

Oklahoma Parents As Teachers
Annual Program Evaluation

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**Oklahoma Parents as Teachers
Program Evaluation
Executive Summary 2010-11**

Program Information and Grantees

In 2010-11, the Oklahoma Parents As Teachers (OPAT) grant program funded 76 school districts and two public housing authorities located in 88 Oklahoma communities. The size of the award was dependent on the enrollment (Average Daily Membership) of the applicant. The OSDE issued a total of \$1,908,344 in funds to the 78 grantees.

OPAT parent educators completed a total of **33,182 personal visits** with **4,303 families** and **4,966 children** during the 2010-11 funding year. The average program cost per family was \$443; average program cost per child was \$384.

Program funding levels, requirements, and costs.				
School District (ADM)	Original Grant Amount	Number Awarded	Minimum Monthly Visits	Median Cost Per Child
500	\$13,500	30	25	\$409
1,000	\$21,000	31	40	\$389
3,000	\$35,000	7	65	\$376
10,000	\$48,500	4	90	\$349
10,000	\$51,030	1	102	\$425
18,000	\$63,000	1	120	\$313
30,000	\$84,000	2	160	\$297

Characteristics of Families and Children Served

- Almost a quarter of participating families (24%) enrolled in the program before the child was born.
- More than half the participants (51.4%) were classified as “low income or unemployed.”
- Twenty-two percent of participants were teen parents (under the age of 20 at time of delivery).
- A language other than English was spoken in the homes of 16.7 % of OPAT families.
- The ethnic and racial composition of families served was fairly similar to the Oklahoma population of school children as a whole.
- A substantial proportion of children had a documented disability (2.8%).
- Children born prematurely or classified as “low birth weight” babies accounted for 8.4 percent of participants.
- Almost a quarter of children (22.7%) had mothers who did not complete high school.

Developmental and Health Screening

According to data submitted by the grantees, 92.3 percent of program children received health screening from OPAT staff. The percentage of OPAT children of age, 19-35 months who had received appropriate immunizations continued to increase. The average in 2005-06 was 87.7. The average climbed to 91.3 percent in 2007-08 and rose to an all time high of 93.8 in 2010-11.

OPAT programs provided developmental screening through the use of the *Ages and Stages Questionnaires (ASQ)*. Parent Educators administered the ASQ to children who were older than four months of age and within their first two months of participation in OPAT; and again in each year of participation. If the results of the ASQ indicated developmental delays, the child was referred to appropriate public and private services.

This year, 86.0 percent of the participants were screened by OPAT and another 11.1 percent were excused. Only 2.9 percent of the children served through OPAT should have received screening but did not. The most commonly reported reason for not screening a child was because the family had moved from the district.

Outcomes

According to the results of the *Ages and Stages Questionnaires (ASQ)*, children enrolled in OPAT showed a reliable gain in cognitive, language, social, and motor development. This instrument was administered in order to identify children who are at-risk. The assessment covered five key developmental areas: communication, gross motor, fine motor, problem solving, and personal-social skills. Pre-post ASQ scores were used to determine the extent to which children who participated in the OPAT program, who were initially identified as at-risk, moved to the not at-risk group. Two separate statistical analyses showed significant, positive changes in total scores and children's at-risk classification after participation in OPAT. Children were more likely to be classified as at risk on their initial ASQ than on their latest ASQ.

**Oklahoma Parents As Teachers (OPAT)
Annual Program Evaluation
School Year 2010-11**

Prepared by the Oklahoma Technical Assistance Center

Program Description

The Oklahoma Parents As Teachers (OPAT) program has been serving families across the state since 1991. OPAT is based on the nationally validated Parent As Teachers (PAT) program, a research-based parent education program that has been validated as effective in increasing parent knowledge about cognitive development and child safety. The program is designed to foster early partnerships between home and school and to help parents learn to stimulate their children's physical, cognitive, social-emotional, and language development. Through monthly personal visits by trained parent educators and parent group meetings, parents engage in the program's curriculum, *Born to Learn*. According to the Parents As Teachers National Center, the curriculum "...integrates well-established information about early brain development and the role that parents play in promoting that development."

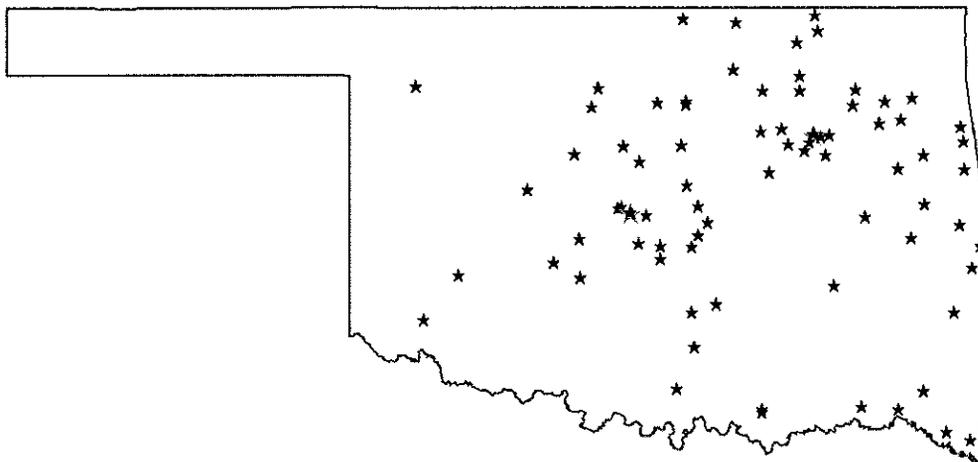
The OPAT program is based on the philosophy that parents are their children's first and most important teachers. The program is designed to maximize a child's overall development during the first three years of life by laying a foundation for school success and minimizing developmental problems that interfere with the child's learning. Other intended benefits of the program include early identification of developmental delays or sensory problems (e.g. hearing, vision) and a reduction in the number of children who require remedial and special education programs. Participation in the Oklahoma Parents as Teachers (OPAT) program is voluntary and available to all families in school districts that receive grant funds.

Program and Participation Data

In 2010-11, the Oklahoma State Department of Education (OSDE) awarded 78 grants to operate OPAT programs. (One school district, Haworth, returned the grant funds after deciding not to implement the program.) Of the 78 awards, two were granted to public housing authorities in Oklahoma City and Tulsa, seven were awarded to non-profit agencies, and the remainder were presented to public school districts.

The majority of the participating districts were located in rural areas or small towns (Figure 1). Although programs were located across the state (with the exception of the panhandle), more were located in the eastern half where the greater proportion of Oklahoma population resides. Due primarily to their rural location, eleven grants were awarded to school districts that partnered with at least one other neighboring district. Nine of the multi-district grantees consisted of two-partner districts and two consisted of three-partner districts. In total, 88 Oklahoma communities were served by OPAT programs.

Figure 1. Geographical Location of OPAT Programs, 2010-11



The OSDE issued a total of \$1,908,344 in funds to the 78 grantees. This included the funds to the two public housing authorities in Oklahoma City and Tulsa that each received \$65,657. Community size was a decisive factor in the funding for OPAT programs. The Average Daily Membership (ADM) of the applicant school district determined which of the different funding levels the district was eligible. Table 1 lists the number of grants by community size.

Table 1. Program funding levels, requirements, and costs.				
School District (ADM)	Original Grant Amount	Number Awarded	Minimum Monthly Visits	Median Cost Per Child
500	\$13,500	30	25	\$409
1,000	\$21,000	31	40	\$389
3,000	\$35,000	7	65	\$376
10,000	\$48,500	4	90	\$349
10,000	\$51,030	1	102	\$425
18,000	\$63,000	1	120	\$313
30,000	\$84,000	2	160	\$297

Depending on their ADM, school districts received grant awards that ranged from \$13,500 to \$84,000. More than three-fourths of the grants (80.3%) were awarded to small school districts with an ADM of 1,000 or less. The state's two largest urban areas, Oklahoma City and Tulsa, received the largest awards. Grantees with ADM between 10,000 and 18,000 were located in suburban communities. In addition to the funding levels designated in law, the State Department of Education added an additional funding level to accommodate the needs of the Midwest City-Del City (\$51,030) school districts. Midwest City-Del City has had a history of difficulty in meeting the targets in its funding group. The OSDE designated the funding level for this program and set a new target.

The program served fewer families this year than last. In 2009-10, the program served 4,573 families compared to **4,303 families** in 2010-11. Additionally, three of the grantees, Sapulpa (57), Tulsa (14), and Caney Valley (1) reported that they served families with other funding sources such as district funds or community resources. In addition to fewer families participating in the programs, slightly fewer **children (4,966)** were also served this year compared to 2009-10 (5,094). This resulted in a program cost per child of \$384 and an average family cost of \$443. The median cost per child by funding level can be found in Table 1.

Program Evaluation Strategies

The Oklahoma Technical Assistance Center (OTAC) has evaluated the Oklahoma Parents As Teachers program every year since 1991. This independent evaluation of the OPAT program has included a number of components, relying on both quantitative and qualitative information. In each of these annual evaluations, the OPAT program has demonstrated its effectiveness in meeting the overall program goals.

Over the years, the primary focus of the program evaluation has remained consistent; although, the content and methods used in the program evaluation have been revised each year in order to address specific areas of interest or concern. The evaluation relies on quantifiable data. These include monthly program service reports, pre- and post-assessments of children's development, surveys of service providers, and biannual assessments of changes in parent knowledge attributed to the program.

A set of instruments for collecting relevant data from OPAT programs was developed in consultation with State Department of Education Early Childhood staff and OPAT program coordinators. The set of instruments includes the following:

- an electronic *project service reporting form*, completed each month by local OPAT staff, used to record the number and type of project services provided to each participating family, demographic information, and pre-post assessment data;
- a *Parent Knowledge Questionnaire*, designed by the PAT National Center, for evaluating the degree of change in parent knowledge of child development and child safety. This instrument is administered every even-numbered year;
- the *Ages and Stages Questionnaires*, a commercially-produced standardized instrument for assessing child development in comparison with normative standards; and
- two *OPAT staff surveys*, one for Parent Educators and one for Program Coordinators, designed to collect information on program services, common practices, exemplary practices, program costs, and future needs.

Table A1, located in the Appendix, lists each of the funded programs in 2010-11 and the data that was submitted by that program.

Participants

One goal of Parents As Teachers is to maximize program impact by enrolling children in their first year of life. The efforts of the OPAT programs to meet this emphasis were apparent in 2010-11. Most of the OPAT programs indicated that they worked closely with community partners such as hospitals, health clinics, and physicians to enroll families as soon as possible; this included efforts to enroll parents prior to the birth of a child. Almost a quarter of this year's participants (24%) were enrolled in the program before the child was born, most between the third and seventh months of pregnancy. Additionally, 92 percent of all children were enrolled in the program before their second birthday.

The racial and ethnic distribution of OPAT participants and Oklahoma school children is presented in Table 2. This year, the information was reported in two parts in accordance with the new federal race and ethnicity categories. The project directors reported the ethnicity of the population served to be 17.4 percent Hispanic or Latino and 82.6 percent Not Hispanic or Latino. A second question asked the directors to identify the race of the child. The results of this question are presented in Table 2. Because of the form in which the data was reported, it was difficult to compare the OPAT distribution to the state distribution. Caucasian/White children represented 66.3 percent of those served. The most interesting finding from this comparison was that, when given the option, a substantial proportion of OPAT parents preferred to categorize their families as multiracial.

Table 2. Racial/Ethnic distribution of children, Oklahoma Parents As Teachers participants and general student population.		
<i>Group</i>	<i>OPAT Children</i>	<i>All Oklahoma School Children</i>
African-American/Black	5.4%	11%
American Indian/Alaskan Native	10.7%	19%
Asian American	0.5%	2%
Native Hawaiian/Pacific Islander	1.0%	(Not an SDE category)
Caucasian/White	66.3%	56%
Multiracial	13.3%	(Not an SDE category)
Not Reported	3.6%	--

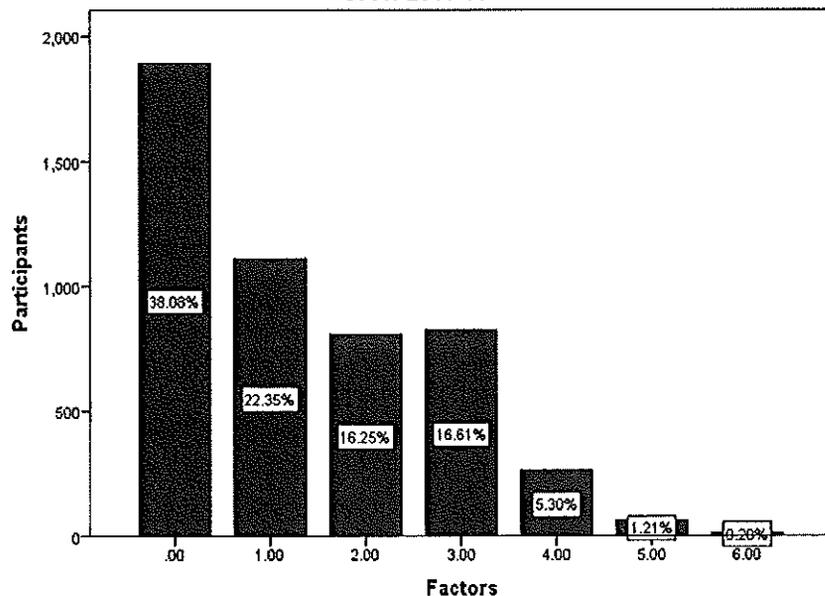
According to the authorizing legislation, OPAT programs were required to place a high priority on serving children considered to be at risk. The “at-risk” characteristics of 2010-11 participants are summarized as follows:

- More than half the participants (51.4%) were classified as “low income or unemployed.”
- A substantial proportion of children (2.8%) had a documented disability.

- Children who were born prematurely or were classified as “low birth weight” babies accounted for 8.4 percent of all participants.
- Teen parents accounted for 21.9 percent of those served.
- The OPAT data indicated that 22.7 percent of the children served had mothers who did not complete high school. (Note that this does not include the teen mothers who were still in high school).
- In 16.7 percent of OPAT families, a language other than English was spoken in the home.
- Programs reported that 9.3 percent of families had additional risk factors – these lower-incidence factors defined by the National PAT Center were combined into one category to ease the reporting burden on the grantees.

The number of risk factors identified for participants are presented in Figure 2. At least one risk factor was noted for 62.1 percent of the children served. Three or more factors were reported for almost a quarter of the participants (23.5%). Low income children were most likely to have multiple risk factors; 73.7 percent had at least two factors, and 44.9 percent had three or more factors.

Figure 2. Risk Factors
OPAT 2010-11



OPAT Services

Three direct services make up the core of the Parents As Teachers model: personal visits, parent group meetings, and developmental and health screenings. Parent educators visited families in a location preferred by the parent, usually the home, once each month. During this meeting, the parent educator presented age-appropriate child development and parenting information, helped parents learn to observe their children, and addressed parents' concerns. At least one meeting was devoted to developmental screening. Parents were also invited to attend group meetings where they shared general information about child development and parenting.

Personal Visits

The minimum number of visits the program staff was expected to complete each month was determined by the size of the award (Table 1). The number of required personal visits ranged from 25 per month (for programs that received \$13,500) to 160 visits (for those that received \$84,000). To be eligible for continued funding, OPAT programs must meet their minimum monthly requirements within an evaluation paradigm that sets out which visits are "countable." For example, programs may count one or two visits per month per child. In the case of high-risk children, local OPAT staff may decide to conduct extra visits with the parent and child, as recommended by the PAT National Center.

The following table presents the number of visits completed in each month of the program year. The number of visits that OPAT programs completed was fairly stable throughout the year. The two lowest figures were in the start-up month (August) and the last month of the program (June). The number of visits completed in August and June were the result of the policy allowing programs to select their program beginning and ending dates based on community calendars. All programs were required to operate for ten months of the year; if a

program began its program year in the first week of August, it could conclude its program year at the end of May. A delay in awarding grant funds resulted in most programs starting in September although some began their year in congruence with school district enrollment in mid-August and operated their programs until mid-June. Additionally, new programs started later, due to the fact that they had to hire parent educators and arrange for training and certification before permitting them to work as OPAT parent educators. In total, OPAT staff conducted a total of **33,182** personal visits during the 2010-11 school year.

Table 3. Total number of personal visits completed per month, all programs.											
Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
1,420	3,042	3,238	3,396	3,302	3,309	3,270	3,418	3,469	3,448	1,879	33,182

In addition to personal visits usually conducted in the home, the parent educators also conducted consultations with teen parents. These sessions were usually held in the teen’s school. Consultations with parenting teens followed the same format as personal visits but were conducted with the parent only – circumstances prevented a full visit with both parent and child. Teen consulting visits were often the best way to ensure that the teen parent consistently participated in the *Born to Learn* curriculum. This year, the programs reported that a total of **812 consulting visits** were held with teen parents by 25 of the programs.

More than a third of all participants (40.0%) were enrolled for the entire program year (ten months or more). Program enrollment records indicated that the average length of enrollment in the program for a family in 2010-11 was 7.19 months. Factors that impacted the length of enrollment in the program included:

- OPAT has an open entry/open exit enrollment policy.
- Participation in the program was voluntary.

- Parents could enroll their child at any point during the year and could leave the program at any time.
- According to the authorizing legislation, children may be served until they reach 36 months of age. Once they reach this age, they may no longer be enrolled in OPAT and OPAT funds may not be used for continued services.

The average number of personal visits for all children, regardless of number of months enrolled, was 6.68. The mean number of visits for those children in the program seven or more months was 8.62, suggesting that the program staff focused on completing the monthly visits.

Parent Group Meetings

All but one of the programs (Sand Springs) reported that they conducted parent group meetings in this year.¹ Parent group meetings were held in schools, early childhood centers, community centers, churches, libraries, and parks. The group meetings gave parents an opportunity to learn from and support each other, observe their children with other children, and practice new skills. The programs held a total of 1,103 meetings and averaged 14.33 meetings per program, exceeding the program goal of one meeting per month. The programs hosted by the school districts of Union (65), Bartlesville (43) and Oklahoma City (42) provided the most parent meeting opportunities. Attendance at meetings ranged widely, depending on the community size. As a group, the mean number of parents in attendance was 8.12 regardless of program size. This year, the OPAT programs offered substantially fewer meetings compared to 2009-10 when 1,298 meetings were offered.

¹ After numerous attempts by OTAC to obtain the information, the Sand Springs director reported that the program held weekly meetings but the specific number of meetings held and the number of parents that participated was not provided.

Developmental and Health Screening Services

The *Ages and Stages Questionnaires* (ASQ) instrument, recommended by Parents As Teachers, was used by the Oklahoma programs to provide developmental screening for participants. The Oklahoma State Department of Education provided training in the appropriate use of this instrument at the beginning of the program year. Qualified parent educators were responsible for its administration. Children older than four months of age were to be screened within the first two months of their participation in OPAT. Children who continue in the program must be re-screened each year. Children who exhibit developmental delays were referred to appropriate public and private service providers such as Sooner Start, county health departments, or pediatricians.

The goal of the OPAT program is to screen 100 percent of eligible children each year. (As noted above, children younger than four months of age cannot be screened.) Some children who receive annual developmental assessments from other agencies (e.g., Sooner Start) do not need to be screened by OPAT. In addition, some participants leave the program before their children can be screened.

An important decision in the OSDE's decision to continue program funding is the degree to which each OPAT grantee met screening goals. Program-by-program statistics on the number of children screened, excused, and unscreened may be found in the last section of the report, Goal Achievement. Overall, OPAT programs appeared to have met their goal of screening all children. This year, 86.0 percent of the participants were screened by OPAT and another 11.1 percent were excused for reasons cited above (e.g., age, screened by another agency). Only 2.9 percent of the children served through OPAT should have received screening but did not. Most

programs reported the reasons that children were not screened. In many cases, the family moved from the districts just prior to the screening process.

In addition to the developmental screenings, OPAT programs are also required to provide health screening services to all of the children enrolled. According to data submitted by the grantees, 92.3 percent of children received health screening. Program-by-program statistics are included in the Goal Achievement section.

The percentage of OPAT children age 19-35 months who have received appropriate immunizations continues to increase each year. The average in 2005-06 was 87.7. It climbed to 91.3 percent in 2007-08 and rose to an all time high of 93.8 in 2010-11. OPAT's efforts are reflected in the increase in immunization rates across Oklahoma for all children. In 2005, Oklahoma ranked 44th in the nation in child immunization rates compared to 16th in 2010 (Oklahoma Department of Health, Disease and Prevention Services. *Oklahoma Immunization Update*, 2010).

Outcomes

Determining the effectiveness of the OPAT program on the cognitive development of young children is a principal goal of the program evaluation. As noted previously, outcomes for children are evaluated through annual administration of the *Ages & Stages Questionnaires* (Bricker & Squires, 1999), a low-cost method for reliably assessing children for developmental delays. The emphasis of the instrument is on detecting delays and potential delays; thus, it does not assess the full range of cognitive ability.

ASQ pre-test and post-test scores were available for 2,386 children, permitting statistical analysis of changes in participants' developmental risk levels. Children are tested only once per

year and many children had not yet completed the three-year program. Their pre-tests and posttests were less than three years apart. Therefore, the results should be considered as an *underestimate* of the true effects of the program.

Within two months of entry into the OPAT program, an initial ASQ is administered to each child.² In subsequent years, an age-appropriate form of the ASQ is administered annually. The average number of months between the initial ASQ and the most recent ASQ was 13.70 months – approximately a third of the length of the OPAT program. These results, then, are a conservative estimate of the effects of the program.

Two sets of statistical analyses were conducted: (1) an analysis of the ASQ scale scores and (2) an analysis to determine whether there was a change in the proportion of children who scored in the “at risk” range on the ASQ. The first analysis was conducted principally to help understand the properties of ASQ scores over time. The second analysis was the more important one – the analysis designed to answer the research question: “Is participation in OPAT related to changes in the at-risk levels of children?”

Analysis 1. An initial set of *t*-tests was conducted on the ASQ scale scores. The ASQ scale scores are derived scores that theoretically remain fairly constant unless a child’s normative standing changes – that is, unless there are changes in a child’s developmental progress when compared to other children. *We would, therefore, expect no change unless OPAT participants progressed at a faster rate than the norm group.*³ This set of tests was exploratory only, as the ASQ scores lack sufficient variance for powerful statistical analyses due to their limited scale. The instrument was designed to detect developmental delays and therefore does

²The ASQ cannot be administered until the child is four months old. Parents who enter OPAT before the birth of their child may not be administered the “pretest” until their child is four months old.

³Although these scores range from 5 to 70, the scoring procedure always results in a multiple of five, resulting in a 14-point rather than a 70-point scale.

not test the limits of children's development. In other words, most children score near the top and there is limited room for them to improve.

For this preliminary look at changes in ASQ scores, the subtest scores were combined into a "total score" and a *t*-test was conducted.⁴ The mean initial score (pre) was 52.89; the mean second (post) score was 53.82. The difference was statistically significant [$t(2386) = 6.667, p = .000$], indicating a reliable positive change in ASQ scores for OPAT participants. An effect size of .14 standard deviations was calculated on these scaled scores. An effect size of one-third of a standard deviation (.33) is generally accepted as a substantial educational intervention; an effect size such as the one observed in this analysis (.14) is regarded as important. Approximately half of the children tested were enrolled in the program for 12 months or more. The effect size (.23) was greater for these children. It should be emphasized that the ASQ does not test the full range of cognitive ability; because of the limited range of scores, we would not expect a large effect size.

Statistically significant differences in children's first and most recent ASQ scores were noted on the Communication, Gross Motor, Fine Motor, and Personal Social subtests. As in previous years, only the Problem-Solving subtest did not produce positive gains. The average change in scores on these four subtests ranged from 0.54 scale points to 1.63.

Analysis 2. The purpose of this analysis was to determine if participation in OPAT reduced the child's risk of school failure. This procedure was designed as a part of a longitudinal study that was a part of the original evaluation plan for OPAT.⁵ The study was

⁴An omnibus significance test is much preferred over the analysis described here. The nature of the ASQ and its scores, however, mitigated against a multivariate analysis with at least five dependent variables – there is simply not enough variance to partition. The *t*-test analysis was conducted for exploratory purposes only, to facilitate an understanding of the amount of change in ASQ scale scores.

⁵Because of program attrition and lack of funding, the longitudinal study was abandoned.

designed so that, once OPAT participants were school age, the principal analysis would determine whether children who initially scored in the At Risk range on their pre-program ASQ demonstrate school achievement levels within the normal range.

The analysis provided a preliminary look at OPAT’s effects on reducing risk. Statistical tests were conducted to determine whether the children showed a reduction in the number of subtest scale scores in the At Risk range. For the purposes of this analysis, a child was classified as “at risk” if he or she had at least one subtest score in the At Risk range. A two-way chi square test was conducted on children’s risk status on the initial measure and the most recent measure.

Four situations were possible:

- the child was classified At Risk on both the initial measure (pre) and on the most recent measure (post),
- the child was At Risk on the pre-ASQ but not on the post (positive change),
- the child was Not At Risk on the pre, but was on the post (negative change), and
- the child was Not At Risk on either administration of the ASQ.

It is important to note that children face more at-risk factors as they age. A number of indicators of developmental delays cannot be assessed until children are old enough to begin creeping, crawling, walking, and talking. Because of this factor, we always expect some number of children to initially score as Not At Risk and later score in the At Risk range. Table 4 show the number of children who fell in each of the categories.

Table 4. Pre-post ASQ rating of children who participated in OPAT, 2010-11.			
		Most Recent ASQ	
		Not At Risk	At Risk
Initial ASQ	Not At Risk	1,976	150
	At Risk	202	58

The analysis presented in Table 4 included 2,386 children. The results presented indicate the following:

- 58 children were classified At Risk on both the pre-ASQ and the post-ASQ,
- 202 children were At Risk on the pre-ASQ but not on the post (positive change),
- 150 children were Not At Risk on the pre-ASQ but were At Risk on the post (negative change), and
- 1,976 were Not At Risk on either administration of the ASQ.

Because ASQ scores are not perfectly accurate, there is always some error in the instrument's classification of children as "at risk." To determine whether the number of children who changed categories was statistically significant, a chi square analysis was conducted. The results indicated that children were more likely to be classified as At Risk on the initial ASQ than on their most recent ASQ ($\chi^2 = 67.73$, $p = 0.000$). On the initial ASQ, 10.9 percent of children had at least one At Risk score. On the most recent ASQ, only 8.7 percent scored in the At Risk range on any subtest. Of children who had at least 24 months between pre- and post-test, 6.6 percent scored in the At Risk range. *The longer children participated in the program, the less likely they were to be classified as At Risk.*

OPAT Staff Surveys

The purpose of the Parent Educator Survey and the Program Coordinator Survey was to provide more insight into the roles of the local OPAT staff. Both instruments were emailed to the project directors in Adobe Acrobat format. The directors and coordinators completed the surveys and returned them to OTAC by email. Copies of the instruments were also provided at the OPAT spring conference for those who preferred a paper copy.

Parent Educator Survey

The Parent Educator Survey consisted of 12 questions. The first 11 questions asked parent educators to choose from a list of provided responses. The last question asked parent educators to describe their best practices. This year, 118 parent educators from 78 programs returned completed surveys. The following section lists participant responses to each survey question.

1. How many hours a week do you work as a parent educator?

Responses	Percent of Respondents
1 to 10 hours	23.7%
11 to 20 hours	24.6%
21 to 30 hours	28.8%
31 to 40 hours	21.2%
More than 40 hours	1.7%

2. How many hours a week are worked outside the traditional work day? (8 to 5, Monday-Friday)?

Responses	Percent of Respondents
1 to 10 hours	83.6%
11 to 20 hours	14.7%
21 to 30 hours	.9%
31 to 40 hours	.9%
More than 40 hours	---

3. In addition to being a parent educator, are you a certified teacher?

Responses	Percent of Respondents
Yes	46.6%
No	53.4%

4. If yes, are you currently employed as a full-time teacher (in addition to your OPAT work)?

Responses	Percent of Respondents
Yes	25.0%
No	75.0%

5. How many college courses have you taken in Early Childhood?

Responses	Percent of Respondents
None	15.4%
1-2	12.0%
3-5	16.2%
6-8	7.7%
9 or more	48.7%

6. What is the level of education you have completed?

Responses	Percent of Respondents
Child Development Associate (this is not a degree, but requires 120 clock hours of training; respondents frequently write it in, so it was included as a response)	9.6%
Associate's Degree (A.A.)	16.7%
B.A. or B.S.	56.5%
M.A. or M.S.	13.9%
High School	4.3%

7. If you have a college degree, in what field?

Responses	Percent of Respondents
Early Childhood	26.1%
Elementary Education	32.6%
Childhood Development/Family Relations	10.9%
Social Work	3.3%
Other	27.2%

8. If you do not have a college degree, how many college credit hours have you completed?

Responses	Percent of Respondents
Less than 12	11.8%
12-24	11.8%
25-48	8.8%
49-60	20.6%
More than 60	47.1%

9. How many years of service do you have in OPAT?

Responses	Percent of Respondents
0-5 years	47.5%
6-10 years	15.3%
11-15 years	18.6%
More than 15 years	18.6%

10. How many personal visits are you expected to complete each month?

Responses	Percent of Respondents
1-15	25.4%
16-25	29.7%
26-40	34.9%
41-50	8.5%
More than 50	2.5%

11. How many personal visits do you usually complete each month?

Responses	Percent of Respondents
1-15	24.6%
16-25	29.7%
26-40	33.1%
41-50	9.3%
More than 50	3.4%

The final survey question asked parent educators to describe *practices that help your program be successful*. Seventy-nine parent educators (67%) responded to this question. Responses described specific program practices, but several commonalities among the best practices were found. Commonalities, or themes, among surveys included collaboration with public agencies, meeting locations, communication with clients, program resources, and program locations. Representative best practices included:

- *We have great partnerships in our community. Most of our partnerships are under the ECRC umbrella which is the Early Childhood Resource Center. We also have a good referral system through the hospital.*
- *We utilize a weekly Stay and Play Group inside the school building that helps to retain families and allow those on a waiting list to be part of the program.*
- *I attended the elementary teachers weekly meeting and received 10 new referrals.*
- *Giving presentations to local groups such as Head Start, Tribal Agencies, day care centers and alternative programs has proved to be very successful.*
- *Being an instructor for the local Adult Basic Education course put me in touch with many single parents. We also have a Lap Sit storytime at the public library each month to promote the program and recruit new families.*
- *The local school library has been made available to all of our OPAT parents and we always put group meeting pictures and articles in the local paper.*

Program Coordinator Survey

The Program Coordinator Survey was completed by 73 of the program coordinators. The survey consisted of 11 questions, 10 multiple choice and one open-ended. The open-ended question asked coordinators to describe *what resources or training would benefit your program most?* The following section lists participant responses to each of the survey questions.

1. Where is your program office or headquarters housed?

Responses	Percent of Response
Elementary School	31.5%
Early Childhood Center	17.8%
County Health Department	2.7%
Non-profit agency	2.7%
Special Services building	9.6%
Other	35.6%

2. Where do you hold the majority of your parent meetings?

Responses	Percent of Response
Elementary School	41.1%
Early Childhood Center	21.9%
County Health Department	4.1%
A non-profit agency	4.1%
Special Services Building	5.5%
Other	23.3%

3. What steps did you take to recruit at-risk families? *Mark all that apply.*

Responses	Percent of Response
Collaborate with SoonerStart, DHS, and Health Departments	83.6%
Contact alternative education programs for teen parents	83.6%
Distribute brochures at public places	89.0%
Work with Title I schools or public housing apartments	67.1%
OB/GYNs, pediatricians, and hospitals	47.9%
Local press coverage or internet	60.3%
Word of mouth	95.9%
Other	49.3%

4. Of the steps marked in item three, which one is the *primary* recruitment method for at-risk families? *Mark only one.*

Responses	Percent of Response
Collaborate with SoonerStart, DHS, and Health Departments	15.1%
Contact alternative education programs for teen parents	19.2%
Distribute brochures at public places	2.7%
Work with Title I schools or public housing apartments	27.4%
OB/GYNs, pediatricians, and hospitals	-----
Local press coverage or internet	2.7%
Word of mouth	30.1%
Other	2.7%

5. How much are your parent educators paid per hour?

Responses	Percent of Response
Less than \$9.00	1.4%
\$9.01-\$12.00	20.8%
\$12.01-\$15.00	48.6%
\$15.01-\$18.00	13.9%
\$18.01 or higher	15.3%

6. How many families were *typically* on waiting lists for services this year?

Responses	Percent of Response
Our program did not have a waiting list	69.9%
5 or fewer families	17.8%
6-10 families	5.5%
More than 10 families	6.8%

7. Did your program receive any additional funds this year?

Responses	Percent of Response
Yes	13.9%
No	86.1%

8. If so, how many families were served with additional funds?

Responses	Percent of Response
Less than 20 families	80.0%
20-35 families	10.0%
36-50 families	10.0%
More than 65 families	--

9. Indicate the outside agencies or organizations that your program collaborates with. *Mark all that apply.*

Responses	Percent of Response
Head Start	71.2%
SoonerStart	78.1%
County Health Department	68.5%
DHS	60.3%
Public Libraries	67.1%
Health Clinics	43.8%
Civic Organizations	42.5%
Other	46.6%

10. Choose which auxiliary services your offer. *Mark all that apply.*

Responses	Percent of Response
Drop in Play	43.8%
Toy/book lending library	87.7%
Newsletter	80.8%
Reading/story time	35.6%
Clothing/supply closet	37.0%
Other	42.5%

11. What resources or training would benefit you most?

Thirty-two project coordinators responded to this question. Representative suggestions included:

- *Grant search and writing workshops to find additional support.*
- *Training on importance of reflective listening when staffing families.*
- *Training on Autos, Car Seat Safety, SIDS, Teen Parenting, Hearing and Vision, and Focus on Safety During Home Visits have all been beneficial ideas to pass along to our Parent Educators.*
- *I need resources like books to give to families to keep and trainings on working with teens and young families and special needs children.*
- *I would love some new ideas for group time, guest speakers, and making home-made toys.*
- *It would be nice to have some assistance with basic use of electronic media and an opportunity to brainstorm with other programs possibly using the web.*

Survey Summary

Each year, the Parent Educator and Program Coordinator Surveys are reviewed and data collection procedures examined to ensure the quality of information collected and to address specific program issues and concerns. Consequently, multi-year comparisons of survey results are not available; however, those items that remained consistent are presented in Table 5.

Question	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11
Parent Educators – Degree status, B.A./B.S. or more?	71.1%	67.5%	71.3%	79.2%	75.4%	70.4%
Parent Educators - Six or more years of service in PAT?	40.9%	45.8%	51.5%	53.0%	52.0%	52.5%
Parent Educators - work more than 20 hours per week?	46.3%	44.2%	55.3%	48.7%	50.8%	51.7%
Program - Waiting list?	40.4%	41.4%	52.2%	36.1%	43.7%	30.1%

Results from the Parent Educator and Program Coordinator surveys displayed in Table 5 indicate that OPAT programs have employed experienced, well-educated parent educators. For the past six years, two-thirds or more of OPAT’s parent educators held a Bachelor degree or higher. In the past four years, 50 percent of parent educators had six or more years of service with PAT. Approximately one-half of all parent educators worked more than 20 hours a week. Waiting lists were maintained by approximately a third of the programs.

The Parent Educator survey asked respondents to report the number of personal visits they expected to conduct each month and the number of personal visits they actually completed. Table 6 lists the percentage of responses to each range of visits provided on the survey.

Table 6. Comparison of expected and actual visits reported on surveys.		
Range of Visits	Percent of Respondents to Expected Visits	Percent of Respondents to Actual Visits
1-15	25.4%	24.6%
16-25	29.7%	29.7%
26-40	34.9%	33.1%
41-50	8.5%	9.3%
More than 50	2.5%	3.4%

OSDE expected parent educators to conduct one personal visit to program families eight of the twelve program months. Data indicate that parent educators conducted their required visits. The differences between the range of expected visits and the actual range of visits accomplished were due to inclement weather and families entering and exiting the program.

OPAT programs collaborated with a variety of public agencies to recruit at-risk families, and to provide basic services to program families. Word of mouth was reported to be the primary method of recruitment by 30 percent of respondents. Other recruitment methods included working with Title I school or public housing apartments (27.4%), contacting alternative education programs for teen parents (19.2%), and collaborating with SoonerStart,

DHS, and health departments (15.1%). Programs entered into partnerships with agencies to gain services for families. Parent educators reported collaborating health providers including SoonerStart (78.1%), Head Start (71.2%), County Health Departments (68.5%) and the Department of Human Services (60.3%). Parent educators also collaborated with community resources such as the public libraries (67.1%) and civic organizations (42.5%) to garner community support for OPAT and solicit donations to the program.

Goal Achievement: Individual Programs

Each month the programs sent OTAC their data regarding the progress made in meeting goals for personal visits and development screening. This monthly data review allowed for the early identification of problem areas as well as an opportunity to provide program directors with feedback. Table 7 lists the number of visits each program was required to complete each month and the number of months each program met that standard. A column is also included that lists the total number of teen consultations (teen consultations are not included in the number of personal visits). Programs that served a substantial number of teens may not show that they attained their monthly minimum until teen consultations are taken into account.

Information on developmental screening is presented on the right side of Table 7. It shows the number of children screened during the 2010-11 school year, the number of children “excused” from the screening requirement because they were too young (less than four months of age) or had not received at least two visits, the number of children who should have been screened but were not. Finally, the percentage of eligible children who were screened is listed.

Table 7. Goal achievement data by program.

District Name	Total # of Children Served	Monthly Minimum Visits	# of Months Minimum Visits Met	# of Teen Consultations	# of Children Screened	# of Children Excused from Screening	# of Children Not Screened	Percentage Screened
Ada	72	40	9	2	71	1	0	100%
Altus	26	25	0		20	1	5	80%
Anadarko	72	40	10		65	6	1	99%
Ardmore	68	40	10		66	2	0	100%
Avant/Pawhuska	51	40	3		41	9	1	98%
Bartlesville	118	65	10		85	23	10	90%
Bethany	55	40	10		51	2	2	96%
Bixby	93	65	8		80	9	4	95%
Bristow	53	40	1	1	46	6	1	98%
Broken Arrow	134	90	10	1	130	3	1	99%
Caney Valley/Copan	59	40	10		49	6	4	93%
Checotah	6	40	0	1	3	2	1	75%
Chickasha	52	40	0	2	47	5	0	100%
Chouteau-Mazie	64	40	10		56	8	0	100%
Claremore	56	40	9		51	5	0	100%
Crescent	39	25	8		35	2	2	95%
Dewey	53	40	10		47	5	1	98%
Durant	88	65	10		85	1	2	98%
Enid	142	65	10	8	129	13	0	100%
Ft. Gibson	21	25	0		19	2	0	100%
Gearly	34	40	0	3	28	6	0	100%
Glenpool	59	40	1		57	2	0	100%
Grove/South Rock Creek	33	25	4		33	0	0	100%
Guthrie	111	65	6	17	91	20	0	100%
Heavener	35	25	7	2	28	7	0	100%
Hobart	33	25	10		30	3	0	100%
Hominy	39	25	9		38	1	0	100%
Hugo	51	40	3		51	0	0	100%
Idabel	68	40	9		60	5	3	95%

Table 7. Goal achievement data by program.

District Name	Total # of Children Served	Monthly Minimum Visits	# of Months Minimum Visits Met	# of Teen Consultations	# of Children Screened	# of Children Excused from Screening	# of Children Not Screened	Percentage Screened
Jenks	165	90	5	13	130	25	10	93%
Kingfisher	11	25	0	4	9	1	1	90%
Little Axe	37	25	8	4	36	1	0	100%
Locust Grove	42	40	1	41	30	12	0	100%
Mannford	41	40	0		29	0	12	71%
Maryetta	27	25	5		25	1	1	96%
McAlester	60	40	4	1	49	8	3	94%
Meeker	32	25	0	17	26	3	3	90%
Midwest City-Del City	120	102	0		98	16	6	94%
Minco	27	25	1		24	3	0	100%
Morrison	31	25	5	2	28	3	0	100%
Muldrow	52	40	7	65	49	3	0	100%
Newkirk	33	25	5		29	1	3	91%
Noble	60	40	9	1	57	1	2	97%
Norman	126	90	1	238	88	20	18	83%
Oklahoma City Public	121	60	10		103	17	1	99%
Oklahoma City	270	160	5		224	45	1	99%
Osage Hills/Bowring/S. Coffeyville	30	25	1		27	3	0	100%
Perkins	62	40	8		59	3	0	100%
Perry	59	40	2		49	8	2	96%
Pioneer-Pleasant Vale	33	25	6		29	4	0	100%
Pocola	57	40	0	18	51	6	0	100%
Poteau	49	40	10	87	48	1	0	100%
Pryor	62	40	10		57	5	0	100%
Putnam City	201	120	10	1	172	29	0	100%
Salina	27	25	0	1	21	5	1	96%
Sand Springs	55	40	3	23	50	5	0	100%
Sapulpa	47	25	10		45	1	1	98%

Table 7. Goal achievement data by program.

District Name	Total # of Children Served	Monthly Minimum Visits	# of Months Minimum Visits Met	# of Teen Consultations	# of Children Screened	# of Children Excused from Screening	# of Children Not Screened	Percentage Screened
Shawnee	71	65	0	12	47	22	2	96%
Shidler	34	25	1		26	6	2	93%
Silo	18	25	0	4	15	2	1	94%
Skiatook	40	25	10		37	3	0	100%
Stigler	41	40	3		41	0	0	100%
Stratford	22	25	0		5	0	17	23%
Sulphur	61	40	9		58	3	0	100%
Swink/Ft. Towson/Forest Grove	22	25	0		18	4	0	100%
Tahlequah	82	65	9	49	67	11	4	94%
Tecumseh	46	40	0		46	0	0	100%
Tulsa	298	160	10		255	40	3	99%
Tulsa Public Housing	77	60	1	10	69	7	1	99%
Union	144	90	2	64	103	33	8	93%
Verdigris	33	25	6		29	3	1	97%
Vian	51	25	7	2	37	12	2	95%
Watts/Peavine	34	25	9	117	30	3	1	97%
Wellston	46	25	9		41	5	0	100%
Westville	12	25	0	1	9	3	0	100%
Woodland/Wynona	36	25	4		32	4	0	100%
Woodward	43	40	1		41	2	0	100%
Wright City/Glover	33	25	7		31	2	0	100%

APPENDIX

Table A1. Program reporting					
District	County	Funded Amount (in dollars)	Parent Educator Survey	Program Coordinator Survey	Monthly Report
Ada	Pontotoc	\$ 21,000	1	1	X
Altus	Jackson	\$ 13,500			X
Anadarko	Caddo	\$ 21,000	3	1	X
Ardmore	Carter	\$ 21,000	3	1	X
Avant/Pawhuska	Osage	\$ 21,000	1	1	X
Bartlesville	Washington	\$ 35,000	3	1	X
Bethany	Oklahoma	\$ 21,000	1	1	X
Bixby	Tulsa	\$ 35,000	1	1	X
Bristow	Creek	\$ 21,000	1	1	X
Broken Arrow	Tulsa	\$ 48,500	3	1	X
Caney Valley/Copan	Washington	\$ 21,000	1	1	X
Checotah	McIntosh	\$ 21,000	1	1	X
Chickasha	Grady	\$ 21,000	2	1	X
Chouteau-Mazie	Mayes	\$ 21,000	2	1	X
Claremore	Rogers	\$ 21,000	1	1	X
Crescent	Osage	\$ 13,500	1	1	X
Dewey	Washington	\$ 21,000			X
Durant	Bryan	\$ 35,000	5	1	X
Enid	Garfield	\$ 35,000		1	X
Fort Gibson	Muskogee	\$ 13,500	1		X
Geary	Blaine	\$ 21,000	1	1	X
Glenpool	Tulsa	\$ 21,000	2	1	X
Grove	Pottawatomie	\$ 13,500	1	1	X
Guthrie	Logan	\$ 35,000	3	1	X
Haworth	McCurtain	\$ 13,500			
Heavener	Leflore	\$ 13,500	1	1	X
Hobart	Kiowa	\$ 13,500	1	1	X
Hominy	Osage	\$ 13,500	1	1	X
Hugo	Choctaw	\$ 21,000		1	X
Idabel	McCurtain	\$ 21,000	1	1	X
Jenks	Tulsa	\$ 48,500	4	1	X
Kingfisher	Kingfisher	\$ 13,500	1	1	X
Little Axe	Cleveland	\$ 13,500	1	1	X
Locust Grove	Mayes	\$ 21,000	1	1	X
Mannford	Creek	\$ 21,000	1	1	X
Maryetta	Adair	\$ 13,500		1	X
McAlester	Pittsburg	\$ 21,000	1	1	X
Meeker	Lincoln	\$ 13,500	1	1	X
Midwest City-Del City	Oklahoma	\$ 51,030	3	1	X
Minco	Grady	\$ 13,500	1	1	X
Morrison	Noble	\$ 13,500	2	1	X
Muldrow	Sequoyah	\$ 21,000	1	1	X
Newkirk	Osage	\$ 13,500	1	1	X
Noble	Cleveland	\$ 21,000	1	1	X
Norman	Cleveland	\$ 48,500		1	X
Oklahoma City	Oklahoma	\$ 84,000	5	1	X
Osage Hills Consortium	Osage	\$ 13,500	1	1	X

Table A1. Program reporting					
District	County	Funded Amount (in dollars)	Parent Educator Survey	Program Coordinator Survey	Monthly Report
Perkins-Tryon	Payne	\$ 21,000	1	1	X
Perry	Noble	\$ 21,000	1	1	X
Pioneer-Pleasant Vale	Garfield	\$ 13,500	1	1	X
Pocola	LeFlore	\$ 21,000		1	X
Poteau	LeFlore	\$ 21,000	2	1	X
Pryor	Mayes	\$ 21,000	1	1	X
Putnam City	Oklahoma	\$ 63,000	5	1	X
Salina	Mayes	\$ 13,500	2	1	X
Sand Springs	Tulsa	\$ 21,000	1	1	X
Sapulpa	Creek	\$ 13,500	2	1	X
Shawnee	Pottawatomie	\$ 35,000	2	1	X
Shidler	Osage	\$ 13,500	2	1	X
Silo	Bryan	\$ 13,500	1	1	X
Skiatook	Tulsa	\$ 13,500	1	1	X
Stigler	Haskell	\$ 21,000	1	1	X
Stratford	Garvin	\$ 13,500	1	1	X
Sulphur	Murray	\$ 21,000	2	1	X
Swink/Ft. Towson/Forest Grove (S	McCurtain	\$ 13,500	1	1	X
Tahlequah	Cherokee	\$ 35,000	2	1	X
Tecumseh	Pottawatomie	\$ 21,000	1	1	X
Tulsa	Tulsa	\$ 84,000	10	1	X
Union	Tulsa	\$ 48,500	3	1	X
Verdigris	Rogers	\$ 13,500	1	1	X
Vian	Sequoyah	\$ 13,500	1	1	X
Watts/Peavine	Adair	\$ 13,500	1	1	X
Wellston	Lincoln	\$ 13,500	1	1	X
Westville	Adair	\$ 13,500	1	1	X
Woodland/Wynona	Osage	\$ 13,500	1	1	X
Woodward	Woodward	\$ 21,000	1	1	X
Wright City/Glover	McCurtain	\$ 13,500	1	1	X

Oklahoma Technical Assistance Center
Oklahoma Parents as Teachers
Program Coordinator Survey 2011

District _____

Person completing form _____

Where is your program office or headquarters housed?

- Elementary School Non-profit agency
 Early Childhood Center Special Services building
 County Health Department Other

Where do you hold the majority of your parent meetings?

- Elementary School Non-profit agency
 Early Childhood Center Special Services building
 County Health Department Other

What steps did you take to recruit at-risk families? *Mark all that apply.*

- Collaborate with SoonerStart, DHS, and health departments
 Contact alternative schools for teen parents
 Distribute brochures at public places
 Work with Title I schools or public housing apartments
 OB/GYNs, pediatricians, and hospitals
 Local press coverage or Internet
 Word of mouth
 Other

Of the steps marked above, which one is the primary recruitment method for at-risk families? *Mark only one.*

- Collaborate with SoonerStart, DHS, and health departments
 Contact alternative schools for teen parents
 Distribute brochures at public places
 Work with Title I schools or public housing apartments
 OB/GYNs, pediatricians, and hospitals
 Local press coverage or internet
 Word of mouth
 Other

How much are your parent educators paid per hour?

- Less than \$9.00
 \$9.01 - \$12.00
 \$12.01 - \$15.00
 \$15.01 - \$18.00
 \$18.01 or higher

Continuing on following page.

How many parent educators are employed by your program?
Include yourself if you are also a parent educator.

How many families were *typically* on waiting list for services this year?

- Our program did not have a waiting list
- 5 or fewer families
- 6 - 10 families
- more than 10 families

Did your program receive any additional funds this year?

- Yes
- No

If, so how many families were served with additional funds?

- Less than 20 families
- 20 to 35 families
- 36 to 50 families
- more than 65 families

Indicate if your program collaborates with any of the following outside agencies or organizations. **Mark all that apply.**

- | | |
|--|---|
| <input type="radio"/> Head Start | <input type="radio"/> Public Libraries |
| <input type="radio"/> Sooner Start | <input type="radio"/> Health Clinics |
| <input type="radio"/> County Health Department | <input type="radio"/> Civic Organizations |
| <input type="radio"/> DHS | <input type="radio"/> Other |

Choose which auxiliary services you offer. **Mark all that apply.**

- | | |
|--|--|
| <input type="radio"/> Drop In Play | <input type="radio"/> Reading/story time |
| <input type="radio"/> Toy/book lending library | <input type="radio"/> Clothing/supply closet |
| <input type="radio"/> Newsletter | <input type="radio"/> Other |

What resources or training would benefit you most? Write your answer in the space below.

Thank you for answering this survey.

Submit by Email

Oklahoma Technical Assistance Center
Oklahoma Parents as Teachers
Parent Educator Survey 2011

Submit by Email

District

Person Completing form

Answer this survey if you serve families as a **Parent Educator**. Please note: If you are a Program Coordinator and also a Parent Educator, answer this section for the Parent Educator portion of your time.

1. How many hours per week do you work as a parent educator?
 1-10 hours 11-20 hours 21-30 hours 31-40 hours more than 40 hours
2. How many hours a week are worked outside the traditional work day? (8 to 5, Monday-Friday)
 1-10 hours 11-20 hours 21-30 hours 31-40 hours more than 40 hours
3. In addition to being a parent educator, are you a certified teacher? Yes No
4. If yes, are you currently employed as a full-time teacher (in addition to your OPAT work)? Yes No
5. How many college courses have you taken in Early Childhood?
 None 1-2 3-5 6-8 9 or more
6. What is the highest level of education you have completed?
 CDA Associate B.A. or B.S. M.A. or M.S. High School
7. If you have a college degree, in what field?
 Early Childhood Elementary Education Childhood Development/Family Relations Social Work Other
8. If you do not have a college degree, how many college credit hours have you completed?
 Less than 12 12-24 25-48 49-60 more than 60
9. How many years of service do you have in OPAT?
 0-5 years 6-10 years 11-15 years more than 15 years
10. How many personal visits are you expected to complete each month?
 1-15 16-25 26-40 41-50 more than 50
11. How many personal visits do you usually complete each month?
 1-15 16-25 26-40 41-50 more than 50

In the box below, we would like for you to tell us about practices that help your program be successful.



Oklahoma Technical Assistance Center

July 20, 2011

Erin Nation
Early Childhood/Family Education Coordinator
Oklahoma Department of Education
2500 North Lincoln Boulevard
Oklahoma City, OK 73105

Dear Erin,

The Oklahoma Technical Assistance Center (OTAC) has compiled and analyzed the data submitted by the 78 Oklahoma Parents as Teachers (OPAT) grantees. Throughout the year, we have worked with each of the programs to ensure timely and consistent reporting of activities. This year all of the funded programs have fulfilled the reporting requirements.

Attached is a table that lists the number of months that each program met its monthly minimum requirements and the percentage of eligible children who received developmental screening. The attached table presents preliminary totals through July 2011. We have not yet contacted local programs to resolve discrepancies, so the numbers reported here are preliminary.

Programs were rated as *either Recommended for continued funding, Recommended for continued funding with reservations, or Not recommended for continued funding.*

Criteria for ratings are:

- (1) *Recommended for continued funding*: the program met the minimum requirements and screened at least 95% of eligible children.
- (2) *Recommended for continued funding with reservations*: the program data indicated that full compliance with OPAT goals were not achieved.
- (3) *Not recommended for continued funding*: the program suffered major implementation issues that may result in the termination of funding; alternately, the State Department of Education may require them to submit a plan of improvement.

(1) *Recommended for continued funding*:

Ada
Anadarko
Ardmore
Bethany
Bixby
Broken Arrow
Chouteau-Mazie
Claremore
Crescent
Dewey

Durant
Enid
Heavener
Hobart
Hominy
Idabel
Little Axe
Muldrow
Noble
Oklahoma City Public Housing
Perkins-Tryon
Poteau
Pryor
Putnam City
Sapulpa
Skiatook
Sulphur
Tahlequah
Tulsa
Verdigris
Vian
Watts/Peavine
Wellston
Wright City/Glover

(2.a) The following programs are *recommended for continued funding with reservations*. These programs were unable to meet all requirements to qualify for *Recommendation for continued funding* but made *notable efforts to reach program guidelines*.

- Bartlesville - screened 90% of eligible children and met monthly visitation requirements for 10 months.
- Caney Valley/Copan - screened 93% of eligible children and met monthly visitation requirements for 10 months.
- Guthrie - screened 100% of eligible children but only met their monthly visitation target for 6 months.
- Pioneer-Pleasant Valley - screened 100% of eligible children but only met monthly visitation target for 6 months.

(2.b) The following programs are *recommended for continued funding with reservations*:

- Avant/Pawhuska program screened 97.6% of eligible children but only met the monthly visitation target for three months.
- Bristow program screened 97.9% of eligible children. Although the program only met the monthly visitation target one month, they were close for at least five other months.
- Checotah was a first-year program. The most children served in any one month was five; the program never showed an increase of enrollment. Even with the low number of children served (8), only 75% were screened.

- Chickasha was in its second year of funding having been *recommended with reservations* last year. The program was able to screen 100% of their eligible children. They were unable to meet their monthly visitation target of 40; the program averaged 30 monthly visits for the year.
- Fort Gibson was encouraged to apply for a lower funding and participation level for 2010-11. Although their monthly target was reduced to a lower level this year (25), they were still unable to meet these requirements; the highest number of monthly visits was 17. They did screen 100% of their eligible children.
- Geary is *recommended with reservations* for the second year. The program was able to screen 100% of the eligible children, which is an increase from last year's 97.6%. Geary did not meet the monthly visitation target in any of the program months.
- Glenpool screened 100% of the program's eligible children. Although the program only met the visitation target of 40 in one of the months, the average number of monthly visits for the year was 36.
- Grove screened 100% of the program's eligible children and met the monthly minimum in five of the 10 months; the average number of monthly visits for the year was 24.
- Hugo screened 100% of the program's eligible children. Although the program met the monthly minimum (40) in only four months, monthly visits for five months were short by only one visit.
- Jenks screened only 92.9% of eligible children this year and met the monthly visitation requirement in five months. Jenks was also *recommended for funding with reservations* last year.
- Locust Grove had a new parent educator this year. Although the program did not meet the visitation requirements until the end of the year, the monthly visitation numbers grew consistently through the year. All eligible children were screened.
- Mannford is in its second year of funding and was recommended with reservations last year. This year the program screened only 70.7% of eligible children and did not meet the required number of home visits in any of the operating months. The program averaged 35 monthly home visits for the year. A lower funding and participation level may be appropriate.
- Maryetta screened 96.2% of eligible children this year. The program met the monthly visitation target in 5 of the 10 months with an average of 23 visits for the program year.
- McAlester met the monthly visitation minimum for five months and screened 94.2% of eligible children. The program averaged 38.9 monthly visits for the year.
- Midwest City-Del City screened 94.3% of eligible children and did not meet the monthly visitation minimum in any month. This program has been recommended for *funding with reservations in five of the last six years*.
- Minco is recommended for *funding with reservations* again this year because it did not meet the visitation target of 25. All children were screened.
- Morrison screened 100% of eligible children and met the monthly minimum in five of the program months. The program's reporting showed a slow start to the program year, but was able to meet the requirements consistently after the first of the year.
- Newkirk screened 90.6% of eligible children and met the required monthly visitation number in five months. A new parent educator was hired and due to training dates was unable to start making visits until October.
- Norman screened only 83.3% of eligible children this year and met program monthly home visit target in one month. The program's yearly monthly average of home visits was only 77; monthly target was 90 home visits each month.

- Oklahoma City screened 99.6% of the program's eligible children but met the monthly home visits targets in five of the ten months. Although the program was unable to meet their target in the first half of the year, they exceeded the monthly minimum for the second half of the year.
- Osage Hills Consortium screened 100% of the program's eligible children this year. The program met the monthly visitation target for only one month. The program's home visitation monthly average for the year was 22.2; monthly minimum for this program was 25 visits.
- Perry screened 96.2% of the program's eligible children. The program met the monthly home visits minimum during two months of the program year. The program's sole parent educator was on emergency leave for six weeks of the year.
- Pocola screened 100% of the program's eligible children. Although the program failed to meet the monthly home visit minimum in any of the program's operating months, they were short by only 10% or less in most months.
- Salina screened 95.5% of the program's eligible children. Although the program failed to meet the monthly home visit minimum in any of the program's operating months, the program averaged 23 monthly visits for the year; the monthly minimum for this grant was 25.
- Sand Springs was a newly funded grant this year. The program reporting showed that home visitations numbers increased throughout the year with the last three months meeting the target. This program screened 100% of the all eligible children.
- Shawnee was recommended for *funding with reservations* last year. The program screened 95.9% of eligible children this year, which is a decline from last year when 97% of children were screened. Shawnee was unable to meet their monthly visitation requirements in any of the program months this year. The highest number of visitations was 60 (reported for the month of May). The program only averaged 45 monthly visits for the year; monthly minimum for this grant was 65.
- Shidler screened 92.9% of eligible children this year. The program met the monthly home visitation requirements in only one month. The program coordinator notified the evaluator of a slow program start due to the delayed hiring of the parent educator.
- Silo is in its second year of funding and has been recommended for *funding with reservations* for both years of participation. Program participation has increased slightly. Last year's highest number of monthly visits was nine; this year highest value was 14. Program reported visits for only nine operating months with an average 12 monthly home visits; monthly visitation minimum was 25 for this grant. Only 94.4% of eligible children were screened.
- Stigler is in its second year of funding and has been recommended for *funding with reservations* for both years of participation. The program screened 100% of eligible children and met the monthly home visit minimum for three months.
- Stratford was a first-year program. The program was unable to start visiting families until November due to the training schedule for parent educators. Although the program was unable to reach the monthly home visit minimum in any months, the program's number grew with each month of participation. The program only screened 22.7% of eligible children. According to the project director, screening was delayed due to difficulties in obtaining necessary screening materials.
- Swink, Ft. Towson, Forest Gove were also recommended for *funding with reservations* last year. The program screened all eligible children but did not meet the home visitation in any of the program's operating months.
- Tecumseh was also recommended *with reservations* last year. The program screened all eligible children but did not meet the home visitation in any of the program's operating months.

- Union reported screening 87.4% of eligible children and meeting the required home visitation target of 90 in the last two months of the program year. The program director indicated that the program's slow start to the year was due to the late hiring and training of a new parent educator.
- Westville was recommended for *funding with reservations* last year. The program screened 100% of eligible children; the program only served 10 families this year.
- Woodland-Wynona screened all eligible children. The program exceeded the home visitation requirements in four of the program months and was short by only one or two visits in five months.
- Woodward screened all eligible children. The program met the home visitation requirements in only one of the program months but missed the target in six months by less than two visits.

(3) Programs not recommended for continued funding. The SDE may require programs to submit a plan of improvement in order to receive continued funding.

- Altus had been recommended *with reservations* for the last four years. The transient nature of the population in Altus continues to be an obstacle for the program. The program this year only screened 80% of the eligible children enrolled in the program and did not meet the home visitation minimum in any of the program's operating months. The program averaged only 17 home visits monthly for the program year; the monthly target was 25.
- Kingfisher has been recommended *with reservations* since the 2005-06 program year and was not recommended for funding last year. In 2010-11, the program screened 90% of eligible children and was unable to meet the visitation requirement in any month. Project data indicated the highest number of visits completed in any one month was 10, well short of the target of 25.
- Meeker has been recommended for funding with reservations for two years. This recommendation for no continued funding marks the third year of negative ratings. The program screened only 89.7% of eligible children and did not meet the visitation requirements in any month. The program's highest monthly visit number was in January when they made 24 of 25 required home visits.
- Tulsa Public Housing has been recommended with reservations for the last three years. The transient nature of the population in public housing continues to be an obstacle for the program. The program screened 98.6% of eligible children and only met the program's monthly home visitation target of 60 in one month; the program's monthly average of home visits for the year was 51.

Please contact me if you have any questions or concerns.

Sincerely,

Kathy McKean, Ph.D.
Director

OKLAHOMA PARENTS AS TEACHERS (OPAT)
PARENT KNOWLEDGE

District _____

PID _____

PRE or POST (circle one)	Agree	Disagree
1. Babies are not interested in books before age 1.		
2. The more you hold and talk to your crying baby, the more likely you are to spoil him/her.		
3. Frequent ear infections can affect how a child learns to talk.		
4. Playing is the way a child learns.		
5. Experiences, such as touching and playing with objects, send messages to a baby's brain that change its structure.		
6. A well-balanced diet including fat is important for a baby's developing brain.		
7. Most children are not ready to be toilet trained by one year of age.		
8. To stimulate brain connections related to hearing, keep a radio or TV on in the house.		
9. Babies put things in their mouths to learn about them.		
10. Young children understand only the words they can say.		
11. A baby hears and understands better if you talk face-to-face with him/her.		
12. Baby walkers are not good for a child's development.		
13. If a baby isn't walking by the first birthday, there's a problem.		
14. Talking to a baby about things she is doing interferes with his/her learning.		
15. It is O.K. for a baby to spend most of the day in a crib or playpen to keep him/her from wandering around.		
16. Children who feel secure and trust their parents develop different brains than children who do not.		
17. A good way to get babies to sleep is to give them a bottle to lie down with.		
18. Children who are given too much love by their parents often grow up to be stubborn and spoiled.		
19. There is very little need to set limits for a baby before 7 months of age.		
20. A baby who is shy around strangers and clings to mom or dad has an emotional problem.		
21. It's important to talk to babies long before they can understand what you mean.		
22. "Make believe" play helps children's development.		
23. By age 2, babies usually cooperate and share when they play together.		
24. Too much stimulation can be as bad for brain development as too little.		
25. Exploring or "getting into things" is how children learn.		
26. Parents need not worry when spurts in development are followed by a return to earlier behaviors.		
27. A 2-year-old who says "No!" to everything and bosses you around is trying to get you upset.		
28. As long as a child's vision problems are corrected by school age, the vision centers in his brain will develop normally.		
29. Have a regular schedule for sleeping and eating helps babies' development.		
30. Taking children's fears seriously helps them to overcome them.		
31. Your school district promotes the development of children before they enter a school.		
32. Your district is open and helpful to parents.		
33. Your district tries to provide the best possible education for all children at all ages.		

