

Community Action of Southeast Iowa Head Start/Early Head Start Annual Report 2008-2009

Our Vision: Community Action has a vision for children and families that includes access to early childhood care and education that meets the needs of children and their families.

Community Action of Southeast Iowa Head Start and Early Head Start programs provide center based Head Start/Early Head Start services for eligible families in Des Moines, Henry, Louisa, and Lee counties in Southeast Iowa. Children are served through two program options in Head Start – part day and full day programs. Full day programs are for parents working, in school or in training. All Early Head Start programs are full day programs for parents working, in school or in training. Part day children are transported to and from school.

Mission Statement: Head Start – A program where children and families are educated, challenged, and empowered to embrace their potential for success in life – one child, one family at a time.

Funding Level 2008-2009

344 HS children, 72 EHS children

Federal Head Start Grant Funding:

- Head Start - \$2,299,466
- Head Start Training - \$40,977
- Early Head Start - \$755,240
- Early Head Start Training - \$18,792

State Funding:

- Shared Visions - \$377,725.00
- Empowerment - \$166,346.38
- Donated Services and Materials - \$778,136

Children and Families Served 2008-2009

Head Start Funded Enrollment 344

- 388 Head Start Children Served
- 359 Head Start Families Served

Early Head Start Funded Enrollment 72

- 92 Early Head Start Children Served
- 88 Early Head Start Families Served
- 21 pregnant mothers Served

Health Services –

- 100% of the children in Head Start received physical exams.
- 8.5% of HS children needed medical treatment and 100% of those children received medical treatment.
- 100% of the children in Early Head Start received physical exams.
- 10% of EHS children needed medical treatment and 100% of those EHS children received medical treatment.

Oral Health Services –

- 96% of HS children received a dental exam.
- 17% of HS children needed dental treatment and 67% of those children received dental treatment.
- 100% of EHS children received primary oral health care.

Enrollment/Attendance 2008-2009

Average Monthly Enrollment HS: 100%
Average Monthly Enrollment EHS: 100%
Average HS Daily Attendance: 70.97%
Average EHS Daily Attendance: 74.82%

Budgetary Expenditures 2008-2009

Personnel	\$1,734,227
Fringe Benefits	\$655,230
Travel	\$32,891
Supplies	\$75,937
Other	\$279,338
Indirect Costs	\$336,852
Total	\$3,114,475

Proposed Budget 2009-2010

Personnel	\$1,802,635
Fringe Benefits	\$690,986
Travel	\$10,898
Supplies	\$85,351
Other	\$401,900
Indirect Costs	\$351,600
Total	\$3,343,370

Agency 2007-2008

Financial Audit –
100% compliance
by Meriwether, Wilson &
Company, P.L.C.
Federal Review –
100% compliance

Food Program 2008 -2009:

Breakfast – 40,926
Snack – 19,150
Lunch – 49,704

Kindergarten Transition:

1. The Families with children eligible for Kindergarten the following year, received a copy of the pamphlet, Getting School Ready in Iowa.
2. During the year, teachers read books about getting ready for Kindergarten to alleviate any concern the children had.
3. Teachers had books available in the Lending Library for parents about “Kindergarten” for loan.
4. The teachers discussed Kindergarten transitioning at each of the two Parent Teacher Conferences, and answered Parent’s questions.
5. The teachers showed the kindergarten video, “Kindergarten, Here I Come”; during the second half of the school year before the children went on a field trip to the school.
6. Teachers gave to families with children eligible for Kindergarten a Summer Calendar that included transition ideas for the children entering Kindergarten..
7. The children practiced eating lunch “cafeteria style”. The teacher discussed the differences between it and eating family style in Head Start.

Family Development Specialists:

1. Discussed transitions with parents and provided Advocacy training during parent meetings.
2. Passed out a From Head Start to Kindergarten: A Parent’s Guide to Transitioning to all parents on their last Home Visit.
3. Gave information on dates/times of Kindergarten Round Up to families.

Nurses:

1. Set up meetings or staffings with elementary school personnel for those children with diagnosed special needs that will be attending school.

Over Income Children Served 2008-2009

HS children: 10

1% (7) children were 100 – 130% poverty

1% (3) children were over 130% poverty

EHS children: 4

1% (4) children were over 130% poverty

Disability Services:

- Head Start served 41 children diagnosed as having an educational disability.
- Early Head Start served 6 children diagnosed as having an educational disability.
- The diagnosed disabilities included emotional/behavioral disorder, speech, orthopedic impairment, visual impairment, and developmental delay.

Mental Health Services:

Mental Health Consultation with classroom staff about individual students:

- 54 HS
- 5 EHS

Children receiving 3 or more MH consultations:

- 14HS
- 1 EHS

Children receiving individual MH assessment:

- 36 HS
- 5 EHS

Children referred for further MH Services:

- 13 HS
- 1 EHS

Family Support/Parent Involvement:

- * In the HS/EHS programs, 510 Partnership Agreements were developed with families.
- * A variety of parent involvement activities took place during the school year including invitations to field trips and classroom activities.
- * Many of the classrooms had fall and winter parties where families were invited to come in and have a meal and play games with the children.
- * Parent Group meetings took place each month, throughout the year.
- * Head Start fathers, formed a group and planned activities for the children. Pumpkin painting, family cookouts/picnics, an egg hunt and a cupcake decorating party were planned by the father’s group.
- * One of the parent groups made a quilt and a pillow for each student as an end of the year gift.
- * Speakers came to the meetings to talk about topics of interest to the families which have included: Shaken Baby Syndrome, Child Abuse Prevention, Head Start to Kindergarten Transitioning, Happy Bear, (Good Touch, Bad Touch), Child Discipline, Parent Advocacy, Lead Poisoning, Mental Health/Stress Management, and Crisis Management.