MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year! 2020

Agency Name: Storytime Childcare

Program Name: Fulltime
Brief Description of Program: Fulltime Childcare from 6 a.m. to 6 p.m.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** No Change

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** Survey Bi-yearly   Twice a year assessments   Time out tracker

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** Brightwheel App implemented to communicate with parents No other changes

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: No changes

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** Have lost 3 Fulltime kids until Covid is more manageable. Storytime has lost 5 kids because of the 24 day quarantine if a member in the childs family has Covid.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** 20 Clients served

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** No Clients turned away

8. **Comments:**

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year! 2020

Agency Name: Storytime Childcare

Program Name: Infant Room
Brief Description of Program: Infant room provides Fulltime care in the Infant Room from 6 a.m. to 6 p.m.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date**: No Change

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** Survey Bi-yearly
   Twice a year assessments

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** Brightwheel App implemented to communicate with Parents
   No other changes

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: Acheived

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** No barriers in Infant Room at this time

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** 8 Clients

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when**? No Clients turned away