

early head start

Child Care Resources Inc.

2021-2022 Annual Report

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INTRODUCTION

Child Care Resources Inc.'s (CCRI's) Early Head Start-Child Care Partnership (EHS-CCP) partnered with seven 5-star licensed child care centers in Mecklenburg and Burke counties in North Carolina to deliver comprehensive child and family services for eligible infants and toddlers and their families. CCRI's second five-year grant for Early Head Start was awarded in 2020 by the Administration for Children and Families, Office of Head Start, of the United States Department of Health and Human Services.

CCRI's EHS-CCP serves families who are pregnant and children ages birth to 3 who:

- Live in households earning below 100% of the federal poverty level;
- Receive child care subsidy or are on the subsidy waiting list; and/or
- May be in foster care, have special needs, or whose families are homeless.

Key components of CCRI's EHS-CCP program include:

- Small group sizes, low child-staff ratios, and qualified early childhood teachers
- Use of a research-based curriculum
- Developmental screenings for all children and referrals (as needed)
- On-going child assessments to monitor growth and development
- Family engagement opportunities, activities, and support
- Training, coaching, and support for teachers and directors
- Health, safety, and nutrition services focused on ensuring that infants and toddlers have medical and dental homes and that child care settings are safe and nurturing
- Access to mental health services for children, families, and child care staff

During the program year (September 1, 2021 through August 31, 2022), CCRI worked with its child care partner sites to offer full-day child care across 230 service days. A total of 200 slots were funded, and EHS-CCP staff worked continuously to recruit new child care programs to contract for all funded slots. Throughout the program year, a total of 168 infants and toddlers received services for at least one month. Each center provided high-quality early care and education (ECE) programming and family engagement to meet the rigorous Head Start Program Performance Standards as well as all state and local licensing and health and safety standards.

All partner sites were open and providing in-person child care and adhered to DCDEE's enhanced health and safety guidelines during COVID-19.

Program Goals

1. *CCRI's EHS-CCP will result in measurably improved infant/toddler child care delivery across partner sites (classroom instruction, family engagement and support, teacher performance, and child outcomes) and provide a model of excellence in infant/toddler care delivery for child care programs serving low-income families.*

The following child care partner sites offered EHS-CCP services:

- Bright Future Learning Center
- Creative Beginnings
- Dixon Academy of Charlotte
- First Ward Child Development Center
- Giggles N' Grins
- Pure Genius Childcare
- The Early Learning Center

Early care and education services were robust with many successes, as detailed in the Child Development and Education section of this report. CCRI also leveraged and established new partnerships with organizations in Mecklenburg and Burke counties to support the EHS-CCP program.

2. *CCRI's EHS-CCP will adopt a reliable and robust data management system to strengthen all tasks required to enhance program planning, implementation, and evaluation, which results in improved child and family outcomes.*

CCRI's EHS-CCP used ChildPlus to track and manage program data and to inform program monitoring. Staff were able to identify program needs and opportunities for improvement and measure program compliance. EHS-CCP also implemented robust ongoing child assessments systems using Teaching Strategies GOLD to measure child learning and development and to inform lesson planning and individualized growth plans for all enrolled children. Data was entered daily and monitored weekly, monthly, quarterly, and annually to provide direction on child, family, and program needs, as well as areas of success.

FINANCES

The table below details funds received by CCRI and its child care partners for EHS-CCP activities during program year 2021-2022:

	2021-2022 Actual
Office of Head Start funds for EHS-CCP	\$3,770,468.89
Child care subsidy funds paid to child care partners for EHS children	\$202,175.00
USDA Child & Adult Care Food Program reimbursements to partners	\$130,425.69
Total Public Funds Received	\$ 4,103,069.58

The table below details actual operating and training/technical assistance (T/TA) expenditures for the current program year (September 1, 2021 – August 31, 2022) funded by the Office of Head Start and proposed expenditures for next year (September 1, 2022 – August 31, 2023):

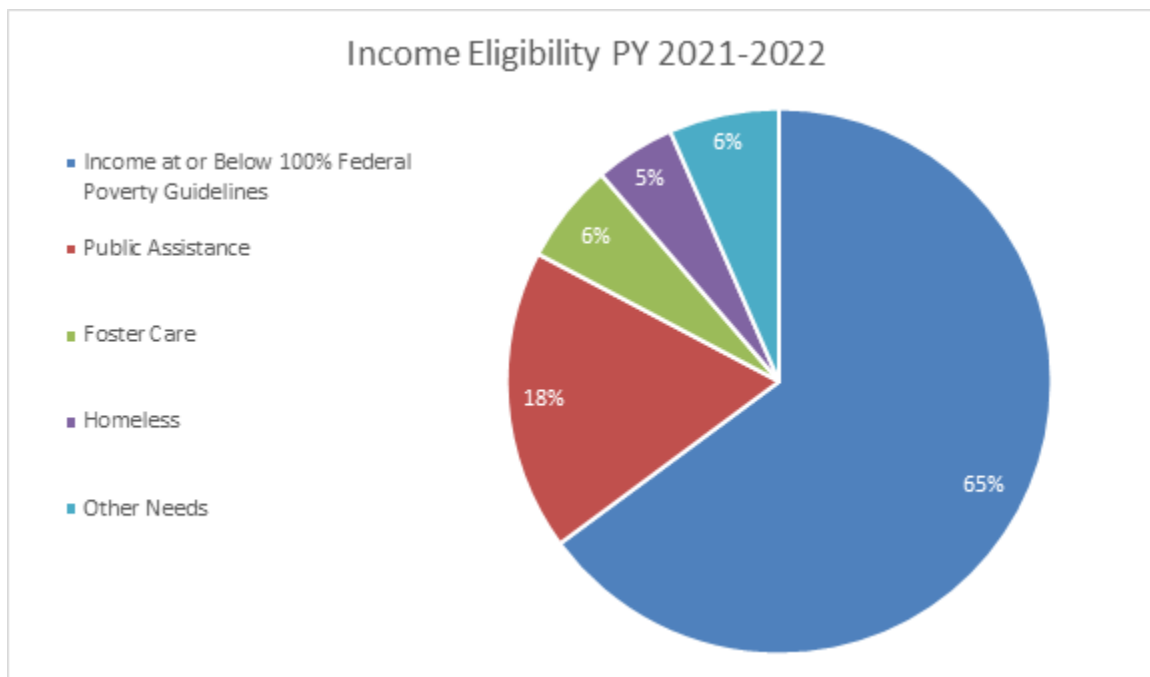
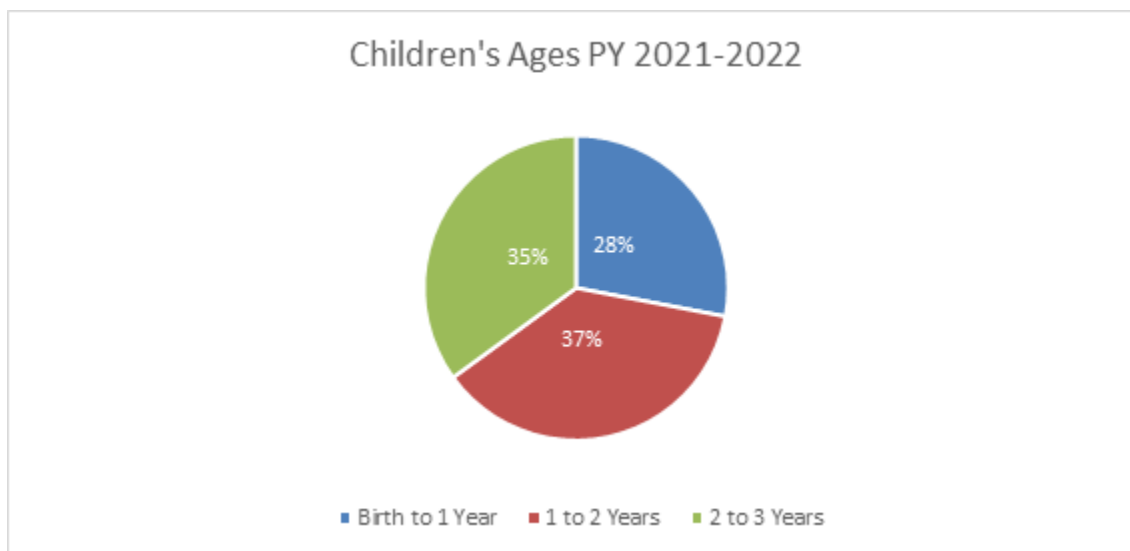
OPERATING and T/TA	2021-2022 Actual	2022-2023 Proposed
Personnel	\$444,340.16	\$ 812,155.00
Fringe Benefits	\$142,013.16	\$ 284,255.00
Travel (out of town)	\$15,765.20	\$29,500.00
Supplies and Materials	\$113,695.32	\$97,500.00
Contractual	\$2,553,777.04	\$ 2,661,623.00
Other	\$169,466.58	\$207,618.00
Indirect	\$331,411.43	\$ 399,767.00
Total Expenditures	\$3,770,468.89	\$4,492,418.00

Budget Category Notes:

- Personnel – CCRI employed 13 EHS-CCP staff to deliver comprehensive services to EHS-CCP partners.
- Contractual – CCRI has contributed to the consistent employment of more than 70 community residents in its EHS-CCP program through contracts with child care center partners. This category also includes other contracted services.
- Other – This category includes communications and postage; printing; local travel; dues and subscriptions; advertising; and vehicle insurance.
- The annual audit results will be published when available.

ENROLLMENT

A cumulative total of 168 children were served by EHS-CCP throughout the program year across a total of 200 slots, with average monthly enrollment at 70% of contracted slots. Of 218 eligible children, 168 (77%) were served, and the program maintained a waiting list from which children were selected based on greatest need. Twenty-two percent (22%) of enrolled children received NC subsidy funding. These numbers reflect the impact of the COVID-19 pandemic. Of all enrolled children, 18% were eligible due to public assistance, 5% were homeless children, 6% were foster children.



HEALTH, DENTAL, AND NUTRITION SERVICES

Access to health, nutrition, and dental services are a hallmark of EHS-CCP. Family Support Staff worked with families to ensure they had both medical and dental homes. Families without one or both were given referrals, and staff followed up to ensure these referrals were successful.

During the program year:

- 100% (168/168) of children had a medical home.
- 99% (167/168) of children had medical insurance, of whom 96% (161/168) had Medicaid or CHIP and 3.6% (6/168) had private insurance.
- 65% (110/168) of children received medical exams at least once.
- 20% (24/121) of eligible toddlers received dental screenings.
- 2% (4/168) of infants and toddlers received services or referrals for mental health.
- 52 vision screenings and 58 hearing screenings were provided by EHS-CCP.
- 80% (135/168) of children were up to date on their immunization schedule (EPSDT).

FAMILY AND COMMUNITY ENGAGEMENT

All EHS-CCP partner sites hosted monthly meetings of their respective parent committees. Meetings of Policy Council (attended by parent representatives from each partner center) were also scheduled monthly. Additional activities were limited this year due to pandemic-related restrictions. As public health improves, CCRI's EHS-CCP plans to resume in-person reading events, spring and fall festivals, and father involvement activities.

Highlights from the program year include:

- 87.23% of families (123/141) completed Family Partnership Agreements.
- A total of 7 parents served on the Policy Council, with families at seven partner centers electing at least one parent to serve.
- Family participation was challenged as centers did not permit (or significantly limited) volunteers during COVID-19.

CHILD DEVELOPMENT AND EDUCATION

CCRI's EHS-CCP implemented multiple strategies that supported children's learning and development to prepare them for kindergarten. Highlights include:

- Training on *The Creative Curriculum*® and Teaching Strategies (TS) GOLD® was continued to assist teachers in creating classroom and individualized lesson plans and using the curriculum-based assessment tool to support children's learning.
- Children's learning was on track with Widely Held Expectations (WHE) for their age. Based on TS GOLD® formal assessment, from Fall 2021 to Spring 2022, all children

made gains in their knowledge and development, and 71% of children met or exceeded WHE across all domains.

- EHS-CCP provided teacher training hours on topics such as Inclusion and Support for Children with Special Needs, Mental Health during COVID-19, Reporting Child Abuse and Neglect, parent-teacher interactions, and other required topics.
- Teachers used the Head Start Early Learning Outcomes Framework and North Carolina's Foundations for Early Learning and Development to better understand children's development and learning needs and to inform their lesson planning.
- A total of 161/168 children received developmental screenings within the first 45 days of enrollment; Ages and Stages Questionnaire 3rd edition (ASQ-3) was used to screen children's overall development and ASQ-SE (Social Emotional) was used to screen children's social-emotional development specifically.
- All enrolled children received ongoing child assessments with TS GOLD. Results were used to share updates with families at parents at parent-teacher conferences, to guide instruction, and to inform curriculum planning and implementation. Aggregate data informed the professional development plan for the program.
- Of 168 enrolled children, 162 children received at least one home visit, and 114 received two home visits. Families not visited twice were those that declined home visits or were not enrolled in EHS-CCP long enough for two home visits to be completed during the program year. COVID-19 contributed to lower participation, but virtual meetings attempted to mitigate these challenges.
- A total of 144 families (of 168 enrolled children) participated in at least one parent-teacher conference, and 110 participated in two conferences. Families not participating in two conferences were those that declined or were not enrolled long enough for two conferences to be completed. COVID-19 contributed to lower participation, but virtual meetings attempted to mitigate these challenges.
- A cumulative total of 35 children of 168 enrolled (20.8%) had an Individualized Family Service Plan (IFSP) or Individualized Education Plan (IEP) and received services accordingly.
- Approximately 71% of the teachers fully met the EHS educational requirement, while on average, 24% of teaching staff were in the process of receiving an IT CDA. 4% are working toward qualification.
- 100% of teachers have tested as "reliable" in the implementation of TS GOLD system of ongoing child assessment.