INTRODUCTION

Child Care Resources Inc.’s (CCRI’s) Early Head Start – Child Care Partnership (EHS-CCP) offered comprehensive child and family services for up to 270 infants, toddlers and their families in partnership with ten 4- and 5-star licensed child care centers in Mecklenburg and Burke counties, North Carolina. The Early Head Start grant was awarded by the Administration for Children and Youth, Office of Head Start of the United States Department of Health and Human Services in 2015.

The EHS-CCP program is designed for children under age three who:

- Live in households earning below 100% of the federal poverty level;
- Receive a 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, CCRI worked with the 10 child care centers to offer full-day early care and education (ECE) services across 230 services days. A total of 214 slots were under contract, and EHS-CCP staff worked continuously to recruit new child care programs. Over the course of the year, a total of 230 infants and toddlers received services for at least one month. Each center
provided high quality ECE programming and family engagement by meeting the rigorous requirements of the Head Start Performance Standards, in addition to all state and local licensing and health and safety standards.

**Program Goals**

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

The following child care partners offered EHS-CCP services during the program year:

- Bright Future Learning Center
- Creative Beginnings
- First Ward Child Development Center
- Giggles N’ Grins
- Giggles N’ Grins Too
- Howard Levine Child Development Center (began services in July 2018)
- Lakewood Preschool Cooperative
- Pure Genius Learning Center
- Smart Kids Child Development Center
- The Early Learning Center

Early care and education services were robust during the program year with many successes, as detailed in the Child Development and Education section of this report.

In addition, CCRI established partnerships with 22 organizations to support the EHS-CCP program in Mecklenburg and Burke counties.

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 improvement of child and family outcomes.**

EHS-CCP used a data system (ChildPlus) to track and manage program data, and to inform program monitoring. Staff were able to identify program needs, opportunities for improvement, and measure program compliance. EHS-CCP also used robust child assessment systems 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

Public Funds and Private Funds

For the program year (September 1, 2017 through August 31, 2018), funds received by CCRI and its child care partners for Early Head Start – Child Care Partnership activities equaled:

<table>
<thead>
<tr>
<th>Public Funds</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Head Start EHS-CCP funding</td>
<td>$3,304,112</td>
</tr>
<tr>
<td>Child care subsidy funds collected by child care partners</td>
<td>$896,324</td>
</tr>
<tr>
<td>USDA Child and Adult Care Food Program collected by partners</td>
<td>$155,435</td>
</tr>
<tr>
<td>Mecklenburg County match funds</td>
<td>$97,142</td>
</tr>
<tr>
<td><strong>Total Public Funds Received</strong></td>
<td>$4,453,013</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Private Funds</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent fees collected by the child care partners related to child care subsidy</td>
<td>$102,533</td>
</tr>
<tr>
<td><strong>TOTAL PUBLIC AND PRIVATE FUNDS</strong></td>
<td>$4,555,546</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OPERATING and T/TA BUDGET</th>
<th>17-18 Actual</th>
<th>18-19 Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$417,498</td>
<td>$573,585</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>$113,580</td>
<td>$180,629</td>
</tr>
<tr>
<td>Travel (out of town)</td>
<td>$39,653</td>
<td>$27,674</td>
</tr>
<tr>
<td>Supplies and Materials</td>
<td>$151,590</td>
<td>$16,525</td>
</tr>
<tr>
<td>Contractual</td>
<td>$2,214,258</td>
<td>$2,845,968</td>
</tr>
<tr>
<td>Other*</td>
<td>$67,221</td>
<td>$85,560</td>
</tr>
<tr>
<td>Indirect</td>
<td>$300,312</td>
<td>$373,014</td>
</tr>
<tr>
<td><strong>Total Expenditures</strong></td>
<td>$3,304,112</td>
<td>$4,102,955</td>
</tr>
</tbody>
</table>

Budget Notes:
- CCRI employed 13 EHS-CCP staff to deliver comprehensive services to EHS-CCP partners during the program year.
- CCRI has contributed to the consistent employment of over 90 community residents in the 10 EHS-CCP programs.
- *Other included: Communications & postage; printing; travel (local); dues and subscriptions; advertising; vehicle insurance; and EHS grant contract services.

ENROLLMENT

During the program year, a cumulative total of 230 children were served in EHS-CCP in a maximum of 214 slots (September 2017). The average monthly enrollment was 87%, as a
percentage of contracted slots. A funded enrollment average was not calculated because the program did not have 270 slots under contract with local child care partners.

The number of contracted slots varied during the program year. In September 2017, there were 214 EHS-CCP slots at nine child care centers in Mecklenburg and Burke counties. During the year, a new partner started with 22 slots. However, another partner chose to reduce services gradually over the year. The net result at year-end was that CCRI’s EHS-CCP had 10 centers, with 204 slots. All children served (100%) were eligible for EHS-CCP services.

PERFORMANCE REVIEW

CCRI remained under-enrolled during the 17-18 program year. The reason for the under-enrollment was that the program did not have 270 funded slots under contract with local child care providers. In February 2018, CCRI contracted with one new program. However, that program did not open its doors to children until July 2018. As previously mentioned, an existing program reduced its funded slots over the course of the year, from 32 to 8 by the end of the contract year.

CCRI documented efforts to recruit new programs through an Office of Head Start desk audit in January 2018. CCRI’s efforts included: identifying programs with 4- or 5-star rated licenses that served infants and toddlers receiving subsidy; reviewing programs’ licensing histories; applications and interviews; and facility site visits and tours. Some of the barriers to recruiting
new programs included: programs did not have any vacant spaces; children under age 3 were not served by the center; private owners were unwilling to reduce capacity to accommodate EHS group sizes; and programs did not serving low-income children. An additional challenge emerged during the year as well. After many years of stagnant child care subsidy reimbursement rates, the state of North Carolina raised the infant and toddler rates by about $300 per child, per month. This increase reduced the economic incentive to participate in the EHS-CCP program.

HEALTH, DENTAL AND NUTRITION SERVICES

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

During the program year:
- 97% (222/230) received medical exams at least once and 100% of children had a medical home.
- 100% of children had medical insurance, with almost all having Medicaid or CHIP insurance. Less than 1% of children served had private health insurance.
- 98% (162/166) eligible toddlers received dental screenings during the program year.
- EHS-CCP provided vision screenings to 229 children and hearing screenings to 228 children during the program year.
- 19% of the infants and toddlers received services or referrals for mental health.

FAMILY AND COMMUNITY ENGAGEMENT

All EHS-CCP partner sites hosted parent committee meetings monthly. Policy Council meetings also occurred monthly and were attended by parent representatives from each partner program. Additional activities such as reading events, spring and fall festivals, and specific father involvement activities took place. Some of the highlights from the program year included:

- Families of 230 children completed the Ages and Stages Social Emotional Questionnaire.
- Policy Council was held monthly during the program year. A total of 15 parents held seats on the Policy Council. Two parents from each center were elected by each centers’ families to serve on the Policy Council.
- 205 out of 216 families completed Family Partnership Agreements.
- 138 family members, including grandparents and other relatives, volunteered in their children’s programs.
CHILD DEVELOPMENT AND EDUCATION

During the program year, CCRI’s EHS-CCP implemented multiple strategies to support children’s learning and development and prepare them for kindergarten including:

- Intensive training on Creative Curriculum and Teaching Strategies Gold to assist teachers in creating classroom and individualized lesson plans, as well as in using the curriculum based assessment tool to support children’s learning.
- Children’s learning was on track. Comparing fall 2017 to spring 2018, all children made gains in their knowledge and development. Across domains, an average 83% of children met or exceeded widely held expectations according to Teaching Strategies Gold formal assessment.

- 78 teacher training hours were provided by EHS-CCP on topics such as: Flip It Training, Cultural Competency, Lesson Planning, Teaching Strategies GOLD, Infant Toddler Creative Curriculum, CLASS, NC Foundations for Early Learning and Development (NCFELD), serving children with special needs, and trauma within families.
- Teachers used the Head Start Early Learning Outcomes Framework and North Carolina’s Foundations for Early Learning and Development for lesson planning and understanding of children’s needs.
• Teachers screened every child with the Ages and Stages Questionnaire -3rd edition (ASQ-3) and reviewed the ASQ-SE that families completed at enrollment.
• A total of 230 children received developmental screenings within the first 45 days, as well as educational assessments. Goals, objectives, and outcomes were developed for the 230 children.
• Two home visits occurred for 181 children; 232 received one home visit. Some families refused home visits, and other children and families were not enrolled in the EHS-CCP program long enough to have two home visits completed.
• 183 infants, toddlers, and their families participated in two parent teacher conferences and 170 participated in one conference. Some parents declined parent teacher conferences and other families were not enrolled long enough to have two conferences.
• 30 children (11.1%) had Individual Family Service Plans (IFSPs) during the program year and received services according to their treatment plans.
• 19 of 81 teachers (15%) had BA degrees in early childhood or a related field.
• 39 of 81 teachers (32%) had Associate degrees in early childhood or a related field.
• Seven of 81 teachers (6%) teachers had a Child Development Credential (CDA) or equivalent and professional development plans.
• 16 of 81 teachers (13%) were working to complete their Associates degree or CDA and had professional development plans.