Florida State University
Early Head Start Program

Annual Report
September 1 - August 31
2015-2016
The mission of the FSU Early Head Start Program is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and promote healthy family functioning.

The FSU Early Head Start Program is funded through the federal Office of Head Start to serve 68 infants, toddlers, and pregnant women. The Office of Head Start is part of the Administration for Children and Families, which falls under the Department of Health and Human Services.

To be eligible for services, an expectant mother or family with a child under three years old must be living in Gadsden County, Florida and earn less than the federal poverty guidelines. There are a few enrollment opportunities for families who earn more, but have significant risk factors. At least 10% of enrollment slots are reserved for children with delays or disabilities.

Services are provided year-round to meet the health, developmental, educational, and social service needs of young children and families through weekly home visits.

Services are offered to families through home visiting:

- **Weekly 90 minute home visits** focus on prenatal and parenting education, child development activities, health and safety, and family goal setting.

- **Group Socializations** or “Play Groups” held at least twice a month provide families with opportunities to interact in fun, educational activities and strengthen the parent-child relationship as well as their peer networks of support.
Early Head Start prioritizes recruiting and maintaining a multi-disciplinary staff of passionate professionals to work with children and families. The program employs a Director and a management team to ensure all Performance Standards are properly implemented in the areas of Program Administration, Health Services, Education and Disabilities Services, Family and Community Engagement, and Enrollment and Data Management. In addition, the Home Based Coordinator, a licensed clinical social worker, provides reflective supervision to six Home Visitors and consultation on infant and maternal mental health concerns. One Home Visitor speaks Spanish to primarily serve families with limited English skills. The program contracts with a registered dietician/licensed nutritionist to provide oversight and consultation on nutrition services.

The Role of Home Visitors...

- **Promote** positive birth outcomes by providing information and support to pregnant women.
- **Inspire** confidence and competence in parents by highlighting their strengths and encouraging the parent-child attachment.
- **Encourage** healthy habits and safe environments by providing information on health and safety issues and assisting families with accessing preventative health care.
- **Coach** parents to be their child’s first teacher by educating them about what to expect during a child’s first three years of development.
- **Demonstrate** how parents can enrich their child’s development and school readiness by providing weekly skill-building play activities that parents can replicate with their children using common materials found around the home.
- **Assist** families identifying their strengths and setting goals for the future for themselves and their children by being a consistent positive support to families and linking them with other community resources.
- **Empower** rural, isolated families to build a stronger network of support by hosting play groups where parents can connect with their children and other families in a fun atmosphere of learning.
During the **2015-16** program year, FSU EHS served **45** infants, **32** one-year olds, **19** two-year-olds, and **26** pregnant women, for a total of **122** participants.

This represents only **3%** of the **eligible population** in Gadsden County; a county where approximately **68%** of children 0-5 are eligible for Medicaid.

Of the **96** children served, **34** of these children were enrolled in their second year and **4** were enrolled in a third year. The program maintained full enrollment during the entire 2015-16 program year. Only six “over-income” families participated.

**2015-16 Enrollment by Race and Ethnicity**

- **African-American**: 82%
- **Hispanic/Latino**: 16%
- **Caucasian (Non-Hispanic)**: 1%
- **Biracial**: 1%
Of the 76 families served by Early Head Start during FY 2015-2016...

- 92% Earned less than federal poverty level ($24,250 for family of four)
- 89% Participated in WIC (Supplemental Foods Program)
- 33% Received SSI for parent, enrolled child, or sibling

64% of Early Head Start families were single-parent families, with 34% having two parents living in the household.

“My Home Visitor really cares for my family.”  – Early Head Start Parent

**Family Education**

- 33% of parents completed high school or GED
- 25% completed some college or obtained a college degree or certification
- 38% participated in school or job training
The FSU Early Head Start Program has developed readiness goals for all children in the five essential domains of child development: social and emotional, approaches to learning, physical well-being and motor development, cognitive and general knowledge, and language and literacy.

With input from parents and community partners, the program revised the goals in 2013-14 to be more parent-friendly by removing technical child development “jargon.” A parent engagement goal was added to reinforce the principle that parents are their children’s first teachers. The goals are posted throughout the program office and Group Socialization space in both Spanish and English and are shared with all families. School readiness goals are woven into multiple areas of the program’s services, from staff training and professional development to budget planning.

**Measuring Progress**

Progress toward school readiness goals is measured through child assessment data collected at three different time points during the program year. Other sources of information are also considered, such as parent surveys or child health records. This data is then aggregated and analyzed along with other sources of child data to improve program effectiveness. Although many enrolled children are years away from kindergarten, the ultimate goal of Early Head Start is to see children and their families develop the skills they will need to be successful throughout their lifespan, most immediately in preschool and kindergarten.
School Readiness Data Trends (2015-16 data for children present all year)

- All children made progress in each of the five essential domains of child development throughout the year. Children made the greatest gains in the areas of Approaches to Learning and Cognitive development. Approaches to learning looks at the curiosity and creativity displayed by a child. Much of the work of the home-based option surrounds encouraging parents to nurture both of these by providing opportunities for safe exploration and ongoing discussions within the child’s everyday environment. The cognitive domain reflects a child’s problem solving skills and for older toddlers, measures the amount of knowledge in the areas of pre-math, pre-science, and social studies. This knowledge is typically gained through enriched everyday routines and experiences, another major focus of the program.

- Infants and younger toddlers showed a significant gain in language development. The skills required for this age group predominantly reflect receptive language skills, or those measuring children’s understanding of the language they hear. These skills are acquired first, before children begin to speak, or use expressive language. Usually, gains are lower in the older toddler group because the LAP-3 assessment tool measures more expressive verbal language skills as this is an area in which Head Start eligible children historically struggle. This was true in 2015-16 results as well. However, the older toddler group did make large gains in the literacy skills measured with the LAP-3.

- This year, for the first time, the data analysis was able to include separate break-out results for gross motor, fine motor, and physical health assessment criteria concerned primarily with the development of healthy habits and self-care skills. This break out showed that surprisingly large gains were made in the latter, with smaller gains made by older toddlers in the former. Historically, the high gains seen in gross motor development have been attributed to the importance parents place on encouraging major motor milestones of the first year with a shift during the second year away from motor skills and towards the development of self-help skills.

Recommendations for Next Year

Based on the data analysis for 2015-16, the program will continue to focus on literacy with attention particularly to consistently providing an array of strategies for parents to use while sharing books to encourage more language development.
FSU Early Head Start
Our School Readiness Goals

Social and Emotional
Goal 1. Children will develop positive relationships with friends and familiar adults.

Approaches to Learning
Goal 1. Children will develop their natural curiosity and creativity.

Physical Well-Being and Motor Development
Goal 1. Children will demonstrate control of their large and small muscles.
Goal 2. Children will be exposed to and develop healthy practices and habits.

Cognitive and General Knowledge
Goal 1. Children will develop their cognitive skills through everyday routines and interactions.
Goal 2. Children will develop problem-solving skills.

Language and Literacy
Goal 1. Children will use and understand spoken language.
Goal 2. Children will interact with pictures, books and print materials.
Goal 3. Children who are dual language learners will continue to grow in their understanding and use of their home language while being introduced to English.

Parent Engagement
Goal 1. Parents will grow in their role as their child’s first teacher and actively participate in school readiness activities with their child.

Please see the program’s School Readiness Plan for more information.
Early, high quality child development services are critical to prevention and identification of physical, cognitive, social, and language delays in young children. All children receive developmental and sensory screenings within 45 days of enrollment to determine if they are “on target” or may need additional support from early intervention services.

Early Head Start programs set aside 10% of their funded enrollment slots for children with special needs and developmental delays. Children with diagnosed delays may be referred to Early Head Start, or they may be identified after enrolling and receiving ongoing observation and assessment in the program.

- **13%** of children enrolled in Early Head Start during 2015-2016 had an *Individualized Family Support Plan (IFSP)* through the *Early Steps* Early Intervention program due to a diagnosed disability or developmental delay.

- An additional **3%** of children enrolled during the year *received speech therapy services* through a *Medicaid provider*, but were not found eligible for Part C Early Intervention services.
Health & Nutrition Services

**Health services** are a central focus of Early Head Start because a child’s health can support or limit their typical developmental path. Early Head Start staff become knowledgeable about the health of enrolled children and help families understand the importance of developing an ongoing relationship with a consistent health care provider.

The program assisted all families enrolled during the 2015-16 program year in establishing a "medical home" for all routine health care. Dental services are available to all children and pregnant women through the local federally qualified health center, Neighborhood Medical Center and all children turning three receive a dental exam.

*Only 13% of children had an up-to-date physical and only 19% were current with immunizations when they enrolled Early Head Start.*

*By the end of the program year, 73% of children were up-to-date with their well child physical and 88% had current immunizations. (Some children left the program before this could be completed - 44 left before the end of the year, 10 before 45 days.)*

Program staff spend time preparing parents for what to expect when they take their child to the doctor or dentist. They also focus on developing healthy habits at home, like hand washing and tooth brushing.

**Home Visitors provide information to families on nutrition** about beginning solid foods, appropriate portion sizes for children, and how to read ingredient labels. **All families are referred to the county’s Women, Infants and Children Supplemental Nutrition Program (WIC)** for additional assistance on nutrition and breast feeding. Healthy food choices are provided at all program events.
A healthy pregnancy has a lasting impact on a baby's potential for healthy growth and development. The FSU Early Head Start program strives to enroll women as early during pregnancy as possible, and assist women with navigating the prenatal and post-partum system of care.

Pregnant women receive weekly home visits and are provided education on fetal development, benefits of breastfeeding, maternal nutrition, maternal depression, substance use and abuse during pregnancy, labor and delivery, and understanding routine prenatal and postpartum care. Other topics discussed during weekly visits may include managing stress, newborn care and safety, intimate partner issues, budgeting, goal setting, and adjusting to life with baby. All of this information is provided using the FSU Partners for a Healthy Baby Home Visiting Curriculum, a unique, research based resource developed right here at the FSU Center for Prevention and Early Intervention Policy.

Of the 26 pregnant women served by Early Head Start during FY 2015-2016...

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>54%</td>
<td>Enrolled in Early Head Start before the beginning of their 3rd trimester</td>
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<tr>
<td>4%</td>
<td>Were teens (16-19 years old)</td>
</tr>
<tr>
<td>100%</td>
<td>Enrolled in Medicaid</td>
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In addition to enhancing child development, Early Head Start programs are designed to strengthen families with the goal of breaking the cycle of poverty. To this end, families are actively involved in goal-setting for their children and families, planning and decision-making about program services.

**Family engagement activities include:**
- Home visits
- Setting goals for their child’s educational plan
- Setting goals for their own education and family development
- Monthly parent meetings with topics chosen by parents
- Leadership activities, through Parent Committees and the Policy Council
- Volunteer at the program office and with other program-sponsored events.

99 referrals to outside community agencies were made throughout the year to meet the various needs of families in Early Head Start.

Some of the many challenges faced by families in Early Head Start last year include:

- Poverty
- Family violence
- Homelessness
- Limited English skills
- Parents with special needs
- Mental health challenges
- Unemployment
- No high school diploma or GED
- Children with developmental delays or disabilities
- Special health care needs
Fiscal Year 2015-16 Program Budget

Federal Award: $839,487

- Salaries: 52%
- Fringe Benefits: 2%
- Misc. Operational Costs (rent, utilities, mileage reimbursement, etc.): 13%
- Equipment (2 minivans): 23%
- Training & Technical Assistance: 5%
- Materials & Supplies: 3%
- Contractual (janitorial, IT databases, independent assessments): 2%

Non-federal Contribution: $209,872

- FSU donated administrative services: 37%
- Parent and Community Volunteer Time: 58%
- FSU College of Medicine Award: 5%
A History of Excellence

Federal Standards Compliance Review
Every three years, all Head Start and Early Head Start Programs receive an on-site audit to determine how well the program is doing in meeting a volume of Federal regulations which ensure program quality. The most recent review of the FSU Early Head Start program was conducted in February 2014. During that review, a Federal team found the program met more than 2,000 performance standards in 10 of 11 program areas, with only one regulation in the area of child health tracking that needed improvement. As of the publication of this annual report, the program had corrected the review findings and is in full compliance.

Annual Financial Audits
The FSU Early Head Start Program is funded by the federal Office of Head Start, under the U.S. Department of Health and Human Services, Administration for Children and Families. Funding received by Florida State University to operate the Early Head Start program is audited annually through the State of Florida Comptroller’s audit of compliance and internal controls over financial reporting and Federal awards. The audit is conducted in accordance with the Government Auditing Standards issued by the Comptroller General of the United States Single Audit Act Amendments of 1996, and related guidance provided by OMB Circular A-133. In more than 18 years of operation the FSU Early Head Start program has never received a financial audit finding.

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For information about participating in the program or volunteering, contact Sharon Franklin, Program Recruiter at (850) 627-9116.