



Parents as Teachers *Born to Learn*® Program Plan Cover Sheet

Organization/Program Name:

Date Completed (mm/dd/yyyy):

Primary Contact Person:

Title:

Organization Address:

City:

State:

Zip:

Telephone: () - ext.

Fax: () -

Email:

Office Use Only:

Plan approved by:

Date:

Program Code:

(to be assigned by National Center)

Who is the primary sponsor for your program?

- | | | | |
|---------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> California First Five | <input type="checkbox"/> Iowa Community Empowerment | <input type="checkbox"/> South Carolina First Steps | <input type="checkbox"/> Bureau of Indian Education |
| <input type="checkbox"/> Connecticut NFN | <input type="checkbox"/> Kansas KSDE | <input type="checkbox"/> Washington Thrive by Five | <input type="checkbox"/> Australia DOCS/NGO |
| <input type="checkbox"/> Delaware DOE | <input type="checkbox"/> Missouri DESE | <input type="checkbox"/> Head Start/Early Head Start | <input type="checkbox"/> Germany AWO |
| <input type="checkbox"/> Georgia SPARK | <input type="checkbox"/> North Carolina Smart Start | <input type="checkbox"/> Healthy Start | <input type="checkbox"/> New Zealand Family & Comm. Service |
| <input type="checkbox"/> Illinois Prevention Initiative | <input type="checkbox"/> Ohio Help Me Grow | <input type="checkbox"/> Prevent Child Abuse State Agency | <input type="checkbox"/> Other Sponsor (please specify): |
| <input type="checkbox"/> Indiana Healthy Families | <input type="checkbox"/> Oklahoma SDE | <input type="checkbox"/> Success by Six/United Way | |

How would you describe the type of community organization which sponsors your PAT services?

- | | | |
|-------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> School System | <input type="checkbox"/> Private/Public Non-Profit | <input type="checkbox"/> Community Action Agency |
| <input type="checkbox"/> Family Resource Center | <input type="checkbox"/> Hospital or Medical Facility | <input type="checkbox"/> Social Service Agency |
| <input type="checkbox"/> Government Agency | <input type="checkbox"/> Health Department | <input type="checkbox"/> University/Extension |
| <input type="checkbox"/> Child Care Center | <input type="checkbox"/> Tribal Government/BIE | <input type="checkbox"/> Early Intervention/Part C |
| <input type="checkbox"/> Migrant Program | | <input type="checkbox"/> Other sponsor (please specify): |

Will your Parents as Teachers *Born to Learn* services be incorporated within, or blended with, an existing early childhood home visitation model or family support system? Yes No **If yes, please check all that apply.**

- | | | |
|-------------------------------------------|---------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Early Head Start | <input type="checkbox"/> Healthy Families America | <input type="checkbox"/> Parent-Child Home Program (PCHP) |
| <input type="checkbox"/> Even Start | <input type="checkbox"/> HIPPY | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Nurse-Family Partnership | |

Anticipated location of *Born to Learn*® Institute: _____ **Start date of *Born to Learn*® Institute (mm/dd/yyyy):** _____

Anticipated number of staff who will attend the Institute (also include supervisory staff who will attend): _____

If known at this time, list all staff attending the Institute in the box below: (If unknown at this time, the supervisor must complete the participant

list by the beginning of the training week.) NOTE: If you have more staff than will fit in the box on p. 1, please include an additional page.

The National Center for Parents as Teachers welcomes you to the Parents as Teachers *Born to Learn* family! The following pages are designed to guide you through program planning to build a strong foundation for a high quality Parents as Teachers *Born to Learn* program from the start. The Program Plan will help you determine appropriate staffing and budget in order to implement all components of the model with fidelity and quality. The Program Plan is designed as a logic model and is intended to link inputs, activities, outputs, and outcomes for families. The Program Plan is also closely connected to the required data you report on the Annual Program Report submitted to the National Center for Parents as Teachers as a part of the annual re-affiliation process. Keeping the end in mind as you develop your new program will lead to the strongest possible program and maximize positive outcomes for families.

Guidance and Tips:

- Before completing the Program Plan, **carefully review the *Parents as Teachers Born to Learn Quality Assurance Guidelines* and use the instructions in Appendix A to help you understand and fill out Section II- the program plan logic model.** By completing and submitting all 5 sections of the Program Plan for approval prior to training, you commit to implementing a high quality program. You may not register for training without a prior approved Program Plan.
- If you wrote a grant to fund your program, you may already have determined many of the specifics as a part of your grant application, but there may still be some activities that are new to you. If you have questions at any point, please contact Jan Watson at the National Center for Parents as Teachers or the contact at the appropriate State Office.
- Please do not use abbreviations or initials for the information you supply in any section of this plan and if you check an “other” box, please specify.
- Note that this version of the Program Plan is editable and will allow for changes and updates during the approval process. Please save a copy of the Program Plan prior to submitting it. If needed, the program supervisor can then make any appropriate changes and submit an updated version of the Program Plan to the National Center for Parents as Teachers or appropriate State Office.
- Once the plan has been approved and your parent educators have successfully completed training, you will be an affiliated program.

SECTION I. STAFFING QUESTIONS

A. What are your program’s minimum educational requirements for parent educators? *(It is recommended that parent educators have a 4-year degree in early childhood or a related field; see the Quality Assurance Guidelines for more details on choosing the right parent educators)*

Master’s Degree Bachelor’s Degree Associate’s Degree/60 college hours Less than Associate’s other (please specify: _____)

If your minimum is less than an Associate’s/60 hours, what is the required minimum number of years of supervised work experience in early childhood? _____

B. How many parent educators will each supervisor/mentor/lead parent educator supervise? _____

C. How frequently will the supervisor/mentor/lead parent educator be meeting with parent educators individually for formal supervision?

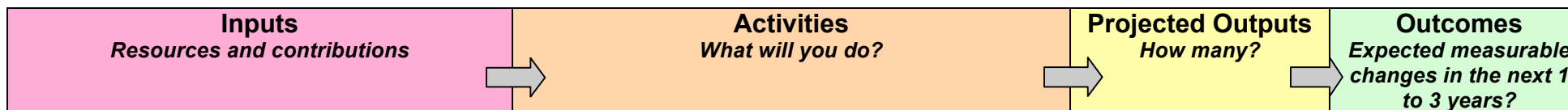
weekly every 2 weeks every 3 weeks monthly other (please specify: _____)

D. How frequently will the program hold staff meetings?

weekly every 2 weeks every 3 weeks monthly other (please specify: _____)

SECTION II. PARENTS AS TEACHERS *BORN TO LEARN*® PROGRAM PLAN

Important Note: Use the *Quality Assurance Guidelines* and instructions in Appendix A to guide your answers to the items in this section.




Inputs: Resources and contributions

A Funding Stream:		<u>Type</u>	<u>Duration</u>
1)	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Other	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 or more years	
2)	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Other	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 or more years	
3)	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Other	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 or more years	
4)	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Other	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 or more years	
Additional comments:		<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 or more years	
B Total number of parent educators Full-time (FT) parent educators: Part-time (PT) parent educators:		C Duration of services to families Families receive <input type="checkbox"/> 36+ months of service <input type="checkbox"/> 24-35 months of service <input type="checkbox"/> other:	
D Populations to be served <input type="checkbox"/> Prenatal to Three Years <input type="checkbox"/> Two Years to Kindergarten Entry	<u>Target Population</u> Will your PAT program target services to a specific community or geographic location identified as high risk? <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Eligibility Criteria:</u> Will your program have eligibility criteria for individual families who receive services? <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>If yes, who?</u> <input type="checkbox"/> Income- based criteria <input type="checkbox"/> Children with special needs <input type="checkbox"/> Parents with mental health or substance abuse issues <input type="checkbox"/> Teen parents <input type="checkbox"/> Literacy needs of parent <input type="checkbox"/> Immigrant families <input type="checkbox"/> Families at risk for child maltreatment <input type="checkbox"/> First-time parents <input type="checkbox"/> Other:
E Community Demographics Is there a specific service area for your program? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please describe:		Is your program situated in a: <input type="checkbox"/> Major city (population ≥ 500K) <input type="checkbox"/> Small town (population 2500 – 25K) <input type="checkbox"/> Urban (population ≥ 50K) <input type="checkbox"/> Rural (< 2500 population) <input type="checkbox"/> Suburban (identified community part of larger urban area)	

**Activities:
What will you do?**

Activities: What will you do?				
F Recruitment Methods: <input type="checkbox"/> Print materials <input type="checkbox"/> Personal contact by parent educator <input type="checkbox"/> Informal meetings <input type="checkbox"/> Signage (lawn signs, billboards)		Retention and Engagement Strategies: <input type="checkbox"/> Website <input type="checkbox"/> Radio or TV <input type="checkbox"/> Other: <input type="checkbox"/> Written visit reminders <input type="checkbox"/> Email/text message visit reminders <input type="checkbox"/> Phone or text message contact between visits <input type="checkbox"/> Incentives for completed visits <input type="checkbox"/> Incentives, refreshments, or transportation to encourage group meeting attendance <input type="checkbox"/> Other:		
G Personal Visits <u>Location:</u> <input type="checkbox"/> Home <input type="checkbox"/> Child Care Center <input type="checkbox"/> High School <input type="checkbox"/> Other:	Personal Visits Frequency: <input type="checkbox"/> Monthly/10-12 visits annually <input type="checkbox"/> Every 2 weeks/20-24 visits annually <input type="checkbox"/> Weekly/40-52 visits annually <input type="checkbox"/> Other: # months/year visits are offered:	Personal Visits Caseload: # of visits/month completed by FT parent educators # of visits/month completed by PT parent educators Average number of families per parent educator:	H Group Meetings Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Every 2 weeks <input type="checkbox"/> Weekly <input type="checkbox"/> Other: # months/year group meetings are offered:	
I Screenings <i>Developmental</i> <input type="checkbox"/> By program staff <input type="checkbox"/> Contracted out Frequency: <input type="checkbox"/> Every 3 months <input type="checkbox"/> Every 6 months <input type="checkbox"/> Annually <input type="checkbox"/> Other: Tool used:	Hearing <input type="checkbox"/> By program staff <input type="checkbox"/> Contracted out Frequency: <input type="checkbox"/> Every 6 months <input type="checkbox"/> Annually <input type="checkbox"/> Other: Method used: <input type="checkbox"/> Audiometry <input type="checkbox"/> Otoacoustic Emissions (OAE) <input type="checkbox"/> PAT Hear Kit/Hearing Check <input type="checkbox"/> Other:	Vision <input type="checkbox"/> By program staff <input type="checkbox"/> Contracted out Frequency: <input type="checkbox"/> Every 6 months <input type="checkbox"/> Annually <input type="checkbox"/> Other: Method used: <input type="checkbox"/> PAT Vision Screen <input type="checkbox"/> Acuity charts/cards <input type="checkbox"/> Photoscreener™ <input type="checkbox"/> SureSight™ <input type="checkbox"/> Other:	Health <input type="checkbox"/> By program staff <input type="checkbox"/> Contracted out Frequency: <input type="checkbox"/> Every 6 months <input type="checkbox"/> Annually <input type="checkbox"/> Other: Method used: <input type="checkbox"/> PAT Health Record <input type="checkbox"/> Other:	Social-Emotional Will your program conduct social-emotional/mental health screenings (optional)? <input type="checkbox"/> Yes, annually or more often <input type="checkbox"/> Yes, but only as needed <input type="checkbox"/> No Tool used:
J Resource Network: List the top 5 community resources: 1. 2. 3. 4. 5.	K Additional services provided to families: <input type="checkbox"/> None <input type="checkbox"/> Adult Education/ GED <input type="checkbox"/> Case Management <input type="checkbox"/> Center-based Child Care/Head Start <input type="checkbox"/> Early Intervention/ Part C <input type="checkbox"/> ESL Classes <input type="checkbox"/> Family Literacy <input type="checkbox"/> Healthcare Services <input type="checkbox"/> Job Skills <input type="checkbox"/> Marriage Strengthening <input type="checkbox"/> Mental Health/ Substance Abuse Services <input type="checkbox"/> Other:	L Program Advisory Board meeting frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Every 2 months <input type="checkbox"/> Quarterly <input type="checkbox"/> Every 6 months <input type="checkbox"/> Other:	M Recordkeeping: What computerized data management system will you be using? <input type="checkbox"/> Visit Tracker (PAT Recommended) <input type="checkbox"/> Other system (specify:) <input type="checkbox"/> We don't plan to use one.	N Evaluation: In addition to submitting the PAT Annual Program Report and the Program Self-Assessment every 4 years, which of the following evaluation methods will you use? <input type="checkbox"/> Parent Satisfaction Surveys <input type="checkbox"/> Group Meeting Feedback Forms <input type="checkbox"/> Outcome Measures: <input type="checkbox"/> Other:

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Projected Outputs <i>How many?</i>		Outcomes <i>Expected measurable changes in the next 1 to 3 years?</i>	
O	# families served in a 12 month period total # of personal visits delivered in a year total # of group meetings offered in a year	→	<p>EXAMPLES TO GUIDE YOU:</p> <p>X % of families who participate in a minimum of X # personal visits and X# group meetings will show an increase in parenting knowledge and skills.</p> <p>X % of children whose families participate in a minimum of X # personal visits and X # group meetings will show an increase in age appropriate developmental skills.</p> <p>X % of families who participate in a minimum of X # personal visits and X # group meetings will have increased support network of other parents.</p> <p>X % of families who participate in a minimum of X # personal visits and X # group meetings will have a greater connection with school and community</p>
P	# families receive 10-12 visits annually # families receive more than 10-12 visits annually		
Q	% of families attend at least one group meeting/ year		
R	% of age-eligible children screened % Developmental % Hearing % Vision % Health % Social-emotional/Mental health (optional)	→	
S	% of families are connected to at least one community resource		
T	% of enrolled families receive % of intended visits	→	
U	% of families annually leave the program before the child ages out or the service cycle is completed (attrition)		

SECTION III. BUDGET WORKSHEET

(1) Indicate your program's annual funding for PAT services. **Annual Funding for PAT Services:** \$_____ (amount in dollars)

(2) Complete the budget worksheet below. Confirm that your program has allocated funds and resources for each item by checking *Yes* and indicating if the allocation is direct funding or in kind. If your program has not allocated funds or resources for a particular item, please check *No* and provide an explanation for this in the far right column. If you do not yet have funds allocated for a particular item, please review the item(s) further with a supervisor or your funding source, as applicable, to determine how this item could be funded and the implications of not budgeting for an item. See the *Quality Assurance Guidelines* for a detailed budget example.

Budget Items for Implementing and Delivering Parents as Teachers <i>Born to Learn</i>		Estimated Costs (Actual cost may vary)	Resources Allocated?*			Please explain any No answers
			Yes Funded directly	Yes In kind	No	
A	Initial training and curriculum costs: This line item can be allocated to professional development in future years, as well as training expenses in the case of staff turnover.	\$995 per parent educator for Institute, Curriculum; \$50 for 1 Spanish handout CD; \$345 per supervisor (see below for more details**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B	Parent educator salaries	Yearly Salary + 30% benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C	Supervisor salary	Yearly Salary + 30% benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D	Support staff (2 hours per parent educator & supervisor)	Yearly Salary + 30% benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E	Books, toys, and materials***	\$300 per child served	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
F	Developmental screening materials and training***	\$250 (ASQ-3 cost)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
G	Additional hearing/vision screening tool expenses	Optional: Refer to the <i>Quality Assurance Guidelines</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Optional)
H	Group meeting expenses (e.g. materials, fliers, outreach, refreshments, guest speakers as needed, child care).	12 meetings over the course of the year, budgeted at \$40 per meeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I	National Center annual recertification fee	\$40 (your state may vary).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
J	Supplies, copier, phone, fax, internet access/computer	\$100/person/month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
K	Transportation costs for parent educators conducting personal visits and supervisor transportation for observation of staff and other work-related transportation	Estimated mileage reimbursement at .50/mile. Estimated number of miles per month per parent educator/supervisor is 480, based on average mileage reimbursement of 10 miles per visit. (Adjust per serv. area)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
L	Visit Tracker Web-Based data management system: Recommended for efficiency and accountability.	First year cost is \$300. Renewal is \$150/year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
M	Process and outcomes evaluation and measurement tools as determined by funding requirements.	We suggest including \$200/parent educator for evaluation expenses. Programs are encouraged to have a program quality visit after 4 years of implementation (an additional cost.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
N	Indirect costs by your organization for human resource expenses, liability insurance, etc.	Optional: Refer to your organizational policies for guidance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Optional)

* If yes, check whether in kind or funded directly. In kind is defined here as contributions to the program that have value but are not a direct monetary contribution. **Initial training costs do not include travel and lodging expenses, which may be needed for participation in the *Born to Learn* Institute. The cost for

initial training varies by location; \$915 represents an estimate. In addition, this budget item is based on the supervisor attending the 2-day supervisor training. A 5-day training cost applies for those supervisors who will be certified to serve families in addition to supervising parent educators. Supervisor costs include a Supervisor's Manual & Program Administration Guide, the PAT Standards and Self-Assessment Package, & Guide to Health, Hearing and Vision Screening.
***One-time expense.

SECTION IV. TERMS OF AGREEMENT

Parents as Teachers *Born to Learn*®

Terms of Agreement for Programs

The following conditions are required for initial and ongoing implementation of the Born to Learn program.



1. **New parent educators and supervisors will attend the Parents as Teachers *Born to Learn* Institute and complete all requirements for parent educator or supervisor certification before delivering the *Born to Learn* model.**
 - Each parent educator and supervisor who serves families is required to attend the 5-day Institute. Supervisors not serving families must attend the first 2 days of the Institute and are strongly encouraged to attend all 5 days. Neither supervisors nor parent educators are allowed to train others in the *Born to Learn* model.
 - The supervisor reviews either the Program Plan (if a new program) or Annual Program Report (if an existing program) with each new parent educator before Institute.

2. **The Parents as Teachers *Born to Learn* program that our organization sponsors will implement all four components of the *Born to Learn* model:**
 - Regularly scheduled personal visits
 - Regularly scheduled health, hearing, vision and developmental screenings
 - Regularly scheduled group meetings
 - Linkage with community resources and a referral network

3. **Our organization will use the Parents as Teachers quality standards to guide our Parents as Teachers *Born to Learn* program’s services, operations, and management.** The standards establish a blueprint for quality implementation of the *Born to Learn* model, based on best practices in the field of early childhood home visitation.

4. **The program supervisor and all parent educators will recertify with the National Center annually.** Recertification maintains a program’s affiliation with the National Center and facilitates staff members’ professional development that is essential to high quality services.

5. **Our organization will complete and submit the Annual Program Report for our Parents as Teachers *Born to Learn* program by the required date each year.** This annual program report maintains current information about your program’s implementation.

6. **Our organization will acknowledge use of the Parents as Teachers *Born to Learn* curriculum and training in program dissemination materials and evaluations.** The program’s affiliation with Parents as Teachers establishes recognition of quality programming and offers opportunities to network with other affiliates.

7. ***Born to Learn* Curriculum Guides and DVDs are copyrighted and will be used only by currently certified parent educators within the Parents as Teachers *Born to Learn* program.** If Parents as Teachers *Born to Learn* is no longer implemented in our organization, the *Born to Learn* Curriculum Modules or DVDs will not be used.

8. **The Parents as Teachers *Born to Learn* Curriculum, Modules and DVDs are the property of affiliated Parents as Teachers programs and are not the property of individual parent educators.** If a parent educator leaves her position, the supervisor will collect any of the parent educator’s *Born to Learn* Curriculum Modules or DVDs.

Compliance with this Terms for Agreement signifies that the Parents as Teachers *Born to Learn* program is in good standing with the National Center for Parents as Teachers.

Supervisor Printed Name

_____ Supervisor Signature

_____ Date

Printed name of person with signature authority in the organization

_____ Signature of person with signature authority in the organization

_____ Date

Name of organization _____ Organization address _____ () - _____ () - _____ Phone number _____ Fax number _____

Anticipated date of Institute

Anticipated location of Institute



SECTION V. REQUEST FOR PERMISSION TO COPY MATERIALS

BORN TO LEARN® CURRICULUM: PRENATAL TO 3 YEARS OR BORN TO LEARN® CURRICULUM: 2 YEARS TO KINDERGARTEN ENTRY

Please check which curriculum applies to your program (you may only check one):

- Prenatal to 3 Years
- 2 Years to Kindergarten Entry

One **Request for Permission to Copy** must be completed at the time a Parents as Teachers program is initiated. The form is to be submitted to the National Center for Parents as Teachers, Inc. along with the other four sections of the New Program Plan where it will be signed by the Parents as Teachers Chief Executive Officer. One copy will remain on file at the National Center for Parents as Teachers and the original will be returned to the program for its file.

My program, _____, requests permission to **reproduce and distribute** the following portions of the *Born to Learn*® Curriculum for use only by certified parent educators with families enrolled in the Parents as Teacher program:

- Your Child handouts
- Parent handouts
- Your Baby handouts
- Record keeping forms and records

In addition, we request permission to reproduce the Milestones forms and understand that these may be reproduced for each child’s record only, and may not be distributed to parents or guardians.

The staff of this program understands that the entire *Born to Learn*® Curriculum and DVDs are copyrighted and that no portions other than those listed above may be reproduced by any means. The materials that are copied for distribution must maintain the copyright and date line that appear on each page. These materials are not to be distributed outside of the Parents as Teachers program.

Further we understand and agree that this permission is valid as long as a current, approved *Born to Learn*® Program Plan is on file with the National Center for Parents as Teachers and all personnel delivering *Born to Learn*® program components to families, and who are using these materials, are currently certified by the National Center for Parents as Teachers, Inc.

Program Administrator or Supervisor Name (please type or print):

Program Name: _____

Signature: _____ Date: _____

In response to your request, permission is hereby granted as stipulated above. Only certified parent educators are authorized to utilize these materials with their Parent as Teachers families. As an affiliate, you are also granted the right to use the Parents as Teachers registered logo.

Signature: _____ Date: _____

Sue Stepleton, Ph.D., LCSW
 Chief Executive Officer – National Center for Parents as Teachers

Appendix A. INSTRUCTIONS. Please note that, where applicable, requirements are noted in bold.

Inputs: Resources and contributions

Please try to be as specific as possible when completing the inputs and activities. This will help us understand your program design and how you will serve families.

- A. Funding Stream and Length of funding- List all funding streams from which you will receive funding and select the type for each funding stream. You may be receiving all types (federal, state, local and private) or some combination of one or more. **While it is preferable for your program to come in with 3 or more years of funding in place, a minimum of 2 years funding is acceptable for major sources of funding.** For each funding source, check the applicable duration of the funding. Use the comments box to explain if your funding is annually renewable or other caveats to your answers in this section.
- B. Total number of parent educators – Specify the total number of parent educators, and then the number which will be full-time (30+ hours/week) or part-time (less than 30 hours/week).
- C. Duration of Services - **For greatest impact, most Parents as Teachers *Born to Learn* programs provide 3 plus years of service. At minimum, Parents as Teachers *Born to Learn* programs must provide 2 years of services to families between prenatal and kindergarten entry.** Programs that provide the minimum 2 years of services to families typically deliver an increased frequency of services during this period. Check whether your program will provide 36+ months of service to each family, 24-35 months of service or other (between prenatal and kindergarten entry). If other, please describe.
- D. Populations to be served – Indicate whether your program will provide primarily prenatal to 3 years or primarily 2 to kindergarten entry, whether you will target services to specific communities or locations identified as at risk, as well as any eligibility criteria that apply to the families that you will serve. Some programs target services to a specific community or geographic location identified as high risk. In addition, some programs have eligibility criteria specific to the families who receive services. Such eligibility criteria might include children with special needs, families at risk for child maltreatment, income-based criteria, teen parents, first time parents, immigrant families, low literate families, or parents with mental health or substance abuse issues.
- E. Community Demographics – Some programs serve specific services areas such as geographic regions, counties or other geographic areas as defined by your funder. Check if your program will serve a specific service area and if so, describe. Then check which of the following types of communities your Parents as Teachers *Born to Learn* program will be situated in (can be more than 1 type).
- Major city (Total population of 500,000+ people.)
 - Rural (A geographic area with a population of less than 2,500.)
 - Small town (A geographic area with a population of between 2,500 and 25,000.)
 - Suburban (An identifiable community which is part of a larger urban area.)
 - Urban (Densely settled areas containing at least 50,000 people.)

Activities: What will you do?

- F. Family Recruitment and Retention - The PAT standards recommend that each program have a clear and written plan for offering and promoting PAT services. Indicate how your program will recruit families, by checking the applicable choices. Once families are enrolled in the program, parent educators must facilitate families' continued participation in services through a variety of strategies. Check the retention and engagement strategies that your program will employ.
- G. Personal visits – **All PAT families receive personal visits. Personal visits are conducted in the home to build on the primary learning environment of the family. When extenuating circumstances exist, personal visits can be delivered in a mutually agreed upon site outside the home. The minimum Parents as Teachers *Born to Learn* personal visit frequency is 10-12 visits annually spread out over the course of a year (monthly). Over the course of a year, 20-24 (twice monthly) personal visits should be completed for families with greater needs. It is optimal for programs to provide personal visits year round so that families' needs are consistently met and so that families are enrolled in and receive services as quickly as possible. We highly recommend that programs operate all 12 months of the year; if programs cannot provide full services year-round due to restrictions from the funding agency, we encourage programs to maintain partial services 12 months of the year. If this is not possible, 10 months is the minimum number of months per year the program must operate. Full time parent educators typically complete a maximum of 48 visits per month, while part time parent educators typically complete a maximum of 24 visits per month. A parent educator must serve at least 5 families each year to re-certify.** Indicate the location of personal visits for your program, (i.e., home, center, high school), the average number of visits per month to be completed by full time and part time parent educators, along with the average number of families per parent educator. Finally, state how many months per year services will be offered.
- H. Group Meetings – Programs must offer at least monthly group meetings. Check the frequency that group meetings will be offered, as well as how many months during the year.
- I. Screenings – **At a minimum, programs must complete annual developmental, hearing, and vision screenings, and complete or update the *Born to Learn* or other health record for all age-eligible children in the program.** Many programs also conduct child social emotional or mental health screening. For each type of screening, check who will conduct them, the frequency that they will be completed, and select or type in the tools or methods that will be used
- J. Resource Network - **Your program will need to equip parent educators with knowledge about varied organizations and agencies in your community that families may need to access (you will identify the top 5 in your New Program Plan).** The PAT standards state that the program connects families to resources as needed and helps them overcome barriers to accessing these resources. List the top 5 community resources that families may be connected to, such as health, mental health, education, and social service organizations. Please do not use abbreviations or initials for the organization or agencies.
- K. Additional Services Received by Families - Many programs offer multiple services to PAT families. If this is the case for your program, check the applicable additional services your program will offer, e.g., case management, center-based child care/Head Start, family literacy, etc.
- L. Program Advisory Board/Leadership Council – The program advisory board is a leadership group that has several key functions: to advise, provide support, promote and offer input to the PAT program. The board or council is comprised of personnel, community members and other

stakeholders. **The program advisory board/leadership council must meet at least every 6 months.** Please check the meeting frequency that best applies to your program's board.

- M. Recordkeeping - Computerized recordkeeping is the preferred method for documentation of services and data tracking. In particular, Visit Tracker is an online computerized recordkeeping program recommended for PAT programs. Indicate which computerized record keeping and data management system your program will be using.
- N. Evaluation- In addition to submitting accurate Annual Program Report data on key demographics and service delivery to the National Center by the required deadline, the National Center for Parents as Teachers requires that programs collect annual participant satisfaction feedback and regular group meeting feedback. The participant satisfaction feedback may be collected through use of PAT specific tools or other participant satisfaction tools. In addition, programs should complete a program self-assessment every fourth year. Programs are also encouraged to evaluate outcomes for families. Check the applicable evaluation methods your program will use. If your program will be using an outcome measure for families, please list it after you check the Outcome Measures box.

Projected Outputs: How Many?

*For the **outputs column**, put in the appropriate numbers and percentages that are your expected targets. You can then track your implementation based on these expected outputs. Note: Your program will be reporting data to the National Center for Parents as Teachers via the Annual Program Report. The annual program report maintains current information about your program's implementation and should be carefully reviewed by your program prior to beginning data collection and service delivery.*

- O. Report the number of families that you plan to serve each year as well as the total number of personal visits and group meetings that your program will deliver in a year.
- P. Report the estimated number of families that will receive 10-12 visits annually and the number of families that will receive more than 10-12 visits annually.
- Q. For data tracking and reporting purposes, you will want to keep track of the number of group meetings families attend. We suggest projecting 75-80% of families will attend at least one group meeting each year.
- R. Report the percentage of children you expect to screen each program year in each of the following areas: developmental, health, hearing, vision and social-emotional /mental health (optional). We suggest projecting 90% of age eligible children. If there are extenuating circumstances that suggest this number will be less than 90%, please make a note to this effect in the outcomes column to the right. In addition, if your program will provide social-emotional/mental health screenings for children, report the projected percentage screened in this area as well.
- S. This projected output asks for the percentage of families that will be connected to at least one community resource. In this context, connecting a family to a community resource means that the parent educator has provided the family with a referral or recommendation and the family receives services/assistance from this resource or participates in programs offered by this resource. We suggest projecting that 80% of families will be connected to at least one community resource. Consider the resources listed in item J above.

- T. This projected output asks for both a percentage of families and a percentage of visits these families will receive. First, consider the percentage of intended visits that you expect families to receive (e.g. 80%). Then, consider the percentage of all enrolled families that you expect to receive at least this percentage of their allotted visits. For example, you might project that 80% of families will receive at least 80% of the intended visits.
- U. This projected output addresses your annual goal for retention of families in your program. Attrition includes families that move out of the service area and families who exit the program for other reasons, such as missed appointments or dissatisfaction. Attrition does not include families that complete the service cycle or age out from services. We suggest projecting an attrition rate of approximately 15%, unless you have a highly mobile population.

Outcomes: Expected measurable changes in the next 1 to 3 years?

We strongly encourage you to plan for the measurement of outcomes from the start. For the outcomes column, make your best estimate at the current time. You can revise these as you more fully implement your program. We have provided some examples of outcomes to guide you as you complete this section of the program plan (see the far right green column under Outcomes)), but your outcomes should be directly linked to your program goals and activities and your funder's requirements. You do not have to cover each area addressed by our examples. These measures will not be the basis of your plan's approval by the National Center for Parents as Teachers.

Programs often set a goal of 75-80% of parents and children who will demonstrate positive change after receiving full service for one year. This will vary based on the guidelines of the outcome measures you are using, the needs of families, and the intensity of services received. As a part of an evaluation plan, you will need to determine the intervals at which measures are administered, as well as the minimum time between administrations of measures. It is likely that you will be able to be increasingly specific about your outcome goals as you develop your program and become more familiar with the outcomes measure you are using.

Note that the examples we have included in this column focus on short term outcomes. You may also want to consider how you will track children into kindergarten and beyond to prove longer term outcomes. See the Program Evaluation Handbook for more details on program evaluation. You can download it and other evaluation resources from the evaluation section of the Parents as Teachers website or order the Handbook through the PAT e-store.