



**Early Head Start Program
Annual Report, 09/30/10-9/29/11**

The Foothill Family Service Early Head Start program provides comprehensive child development, health, mental health, and family support services to low-income pregnant women and families with children from 0 to 3 years in the cities of El Monte (91731, 91732, 91734), South El Monte (91733), and parts of La Puente (91746.)

Foothill Family Service's Early Head Start is a 100% Home Based Program, consisting of weekly home visits and group socializations twice per month. Our program is designed to provide each family with opportunities for development in language, cognitive, social, physical and emotional areas. Our strengths-based, relationship-centered approach empowers the parent and encourages the relationship between parent and child. This approach includes ongoing observations and a curriculum that meets the needs of all children, including those with special needs.

School Readiness: Our program is staffed with Home Visitors who are certified parent educators in the *Parents as Teachers-Born to Learn*® evidence-based curriculum with a degree associated with child development. Through the usage of screening and ongoing assessment, each child's curriculum is individualized to encourage growth in all core developmental milestones during home visits and group socializations. The Early Head Start program's work with infants and toddlers ages 0 to 3 is instrumental in building the foundation for all learning.]

During this program year, staff also participated additional training opportunities to strengthen the early childhood development services to ensure school readiness—beginning with expectant families. In March 2011, the program adapted the “Before Baby Arrives” prenatal curriculum, developed by Florida State University as an evidence-based home visiting model for working with pregnant women. Other training opportunities included: The Parent Infant Toddler Curriculum (PITC) Home Visiting Institute; The Math and Sciences Early Learning Institute; and the I Am Moving, I Am Learning (IMIL) Training.

The Early Head Start staff is also trained to connect families to supportive services to remove barriers to learning and healthy growth and development. These services include mental health services, immediate needs assistance, job training and adult education, family violence services, and disabilities services. More intensive social services and mental health programs are readily accessible to our families within Foothill Family Service, which has been serving low-income children and families for many years.

The program has built successful partnerships with Head Start programs in the cities we serve in order to successfully transition children from Early Head Start to Head Start. In February, 2011 a joint workshop was held together with three other Head Starts to inform parents on how to enroll their children into Head Start programs in their neighborhoods. Monthly meetings are held to ensure that transition planning is well underway for all children starting at age 2 ½. The program's Special Services Supervisor monitors all children who have developmental delays when they turn 2.4 years old to ensure that they are connected to their local school district's Special Education programs as needed.

Parent Involvement: We believe in the importance of building and maintaining strong partnerships with our parents. Parents partner together with home visitors during weekly home visits and group socializations. In addition to these components, parent feedback is solicited in planning and organizing relevant topics for monthly parent workshops related to health, development, and parenting. Parent leaders are elected in the program's parent committees, and the Early Head Start Policy Council consists of mostly parents who are actively engaged in program governance along with the Board of Directors.

Program Data:

(The following figures are based on the Program Information Report (PIR) data, which covers the date ranges September 2010 – July 2011.)

Enrollment:

| | |
|--------------------------------|-----|
| Funded Enrollment | 125 |
| Cumulative Enrollment | 188 |
| Total Number of Children | 180 |
| Total Number of Pregnant Women | 8 |
| Total Number of Families | 156 |
| Average Monthly Enrollment | 125 |

Enrollment by Type of Eligibility

| | |
|---|-----|
| Income 100% Below Federal Poverty Line | 103 |
| Receipt of Public Assistance | 59 |
| Foster Children | 4 |
| Homeless Children | 18 |
| Over Income | 1 |
| Income between 100% and 130% of Poverty | 3 |

Medical Screenings

| | |
|---|-----------|
| Children who have received medical and dental exams | 137 (76%) |
| Of those children who have received physical exams, percentage of children diagnosed with a medical condition | 39 |
| Diagnosed children receiving medical treatment | 39 (100%) |

Special Needs

| | |
|--|----------|
| Enrolled Children with a Disability and receiving special services | 33 (26%) |
|--|----------|

The total amount of public and private funds received:

| | |
|-------------------------------------|-------------|
| Total HHS funding through 9/29/2011 | \$1,956,984 |
| Total HHS funding spent this year | \$1,758,477 |
| First Five LA Match received: | 452,225 |

Both are public funds. No private funds received.

Results of the most recent review by the Secretary and the financial audit:

***Head Start Unannounced Federal Review, 01/31/2011 – 02/04/2011,
Summary of the Unannounced Review:***

Program Strengths:

- The program's mental health and serving children and families with special needs are areas of strength for our program, and "inspirational."
- The agency and program have strong partnerships in the community.
- We have identified and accessed excellent community resources for our clients.
- The program areas of communication, governance and planning are established well.
- We have effective, efficient and accurate documentation for child health exams.
- We have exceptionally well-trained, well-qualified staff.

Areas for Strengthening (and the program's current progress in addressing these issues):

- Some Early Head Start staff who did not have client contact also needed a TB and Health Exam clearance (staff providing direct services already completed their screenings.) As of 03/11/2011, all EHS staff have completed the Health exam and TB screens.
- The program needed to add an additional ongoing assessment tool. This tool has been added and set for implementation October 2011.
- The program's record keeping, reporting, and ongoing monitoring systems needed to be strengthened. The program has revised and reviewed its systems and is also set to adapt another head start database and reporting software by the end of September, 2011.
- Better home visiting attendance and more accurate tracking of completed home visits were identified, and the program has since improved overall attendance rates by implementing new tracking tools, reporting methods, and staff accountability to attendance goals.
- The program needed to start submitting credit card statements (Target and Smart and Final) to the Board and Policy Council—which began immediately after the review.

A Team will return in January 2012 to monitor whether the agency has corrected all issues indicated in this report.

The financial audit was completed in September, 2011 with unqualified opinion, and no findings or questioned costs and no material weaknesses or control deficiencies identified.