="checkbox"/>			<input type="checkbox"/>	
7. Gross Motor: Walking, throwing balls, etc. <i>Activity: Assist with mobility/ exercise</i>		<input type="checkbox"/>			<input type="checkbox"/>	
8. Self Help: Independence <i>Activity: Share meals/ help feed</i>		<input type="checkbox"/>			<input type="checkbox"/>	
9. Health: <i>Activity: Wash hands</i>		<input type="checkbox"/>			<input type="checkbox"/>	
10. Complete at the END OF THE YEAR:	Was this child promoted to the next level? ___ Yes ___ No			Was this child promoted to the next level? ___ Yes ___ No		

SIGNATURES

Assigned Children and Planned Activities: Section A and Section B (Columns I and II)

I accept this assignment plan:

Signature: Foster Grandparent Volunteer

Date

I certify that I am qualified to attest to the needs described above or have consulted with or reviewed documentation prepared by an appropriate professional who verified the needs, such as, but not limited to, a physician, psychiatrist, psychologist, registered nurse or licensed practical nurse, speech therapist, educator, or a member of the professional or executive staff of the volunteer station. *I understand that a knowing and willful false statement on this form can be punished by a fine or imprisonment or both under Section 1001 of Title 18, U.S.C.*

Signature: Volunteer Station Representative

Date

I approve this assignment plan:

Signature: Foster Grandparent Program Director

Date

**FOSTER GRANDPARENT PROGRAM
ASSIGNMENT PLAN/INSTRUMENT (HEAD START)
Instructions for Summarizing Results**



Below are step-by-step instructions for aggregating and analyzing information collected with the FGP Assignment Plan/Instrument for Head Start. To do this, you will need the completed assignment plans/instruments, your work plan that states the intermediate and end outcome target statements for the performance measures, and a copy of the Data Summary Sheet (see page 13). You may also want a calculator and a blank FGP Assignment Plan/Instrument form for reference.

Using the Data Summary Sheet, go through the completed FGP Assignment Plan/Instruments one at a time. For each form, follow these steps:

Step 1: Enter the name of the Foster Grandparent in Part A of the Data Summary Sheet. There is space to enter the children’s names (Child 1, Child 2, etc.) for your records, if you like. This is not necessary for summarizing results, however.

Step 2: For each child, determine whether the intermediate outcome and end outcome were met. Mark the appropriate columns in the Data Analysis Sheet for each child who met the intermediate and/or end outcome targets.

The **intermediate outcome** in the work plan is: *Children receiving one-on-one assistance will show improvement in their specific areas of development.* Items #1 through #9 in Section B, Column III on the FGP Assignment Plan/Instrument provide the data for this outcome. The child met the target if 2, 3 or 4 (“a little improvement”, “moderate improvement” or “a great deal of improvement”) is entered in Section B, Column III, for at least two of the three priority areas (priority areas were checked in Section B, Column II).

The **end outcome** in the work plan is: *Children assigned to a Foster Grandparent will be promoted to the next level.* Item #10 on the FGP Assignment Plan/Instrument provides the data for this outcome. The child met the target if item #10 is checked “yes”.

Step 3. Once you have gone through all of the completed FGP Assignment Plan/Instrument forms and entered the information in the Data Summary Sheet, total the numbers in Part B of the Data Summary Sheet. You will need to count the total number of children served; the total number who met the intermediate outcome target, and the total number who met the end outcome target.

Step 4. Determine the percent of children who met the **intermediate outcome** target and write a statement. First, determine the percent, if you have not done so already:

Example: Of the 50 children assessed, **44** met the intermediate outcome target (i.e., rated 2, 3 or 4 – “a little improvement” or “moderate improvement” or “a great deal of improvement” — in at least 2 of the 3 priority areas). Divide the number that met the target (44) by the total number of completed assignment plans/instruments (50).
 $44 / 50 = 88$ (or **88%**)

Eighty-eight (88) percent of the children met the intermediate outcome target.

Second, write a results statement by comparing the percentage of children that met the target with the anticipated target statement in your work plan.

Example: Let’s say the anticipated target in your work plan was set at 85% (*Eighty-five percent of children will show at least a little improvement in two out of three identified priority areas by mid-year.*) Write the actual results by addressing the anticipated target:

Actual Target Statement: *Eighty-eight percent (44 of 50) children assessed demonstrated at least a little improvement in two out of three identified priority areas by mid-year. We exceeded our anticipated intermediate outcome target of 85%.*

Step 5. Determine the percent of children who met the **end outcome** target and write a statement. First, determine the percent, if you have not done so already:

Example: Of the 50 children assessed, **47** met the end outcome target (i.e., respondents answered “yes” to question 10 about moving to the next level). Divide the number that met the target (47) by the total number of completed assignment plans/instruments (50).

$47 / 50 = 94$ (or **94%**)

Ninety-four (94) percent of the children met the end outcome target.

Second, write a results statement by comparing the percentage of children that met the target with the anticipated target statement in your work plan.

Example: Let’s say the anticipated target in your work plan was set at 90% (*Ninety percent of children will be promoted to the next level.*) Write the actual results by addressing the anticipated target:

Actual Target Statement: *Ninety-four percent (47 of 50) children were promoted to the next level. We exceeded our anticipated end outcome target of 90%.*

NOTE: If you are not on track to meet your target, try to explain why.



TAKE A CLOSER LOOK

The data could be examined in closer detail to learn more about children's improvement in the priority areas. For example, there were nine possible "priority areas" that could be checked in the FGP Assignment Plan/Instrument (Head Start) for the intermediate outcome target. This information might aid program decision-making by indicating areas where the program is more successful and areas where problems might exist. As you look through the data for all of the children, consider:

- Are some priority areas more frequently checked than others? Are Foster Grandparents receiving enough training to assist children in these priority areas?
- Are there some planned activities that Foster Grandparents engaged children in more frequently than others? Did the activities result in satisfactory improvement for the child in the corresponding outcome area?
- Do most/all children assisted by Foster Grandparents succeed in advancing to the next level? If not, can more one-on-one time be spent with the children? Are Foster Grandparents receiving enough feedback from Head Start staff on their efforts?

When you report results, remember to include a brief description of how you collected the data:

- What instruments did you use?
- Who administered the instrument?
- When and how often was the instrument administered?
- For how many individuals were instruments completed?
- If data were not collected the way you anticipated, explain why.



**Data Summary Sheet: FGP Assignment Plan/Instrument
HEAD START**

Instructions: Collect the completed FGP Assignment Plan/Instrument (Head Start) forms. For each completed form:

- Enter the Foster Grandparent Name in the designated row in Part A. (Optional: enter children’s names.)
- For each child who was assisted by this Foster Grandparent, note whether they met the intermediate outcome by placing a mark in the second column.
- For each child who was assisted by this Foster Grandparent, note whether they met the end outcome by placing a mark in the third column.

When you have completed Part A, total the numbers of children who met (1) the intermediate outcome; and (2) the end outcome in the last row (see Part B).

Part A. Children who met Program Targets

FGP-Child Assignment	Intermediate Outcome <i>Check (X) if met (2, 3, or 4 are marked in at least 2 priority areas in Column III)</i>	End Outcome <i>Check (X) if met (YES is checked in #10)</i>
1. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
2. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
3. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
4. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		

Part A (continued)

FGP-Child Assignment	Intermediate Outcome	End Outcome
5. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
6. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
7. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
8. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
9. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		
10. Foster Grandparent Name:		
Child 1		
Child 2		
Child 3		
Child 4		

Part B. Totals

1. How many children were served by these Foster Grandparents? ____
2. Of these, how many met the intermediate outcome? ____ Divide this number by the total number served (1). This is the percent of children who met the intermediate outcome target.
3. How many met the end outcome? ____ Divide this number by the total number served (1). This is the percent of children who met the end outcome target.

Example: 20 were children served. Of those:
 15 met the intermediate outcome target. $15/20 = .75$ (75%)
 12 met the end outcome target. $12/20 = .60$ (60%)