**2010-2011 Annual Report**

***Coastal Community Action, Inc.***

**Head Start/Early Head Start**

***Helping People, Changing Lives***



**COMMUNITY ACTION PROMISE**

Community Action changes people’s lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.

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**Introduction to Head Start/Early Head Start**

In the United States, one in five children under the age of six is born into poverty. These children are more likely to start their education at a developmental level behind their peers and this gap tends to grow throughout our children’s education. In 1964, Coastal Community Action, Inc. (CCA) opened its first Head Start classroom to give children in poverty an opportunity to learn, grow, and develop in a way that prepares them for entry into kindergarten. Head Start (HS), for children ages 3-5, and Early Head Start (EHS), for pregnant women and children ages 0-3, combine age appropriate learning, social interaction, health screenings, nutritional services and education, strong parental involvement, and family development services to provide children with a rich learning environment.

CCA staff strongly believes in utilizing age-appropriate learning techniques and supporting the individuality of each child. Based on parent input, teacher observations, and child assessment results, activities are tailored, the curriculum adapted, and the physical environment modified to support each child’s individual learning style and growth. To build children’s social skills, CCA staff engages children in socialization activities. Good social skills are key to a child’s successful interaction with their peers, which in turn helps build self-esteem. Research shows that children with strong self-esteem are more likely to be successful later in life than children with low self-esteem.

Good health also plays a vital role in a child’s development. CCA staff ensures that health screenings are conducted on every child. Children are screened to ensure optimal physical and dental health, nutrition, sensory and developmental needs are identified.

All meals and snacks served in CCA’s classrooms are planned with the input and approval of a registered dietician and meets nutrition standards established by the Child and Adult Care Food Program (CACFP). Regular nutrition activities take place within the learning environment, introducing children to new foods while educating them on the importance of a healthy diet. Fresh fruits and vegetables are provided often in order to expose children to healthy, local produce. Menus are planned to incorporate the cultures of families served by CCA, adding familiarity and variety to the healthy foods served.

Finally, teachers emphasize the importance of being physically fit, and provided State mandated periods of active play each day. Playgrounds provide children with adequate space, equipment and materials to support physical fitness and education. Physical activities include developmentally appropriate climbing equipment, activities that require running and jumping, while incorporating learning experiences that promote kindergarten readiness, cooperation, and peer interactions.

**EARLY CHILDHOOD SERVICES ENROLLMENT STATISTICS**

|  |  |  |
| --- | --- | --- |
|  | **HS** | **EHS** |
| ***Funded Enrollment*** | 617 | 142 |
| ***Cumulative Enrollment*** | 708 | 194 |
| ***2nd Year Students*** | 31% | 21% |
| ***Income below 100% of FPG*** | 80% | 87% |
| ***Public Assistance*** | 7% | 7% |
| ***Foster Child*** | 2% | 2% |
| ***Homelessness*** | 3% | 3% |
| ***Over Income Enrollment*** | 8% | 2% |
| ***Children with Disabilities*** | 13% | 9% |

**Eligibility Type by Program**

**Program Comparison of Eligibility Type**

**Eligibility Requirements**

CCA maintains compliance with Head Start Performance Standards by ensuring that no more than 10% of enrollment exceeds income eligibility guidelines. As reflected in the charts above, no less than 92% of HS and EHS children meet income eligibility in 2010-2011. Children transitioning from EHS into HS are required to participate in income verification procedures. Selection Criteria procedures supports the transition of EHS children into HS, regardless of the outcome of income, as CCA realizes the impact of continuous participation on kindergarten readiness.

**PARENT INVOLVEMENT**

*Parents play a vital role in their children’s education and development from birth, a role CCA Head Start/Early Head Start builds upon by fostering parental involvement at every step. The program features, among other things, education for parents, parent-teacher conferences and family events. As a proud supporter of parent involvement activities, CCA realized volunteer participation from 742 parents/guardians in 2010-2011.*

***Family Service Data***

**‘The Picture of Health’**

Head Start’s commitment to wellness embraces a comprehensive vision of health for children, families, and staff. The objective of Child Health and Development Services is to ensure collaboration among families, staff, and health professionals. When child health and developmental concerns are identified children and families are linked to an ongoing source of continuous, accessible

care (Medical Home) to meet their basic health needs. The focus of Head Start health services is prevention and early intervention. Strong partnerships are the key to the success of this approach.

**Child Health Outcomes**

***Medical Services Statistics***

|  |  |  |
| --- | --- | --- |
| **Health Insurance Type** | **Head Start** | **Early Head Start** |
| Medicaid | 597 | 175 |
| CHIP | 0 | 0 |
| Private | 34 | 5 |
| Other | 65 | 10 |
| None | 12 | 4 |

***Chronic Health Conditions Identified***

|  |  |  |
| --- | --- | --- |
| **Chronic Health Conditions Identified** | **Head Start** | **Early Head Start** |
| Anemia | 1 | 0 |
| Asthma | 75 | 10 |
| Hearing Difficulties | 3 | 1 |
| Overweight | 30 | 0 |
| Vision Problems | 19 | 2 |
| High Lead | 0 | 0 |
| Diabetes | 0 | 0 |

***Health Indicators***

|  |  |  |
| --- | --- | --- |
| **Health and Dental Outcomes** | **Head Start** | **Early Head Start** |
| Total Children with Medical Home | 699 | 193 |
| Completed EPSDT Examination | 688 | 191 |
| Up-to-Date with Immunizations | 702 | 190 |
| Total Children with Dental Home | 693 | 178 |
| Completed Dental Examination | 635 | 186 |
| Mental Health Consultation Completed | 39 | 5 |

**Classroom Staff Qualifications**

CCA understands the relationship between teacher education and child outcomes. Research indicates that qualified teaching staff holds knowledge and experience necessary to provide high quality experiences that promote child learning. As such, Head Start Performance Standards requirements and CCA hiring practices ensure that the most qualified individuals are recruited to work with enrolled children. The data presented below reflects the educational level of classroom staff.

**School Readiness Learning Goals**

**SOCIAL & EMOTIONAL**

1. -**Children will engage in healthy relationships and interactions with adults and peers**
	1. NC Early Learning Standards/Foundations Alignment- Emotional & Social Development/Developing a Sense of Self with Others:
		1. Play and interact cooperatively with other children
		2. Form and maintain positive relationships, including friendships with children and adults
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Social and Emotional Development:
		1. Learning Cooperation
		2. Building Social Relationships
2. -**Children will display a healthy range of emotional expression and learn positive alternatives to aggressive or isolating behavior**
	1. NC Early Learning Standards/Foundations Alignment- Emotional & Social Development/Developing a Sense of Self:
		1. Demonstrate increasing competence in regulating, recognizing, and expressing emotions verbally and nonverbally
		2. Express and manage anger appropriately
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Social and Emotional Development:
		1. Building Social Relationships

**LANGUAGE & LITERACY**

1. -**Children will comprehend increasingly complex and varied vocabulary**
	1. NC Early Learning Standards/Foundations Alignment- Language Development & Communication/Expressive Language:
		1. Use increasingly complex and varied language structures, sentences, and vocabulary
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Language/Literacy:
		1. Speaking and communicating- self expression
		2. Recognizing sounds, phonological awareness
2. -**Children will use language to express ideas and needs, engage in conversation and communication with others**
	1. NC Early Learning Standards/Foundations Alignment- Language Development & Communication/Expressive Language:
		1. Use language to establish and maintain relationships
		2. Use verbal and non-verbal language to communicate wants, needs, ideas, feelings and to relate personal information and experiences
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Language:
		1. Speaking and communicating- conversation
		2. Speaking and communicating-expressive vocabulary

**COGNITION & GENERAL KNOWLEDGE**

1. -**Children will observe and collect information and use it to ask questions, predict, explain and draw conclusions to gain a better understanding of information and activities**
	1. NC Early Learning Standards/Foundations Alignment- Cognitive Development/Mathematical Thinking and Expression:
		1. Make and check predictions through observations and experimentation
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Nature and Science/Logic and Reasoning:
		1. Gathering and presenting data
		2. Reasoning and problem solving
		3. Examining cause and effect

**PHYSICAL WELL-BEING AND MOTOR DEVELOPMENT**

1. -**Children will understand and practice healthy and safe habits**
	1. NC Early Learning Standards/Foundations Alignment- Health and Physical Development/Physical Health and Growth:
		1. Develop an awareness of personal health and fitness
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Physical Development and Health:
		1. Understanding of health and safety practices

**APPROACHES TO LEARNING**

1. -**Children will show an interest in varied topics and activities, a desire to learn, creativeness, and independence in learning**
	1. NC Early Learning Standards/Foundations Alignment- Approaches to Learning/Persistence, Attentiveness, and Responsibility:
		1. Demonstrate the ability to remain engaged in an experience
		2. Work toward completion of a task despite distractions or interruptions
		3. Develop a sense of purpose and the ability to follow through
	2. Assessment of child progress; Galileo ongoing assessment data analysis- Approaches to Learning;
		1. Taking initiative and exhibiting curiosity
		2. Developing creativeness and inventiveness

**CCA Child Development Outcomes**

The 1998 reauthorization of Head Start requires all programs to demonstrate that children make progress toward positive child outcomes in specific areas of learning. The Head Start Bureau mandates that every Head Start program should have a well-balanced child assessment system, aligned with their curriculum that gathers data on the eight domains of learning and development. In response to this requirement, CCA measures child learning utilizing Galileo Child Observation Scales. An analysis of the data is used to determine the progress that has been made, strengthen the quality of the Head Start program and improve efforts in helping children learn and prepare for school success. The measures below reflect child learning from beginning to end of the program year.

**Early Head Start Child Outcomes Results (8-18 Mo.)**

**Early Head Start Child Outcomes Results (18-24 Mo.)**

**Early Head Start Child Outcomes Results (2-3 Years)**

**Head Start Child Outcomes Results (3-5)**

**Head Start/Early Head Start Budget 2010-2011**

**Head Start/Early Head Start Budget**

**Anticipated 2011-2012**

**Audit Information**

***The 2010-2011 Audit resulted in an unqualified opinion, further reflecting the quality of CCA’s internal controls and fiscal practices. CCA maintains measures that safeguard revenues and promotes the highest level of program quality and service to children and families. With a history of quality, CCA continues to refine its policies and procedures, ensure an informed Board of Director’s and Policy Council, and utilize innovative practices that enhance our capacity to serve.***

***The most recent HS/EHS triennial review conducted in 2010 resulted in full compliance of all performance objectives reviewed. CCA was identified as a program having much strength, including technological capabilities and the SOS internal referral system.***