

**4 R Kids ECI Annual Report - FY16**

Program service type as defined by ECI: Family Support - long term home visitation

<b>Agency:</b>	Partners in Family Development		
<b>Name of Program:</b>	Parents as Teachers		
<b>Completed By:</b>	Jovanka Westbrook	<b>Date:</b>	July 14, 2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$292,478.00	ECI grant award	129	Families
125	Families	1129	Visits
1000	Visits	18	Group Parent Ed
12	Group Parent Ed	2.875	FTE Educators
2.875	FTE Educators	0.375	FTE Supervisor
0.375	FTE Supervisor	0.625	FTE Director
0.625	FTE Director		

**Comments regarding meeting benchmark targets**

We have met or exceed all benchmark targets.

Number of Home Visits By County		Number of New Families Enrolled	
597	Dallas	33	Dallas
107	Madison	7	Madison
425	Warren	14	Warren
<b>1129</b>	<b>Total</b>	<b>54</b>	<b>Total</b>

ECI Funding Investments	
\$266,744.25	4 R Kids ECI funds expended
<b>91.2%</b>	% of 4 R Kids ECI funds expended

Other Funding Expended and Source (in-kind is not to be reported only cash)	
\$1,840.00	Madison CBCAP Funds
\$9,975.00	Dallas CBCap Funds
\$0.00	
<b>\$278,559.25</b>	<b>Total cost of program</b>
<b>\$246.73</b>	<b>Average cost per visit</b>
<b>\$2,159.37</b>	<b>Average cost per family</b>

**Demographics**

Primary Care Givers Marital Status			
85	Married	19	Partnered
20	Single	0	Divorced
0	Widowed	5	Separated
<b>129</b>	<b>Total</b>		

Household Size			
11	2	26	5
36	3	10	6
41	4	5	greater than 6
<b>129</b>	<b>Total</b>		

Primary Care Giver Education Level			
6	elementary, middle school or lower	3	trade or vocational training
9	some high school	15	some college
28	high school diploma	18	2-year college degree
3	GED	35	4-year college degree
<b>129</b>	<b>Total</b>	12	Master's degree or greater

Primary Care Giver Race/Ethnicity			
0	Native American or Alaskan Native	2	Asian
0	Native Hawaiian or Pacific Islander	122	White
4	African American	1	Multiracial
<b>129</b>	<b>Total</b>		

Primary Care Giver Hispanic/Latino	
19	# that are Hispanic/Latino
110	# that are not Hispanic/Latino
<b>129</b>	<b>Total</b>

First Time Mother	
43	Yes
86	No
<b>129</b>	<b>Total</b>

Families where one or more children 0-5 are not living with the parents due to out-of-home placement in the DHS foster care system			
<b>5%</b>	6	numerator	129
		denominator	

One of more care givers are incarcerated	
6	Yes
123	No
<b>129</b>	<b>Total</b>

Other Care Giver's Education Level			
6	elementary, middle school or lower	3	trade or vocational training
9	some high school	15	some college
28	high school diploma	18	2-year college degree

3	GED
129	Total

35	4-year college degree
12	Master's degree or greater

### Other Outputs

54	# of newly enrolled families
50	# of newly enrolled families that met enrollment criteria
51	# of exited families
30.7	average age of mom at enrollment
1	# of children referred to Early Intervention Services
18	# of group-based parent education meetings
24	# of participants that attended group-based parent education meetings
134	# of referrals from Coordinated Intake project
11	# of referrals from Coordinated Intake project that accepted service
3	# of referrals from Coordinated Intake project that were already enrolled in your family support program
7	# of families referred by Maternal Child Health (DCPH)
0	# of families from Maternal Child Health (DCPH) that accepted service
Yes	Has there been a client waiting list at any time this year, Yes or No

### Outcomes

85.0%	home visit completion rate	1129	numerator	1327	denominator
92.6%	% of families that met enrollment criteria	50	numerator	54	denominator
96.5%	% of families that improve or maintain healthy family functioning, problem solving and communication	111	numerator	115	denominator
87.8%	% of families that increase or maintain social supports	101	numerator	115	denominator
74.8%	% of families that are connected to additional concrete supports	86	numerator	115	denominator
53.0%	% of families that increase knowledge about child development and parenting	61	numerator	115	denominator
38.3%	% of families that improve nurturing and attachment between parents and children	44	numerator	115	denominator

### Other Comments

(Also provide comments regarding the agency data base system compared to REDCap - they must match)  
(if there has been a client waiting list during the year, explain why and how you addressed it)

The agency uses two data management systems - one required by the State (RedCap) and one required by the Program (Visit Tracker). While both data management systems collect some of the same information, neither one alone can meet the needs of the funder or the Program. An additional burden is placed upon the Program by the funder to collect data that is also limited in it's usefulness in that it cannot stand alone or generate data that reflects the true impact of the program on its participants. While it is stated that it is required that all data systems match, they generally do not for a variety of reasons. The questions are not the same ( requiring an interpretation of what is being asked) An example is in recording the number of home visits done by an Educator on a monthly basis ( this is the number that is generally off) . The funder asks how many visits were done in a particular) month. The Educator notes how many visits were done. If the visit was an initial visit with a family that decides not to enroll in the Program, no data is entered into RedCap or Visit Tracker. As a result, it is possible that more visits are reported to the funder than are reflected in RedCap or Tracker. Each system has idiosyncrasies which requires a thorough knowledge of how the system "thinks" and how questions are to be answered. An inordinate amount of staff time is spent clarifying, correcting, interpreting questions and looking for errors. Indirect service time has increased substantially, morale is affected and the perception is that what matters most is not participant experience or outcomes. Rather, that we are noted for the few mistakes we make rather than, the many things we do well. In regard to the waiting list, we have had a waiting list, we have provided the Board with an on-going report as to how many families are on the waiting list and what progress is being made to engage the families on the list.

#### Successes

Noted successes include: collaboration with the Perry Shared Visions program and a generally seamless pilot year; partnering with LSI New Parent Program and SWCC PAT program to feature a high caliber, inter-agency, staff development opportunity; hosting a PAT National Center Training; on boarding a new Parent Educator without significant impact on Program or participants; and, meeting or exceeding all target benchmarks.

#### Challenges

The largest challenge of the program year was processing the number of referrals which came from two new referral sources - the Coordinated Intake Project and the Shared Visions Program in Dallas county. Families referred from Shared Visions were enrolled in an orderly and coordinated process. Every family enrolling a child in Shared Visions, was enrolled in the PAT program. Paperwork was coordinated and information was shared to avoid duplication. The challenge with the Shared Vision's Program was with some of the families who were quite resistant to participating in the PAT program. Many were not interested in fully engaging in the service , did not keep recommended visits and exited early or as soon as the preschool classes were completed for the year. In regard to the Coordinated Intake Project, the PAT program was given a list of names of families who qualified for a preschool tuition scholarship in Dallas, Madison and Warren Counties. The Program Supervisor had to determine, through personal contact, the level of interest that a family had in enrolling in the PAT Program. In numerous cases, the family was not aware of the Program nor were they interested in enrolling in the Program. From a total of 134 referrals, 11 resulted in enrollment ( 8%). The management of the referrals took a greater amount of time and resources than had been anticipated. There were also challenges with referrals from the DCPH MCH Program, similar to the ones with Coordinated Intake. Initially, the PAT program was given a list of duplicated names ( also given to the New Parent Program) with the expectation that the Program would determine participant interest. Through conversations between MCH, New Parent Program and Coordinated Intake Project, a system has been created to better expedite referrals in the coming FY17 year. It is anticipated that there will be better gathering of information, sharing of information, more appropriate and interested families will be referred and, that the result will be a better return on the time and effort invested.

#### Success Story

"It is a joyful thing to be able to share a story with a happy new chapter. I have been serving a mom who was identified as high risk at enrollment. Her child had been removed from the home due to alleged abuse. We began weekly visits from the start. Mom has been faithful and invested in our visits. Due to her strong love for her infant son, her willingness to be transparent, her desire to develop her knowledge of parenting and child development, and her will to never give up hope...Mom received the Judge's decision that she will regain full custody of her son. Mom realizes that the years ahead will require her to be a strong parent for her child. A positive family and friend network do not exist. She has learned to rely on her own abilities and inner strength while discerning which entities are worthy of accepting help from. Mom has learned that she has that strength through her love for her son. " (Story #2) "Out of the 12 Shared Visions Families I served this last year, 4 of them have chosen to stay with the Parents as Teachers program. One of the families were new to the Perry area. They have become oriented to the area. Learned about the activities that go on in the community. And the different resources that are available to help families with food. This family visited with the home visitor up until June 30th the last day they were able to be in the program. Their youngest child will be going to kdg. this fall. It has been a real joy working with this mom and her daughters!"

#### Fiscal Accountability (this will be completed by the ECI Director)

12	# of payment vouchers submitted this fiscal year
10	# of payment voucher submitted that had no issues this fiscal year
83%	% of payment vouchers that had no issues this fiscal year

#### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Family Support - Intensive long term home visitation

Agency:	Lutheran Services in Iowa		
Name of Program:	New Parent Program		
Completed By:	colleen theis	Date:	07/19/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$114,003.00	ECI grant award		
36	Families	40	Families
740	Visits	463	Visits
1.67	FTE Family Support Workers	1.67	FTE Family Support Workers
0.6	FTE Supervisor	0.6	FTE Supervisor

### Comments regarding meeting benchmark targets

The New Parent Program exceeded the set benchmark of number of families served by program in FY 16 with 40. We attribute this success with a rapid onboarding of Family Support Worker(FSW) to fill vacancy that occurred. As a program we were able to retain 72% of families that were assigned to previous FSW. The program did not meet the benchmark regarding the number of visits with families. Inspire of not making this benchmark the program was successful in increasing the overall number of visits compared what was completed in FY 15. 352 HV completed in FY 15 vs. 466 HV completed in FY 16.

Number of Home Visits By County		Number of New Families Enrolled	
0	Adair	0	Adair
185	Dallas	9	Dallas
50	Madison	0	Madison
228	Warren	9	Warren
<b>463</b>	<b>Total</b>	<b>18</b>	<b>Total</b>

ECI Funding Investments	
\$112,992.65	4 R Kids ECI funds expended
<b>99.1%</b>	% of 4 R Kids ECI funds expended

Other Funding Expended and Source (inkind is not to be reported only cash)	
\$8,848.95	DCAT
\$885.00	contributions
\$0.00	
<b>\$122,726.60</b>	<b>Total cost of program</b>
<b>\$265.07</b>	<b>Average cost per visit</b>
<b>\$3,068.17</b>	<b>Average cost per family</b>

### Demographics

Primary Care Givers Marital Status			
14	Married	13	Partnered
8	Single	3	Divorced
0	Widowed	2	Separated
<b>40</b>	<b>Total</b>		

Household Size			
8	2	6	5
14	3	2	6
7	4	3	greater than 6
<b>40</b>	<b>Total</b>		

Primary Care Giver Education Level			
2	middle school or lower	1	trade or vocational training
9	some high school	6	some college
18	high school diploma	2	2-year college degree
1	GED	1	4-year college degree
<b>40</b>	<b>Total</b>	0	Master's degree or greater

Primary Care Giver Race/Ethnicity			
0	Native American or Alaskan Native	2	Asian
0	Native Hawaiian or Pacific Islander	34	White
3	African American	1	Multiracial
<b>40</b>	<b>Total</b>		

Primary Care Giver Hispanic/Latino	
8	# that are Hispanic/Latino
32	# that are not Hispanic/Latino
<b>40</b>	<b>Total</b>

First Time Mother	
15	Yes
25	No
<b>40</b>	<b>Total</b>

Families where one or more children 0-5 are not living with the parents due to out-of-home placement in the DHS foster care system			
<b>5%</b>	2	numerator	38
			denominator

One of more care givers are incarcerated	
2	Yes
38	No
<b>40</b>	<b>Total</b>

**Other Care Giver's Education Level**

1	middle school or lower	1	trade or vocational training
5	some high school	2	some college
17	high school diploma	0	2-year college degree
1	GED	0	4-year college degree
27	<b>Total</b>	0	Master's degree or greater

**Other Outputs**

18	# of newly enrolled families
18	# of newly enrolled families that met enrollment criteria
14	# of exited families
26.1	average age of mothers at enrollment
6	# of children referred to Early Intervention Services
0	# of group-based parent education meetings
0	# of participants that attended group-based parent education meetings
21	# of referrals from Coordinated Intake project
2	# of referrals from Coordinated Intake project that accepted service
1	# of referrals from Coordinated Intake project that were already enrolled in your family support program
32	# of families referred by Maternal Child Health (DCPH)
9	# of families from Maternal Child Health (DCPH) that accepted service
No	Has there been a client waiting list at any time this year, Yes or No

**Outcomes**

77.3%	home visit completion rate	137	numerator	603	denominator
100.0%	% of families that met enrollment criteria	18	numerator	18	denominator
92.0%	% of families that improve or maintain healthy family functioning, problem solving and communication	23	numerator	25	denominator
60.0%	% of families that increase or maintain social supports	15	numerator	25	denominator
84.0%	% of families that are connected to additional concrete supports	21	numerator	25	denominator
64.0%	% of families that increase knowledge about child development and parenting	16	numerator	25	denominator
44.0%	% of families that improve nurturing and attachment between parents and children	11	numerator	25	denominator

**Other Comments**

(Also provide comments regarding the agency data base system compared to REDCap - they must match)  
(If there has been a client waiting list during the year, explain why and how you addressed it)

**Successes**

The program had success with the collaborated professional development provided in collaboration with Partners in Family development and SWICC PAT programs. program staff attending an in-service on temperament based parenting. Staff found the information helpful and insightful. the program was successful in the onboarding of new staff after vacancy developed with direct service staff. The quick acquisition of staff to fill vacancy resulted in a 72% retention rate of families that were working with previous family support worker.

**Challenges**

The New Parent Program has worked well to minimize the challenges that program has encountered over that last year. The program has continued to work with other programs and agencies to develop a stronger system of referrals and intake. This system took time, communication and collaboration with DCPH, Partners in Family Development and coordinated intake to develop and come to consensus.

**Success Story**

The New Parent Program received the referral for Cindy and her family from the coordinated intake project in 2015 and started to work with the family shortly after the baby was born. Cindy\* has a past history of abuse, mental health issues and is a recovering alcoholic. Cindy is a mother to five children, the youngest being the target child of the New Parent Program. In spite of inconsistent housing and recently losing their transportation due to a car accident the family continues to build on their strengths to obtain a better life. The family works well with their family support worker (FSW), focusing on stretching the family and providing resources and referrals to gain additional support and services for the family. One of the older siblings in the home has autism. To help educate and help the family with stresses associated with having a child with autism their FSW has provided referrals to both AEA and Homestead, a local non-profit specifically for autism services. Problem solving together has also been a large part of Cindy's visits with her FSW. Mom had to develop plans for childcare, transportation and how to get school work completed, while taking care of an infant. Their FSW provides encouragement for Cindy to keep going with her education and help overcoming their barriers. Goals for Cindy continue to be developed and over time have changed to cover employment, continuing her education and housing. Mom has a strong attachment to all of her children and is very interested in the growth and development of all of her children especially that of her youngest child. Mom and her family are continuing to be part of the New Parent Program. Mom has indicated that even though she has five children there is always more that a parent can learn to do better. \*name has been changed.

**Fiscal Accountability (this will be completed by the ECI Director)**

12	# of payment vouchers submitted this fiscal year
8	# of payment voucher submitted that had no issues this fiscal year
67%	% of payment vouchers that had no issues this fiscal year

**Reporting Accountability (this will be completed by the ECI Director)**

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids Annual Report - FY16

Program service type as defined by ECI: Family Support - long term home visitation

Agency:	Southwestern Community College		
Name of Program:	Parents as Teachers		
Completed By:	Kristie Nixon	Date:	7-18-16

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$72,804.00	ECI grant award		
25	Families	23	Families
340	Visits	302	Visits
12	Group Parent Ed	16	Group Parent Ed
1	FTE Educators	1	FTE Educators
0.29	FTE Director/Supervisor	0.29	FTE Director/Supervisor

### Comments regarding meeting benchmark targets

We did not meet our program benchmarks for visits and families this year. That being said the families on our case load are more high needs then in years past and require higher visit frequency. Due to the high needs of these families keeping and scheduling visits is challenging for families that are struggling with issues such as trying to find housing/jobs or domestic violence issues. If all of our visits were kept our visits would have been 372 above our benchmark. We held several group connections. Blockfest and Toddlerfest were successful in Adair County.

Number of Home Visits By County	Number of New Families Enrolled
302 Adair	6 Adair

ECI Funding Investments	
\$71,049.53	4 R Kids ECI funds expended
97.6%	% of 4 R Kids ECI funds expended

Other Funding Expended and Source (inkind is not to be reported only cash)	
\$10,450.00	ICAPP and CBCAP
\$450.00	CPPC grant Family Cabinet
\$0.00	
<b>\$81,949.53</b>	<b>Total cost of program</b>
<b>\$271.36</b>	<b>Average cost per visit</b>
<b>\$3,563.02</b>	<b>Average cost per family</b>

### Demographics

Primary Care Givers Marital Status			
11	Married	5	Partnered
4	Single	1	Divorced
0	Widowed	2	Separated
<b>23</b>	<b>Total</b>		

Household Size			
4	2	3	5
4	3	4	6
5	4	3	greater than 6
<b>23</b>	<b>Total</b>		

Primary Care Giver Education Level			
0	middle school or lower	0	trade or vocational training
2	some high school	2	some college
8	high school diploma	7	2-year college degree
1	GED	3	4-year college degree
<b>23</b>	<b>Total</b>	0	Master's degree or greater

Primary Care Giver Race/Ethnicity			
0	Native American or Alaskan Native	0	Asian
0	Native Hawaiian or Pacific Islander	23	White
0	African American	0	Multiracial
<b>23</b>	<b>Total</b>		

Primary Care Giver Hispanic/Latino	
2	# that are Hispanic/Latino
21	# that are not Hispanic/Latino
<b>23</b>	<b>Total</b>

First Time Mother	
6	Yes
17	No
<b>23</b>	<b>Total</b>

Families where one or more children 0-5 are not living with the parents due to out-of-home placement in the DHS foster care system

0%	0	numerator	23	denominator
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**One of more care givers are incarcerated**

1	Yes
22	No
23	Total

**Other Care Giver's Education Level**

0	middle school or lower	1	trade or vocational training
2	some high school	5	some college
4	high school diploma	0	2-year college degree
2	GED	0	4-year college degree
14	Total	0	Master's degree or greater

**Other Outputs**

6	# of newly enrolled families
5	# of newly enrolled families that met enrollment criteria
7	# of exited families
28.9	average age of mothers at enrollment
9	# of children referred to Early Intervention Services
16	# of group-based parent education meetings
0	# of participants that attended group-based parent education meetings
46	# of referrals from Coordinated Intake project
1	# of referrals from Coordinated Intake project that accepted service
1	# of referrals from Coordinated Intake project that were already enrolled in your family support program
Yes	Has there been a client waiting list at any time this year, Yes or No

**Outcomes**

80.9%	home visit completion rate	71	numerator	372	denominator
83.3%	% of families that met enrollment criteria	5	numerator	6	denominator
100.0%	% of families that improve or maintain healthy family functioning, problem solving and communication	17	numerator	17	denominator
94.1%	% of families that increase or maintain social supports	16	numerator	17	denominator
88.2%	% of families that are connected to additional concrete supports	15	numerator	17	denominator
82.4%	% of families that increase knowledge about child development and parenting	14	numerator	17	denominator
41.2%	% of families that improve nurturing and attachment between parents and children	7	numerator	17	denominator

**Other Comments**  
 (Also provide comments regarding the agency data base system compared to REDCap - they must match)  
 (If there has been a client waiting list during the year, explain why and how you addressed it)

At times this year our program has had a waiting list with no more than one family on the list. When considering an educators case load numerous factors are weighed such as travel time and also case complexity. This year there has been an increase in the number of families with high complexity of the case. As soon as an opening occurred on our case load, through natural causation such as a family ages out, moves out of service area or number of visits decrease due to improvement in family the families on waiting list have been enrolled and services started.

**Successes**

This year our referrals from ISU Extension Coordinated Intake have matched each month. We have periodically had a waiting list with one family on it. We have been able to work the family into the case load with in about a month through having another family age out/ exit the program or a family show improvement and request less visits.

**Challenges**

Challenges this year were the families on the case load with high needs requiring more visits. These families struggle with issues such as find a home for their family, domestic violence and securing jobs and child care. When families are faced with these severe challenges it is hard for them to keep appointments. The educator works diligently to get visits rescheduled at a time that works for families. The supervisor and educator have been trainee in the use of Dasiey as the state's new data collection system which launches 7-18-16.

**Success Story**

Family(teen mom) that I enrolled back in 2012, when I first started working w/ PAT, just graduated from SWCC in Creston and worked a job throughout school!!!! There is not much I can add to this other than I am extremely proud of how well this young lady has overcome so many barriers, is ready to get into the workforce all the while raising a little guy who is doing AWESOME in all areas!

**Fiscal Accountability (this will be completed by the ECI Director)**

12	# of payment vouchers submitted this fiscal year
10	# of payment voucher submitted that had no issues this fiscal year
83%	% of payment vouchers that had no issues this fiscal year

**Reporting Accountability (this will be completed by the ECI Director)**

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Family Support - short term home visitation

Agency: Dallas County Public Health

Name of Program: Maternal Child Health

Completed By: Shelley Horak

Date: 07/20/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$82,660.00	ECI grant award	89	Families
105	Families	515	Visits
380	Visits	1.66	FTE Nurse/Social Worker
1.66	FTE Nurse/Social Worker		

### Comments regarding meeting benchmark targets

Below we state in the Challenges section that the number of new families was reduced due to the need for more intense services and assistance by our enrolled families. While we work toward meeting our benchmarks, we also feel strongly that the quality of our interactions is of utmost importance. With our growing diversity and adopting new practices into our interactions, we uncover more unmet social needs and spend more time addressing those needs to support a healthy pregnancy and delivery as well as a healthy baby and family unit. This is indicated by the fact that we completed 137 more visits for 14 fewer families than we anticipated.

Number of Home Visits By County	Number of New Families Enrolled
515 Dallas	59 Dallas

ECI Funding Investments	
\$82,660.00	4 R Kids ECI funds expended
100.0%	% of 4 R Kids ECI funds expended

Other Funding Expended and Source (inkind is not to be reported only cash)	
\$0.00	
\$0.00	
\$0.00	
\$82,660.00	Total cost of program
\$160.50	Average cost per visit
\$928.76	Average cost per family

### Demographics

Primary Care Givers Marital Status			
36	Married	22	Partnered
30	Single	0	Divorced
0	Widowed	1	Separated
89	Total		

Household Size			
13	2	21	5
28	3	7	6
19	4	1	greater than 6
89	Total		

Primary Care Giver Education Level			
10	middle school or lower	3	trade or vocational training
24	some high school	18	some college
27	high school diploma	0	2-year college degree
6	GED	1	4-year college degree
89	Total	0	Master's degree or greater

Primary Care Giver Race/Ethnicity			
1	Native American or Alaskan Native	4	Asian
0	Native Hawaiian or Pacific Islander	76	White
7	African American	1	Multiracial
89	Total		

Primary Care Giver Hispanic/Latino	
47	# that are Hispanic/Latino
42	# that are not Hispanic/Latino
89	Total

First Time Mother	
36	Yes
53	No
89	Total

Families where one or more children 0-5 are not living with the parents due to out-of-home placement in the DHS foster care system			
1%	1	numerator	89
		denominator	

One of more care givers are incarcerated

2	Yes
87	No
<b>89</b>	<b>Total</b>

**Other Care Giver's Education Level**

10	middle school or lower	1	trade or vocational training
20	some high school	3	some college
23	high school diploma	0	2-year college degree
5	GED	1	4-year college degree
<b>63</b>	<b>Total</b>	0	Master's degree or greater

**Other Outputs**

<b>59</b>	# of newly enrolled families
<b>59</b>	# of newly enrolled families that met enrollment criteria
<b>57</b>	# of exited families
<b>26.3</b>	average age of mothers at enrollment
<b>3</b>	# of children referred to Early Intervention Services
<b>0</b>	# of group-based parent education meetings
<b>0</b>	# of participants that attended group-based parent education meetings
<b>6</b>	# of referrals from Coordinated Intake project
<b>0</b>	# of referrals from Coordinated Intake project that accepted service
<b>0</b>	# of referrals from Coordinated Intake project that were already enrolled in your family support program
<b>49</b>	# of families referred to ECI funded family support programs
18	# of families referred to Parents as Teachers (PFD)
31	# of families referred to New Parent Program (LSI)
<b>No</b>	Has there been a client waiting list at any time this year, Yes or No

**Outcomes**

<b>88.5%</b>	home visit completion rate	59	numerator	515	denominator
<b>100.0%</b>	% of families that met enrollment criteria	59	numerator	59	denominator
<b>75.0%</b>	% of families that improve or maintain healthy family functioning, problem solving and communication	12	numerator	16	denominator
<b>75.0%</b>	% of families that increase or maintain social supports	12	numerator	16	denominator
<b>93.8%</b>	% of families that are connected to additional concrete supports	15	numerator	16	denominator
<b>80.0%</b>	% of families that increase knowledge about child development and parenting	8	numerator	10	denominator
<b>20.0%</b>	% of families that improve nurturing and attachment between parents and children	2	numerator	10	denominator

**Other Comments**

(Also provide comments regarding the agency data base system compared to REDCap - they must match)  
 (If there has been a client waiting list during the year, explain why and how you addressed it)

New Mom's enrolled YTD: 58, New babies enrolled YTD: 41. Total new enrollees YTD: 99. Clinical Assessment Breakdown: Total SW visits = 178, Total RN visits to Moms = 331, Total RN visits to babies = 204. Total visits for the MCH Program = 713. This information is supplied due to the change in the requirements for using Tool FF vs. how we calculated visits and enrollees prior to FY16.

We have corrected the "families that meet enrollment criteria" to reflect what is reported in RedCap. What was reported in the first half of the year to ECI, was incorrect as there was confusion about the enrollment criteria

The visits performed and total families enrolled are off by 2 from what is reported in RedCap - this is due to evaluation visits performed by the Medical Social Worker or MCH RN that do not result in the client being enrolled in the program.

The number reported here for Coordinated intake referrals will not match up without monthly reports, as there were 2 referrals made in Q2 that DCPHNS was never able to contact. Those 2 referrals were not appropriately accounted for on our internal reporting spreadsheet. This has been corrected and we will report all Coordinated intake referrals from this point forward.

**Successes**

During the IFSTAN Credentialing process, our staff spent a number of hours working through policies, evidence, and practices. The outcome is a more complete understanding across all staff involved related to how our program works, where improvement is needed, the outcomes that are important for us to work toward while building healthy families, and practices we can easily incorporate to strengthen our program.

Our staff continued to connect families with the resources they needed to help support their families. Assistance in lining up transportation to appointments, connections to mobile food and clothing pantries, and back to school supplies and health fairs, along with helping families locating financial assistance for utilities. Families were also connected to family and individual counseling as needed. This work continues to be important in addressing risks and building protective factors where needed. In exchange for the time spent, family outcomes are improved with these interventions.

During the past year a bachelor of social work student from the University of Iowa shadowed our MCH social worker from January through May. Several nursing and community health students from Mercy College, DMACC and Des Moines University also spent time with both our MCH nurse and MCH social worker throughout the fiscal year. These projects have allowed our program to assess the needs of our clients as well as produce useful educational materials to benefit families. For example, the time and efforts of our social work student to help plan and host a community event at the Brick Street Café. Projects like these move our program forward in meeting the needs of families and expanding the effectiveness and quality of our services.

Dallas County Public Health MCH convened 4RKids funded programs to discuss building a network related to supporting families across Dallas County. Goals are to create a continuum of services and identify gaps, needs and opportunities for families in times of decreasing funding. Partners meet monthly and will identify potential collaborative projects outside their regular interventions.

**Challenges**

Our Maternal Child Health program had several clients during the fiscal year who required much support and guidance with their pregnancy and with parenting an infant, due to their intellectual and/or emotional disability and their lack of appropriate social support. Therefore our nurse and social worker made numerous visits and phone contacts with these particular clients, limiting our interactions with other families and ultimately the number of families we were able to serve.

Dallas County has continued to grow in population and in diversity, with increased numbers of pregnant women who are new to the United States and are unfamiliar with the health care system and resources available for young families. We spent extra time with clients who required assistance in navigating the system and educating about requirements such as car seats, immunizations, and employer practices regarding family leave and employee rights on using scheduled breaks at work to pump breast milk.

A change that is both a positive and a challenge is the integration of new research into our practice. After attending trainings on Adverse Childhood Experiences and on how brain development is impacted by social stimulation (Connections Matter), our Maternal Child Health staff have begun to include these elements into our approach and what we educate clients about.

#### Success Story

Client is 39-year-old married Latina with MS. She was pregnant for the third time with her husband of ten years; they experienced two previous pregnancies resulting in miscarriage. In addition to MS, this client stated that she had weighed more than 500 lbs. and had gastric bi-pass surgery. She had suffered from depression for several years, but reported this decreased after her weight loss.

This client was referred by WIC. She was also being served by Partners in Family Development. Due to her age, MS, and history of obesity, the Maternal Child Health nurse closely monitored this pregnancy, educating and monitoring her health. The client's previous depression and miscarriage prompted close contact with the MCH social worker as well, for information and support.

Client expressed a strong desire to breastfeed, which would not be advised if she went back on her MS medications right after deliver, which her neurologist advised. The MCH nurse exchanged information with client's doctors regarding this and client's decision on whether to attempt to deliver vaginally or schedule a caesarean delivery. The MCH nurse did much education throughout the pregnancy to inform and reinforce the messages from this client's medical team.

Client delivered a healthy baby via c-section with no complications. She tried to breastfeed in the hospital, but baby had trouble latching and client decided it was best to bottle feed so she could start back on her MS medications.

The MCH nurse added an extra layer of monitoring this client's well-being. The MCH social worker allowed client many opportunities to express her feelings about the pregnancy, her hopes and fears, and pride in her accomplishment of safely delivering a healthy infant. In every step of the way, as options and opinions were given by various healthcare professionals, this client was allowed to feel empowered to accept or reject all options.

Client and her husband are delighted with their daughter. Client continues to do very well with managing baby and postpartum cares. She has no symptoms of depression, and reports things are going well with MS medications and symptoms, stating she feels a difference on the medications. Client continues to be compliant with all medical visits.

Partnerships utilized – MCH nurse monitored client's health and communicated with OB and neurologist as was appropriate; MCH social worker offer client opportunities to work through emotions and prepare emotionally for any given outcome; Parents as Teachers visitor offered parenting education; medical team were willing to communicate with DCPH nurse on a professional level.

#### Fiscal Accountability (this will be completed by the ECI Director)

12 # of payment vouchers submitted this fiscal year

10 # of payment voucher submitted that had no issues this fiscal year

83% % of payment vouchers that had no issues this fiscal year

#### Reporting Accountability (this will be completed by the ECI Director)

4 # of reports completed this fiscal year

4 # of reports completed timely this fiscal year

100% % of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Child Care Nurse Consultant - Indirect

<b>Agency:</b>	New Opportunities Inc	
<b>Name of Program:</b>	Child Care Nurse Consultant serving Dallas County	
<b>Completed By:</b>	Paula Klocke	<b>Date:</b> 7/13/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$36,060.00	ECI grant award		
40	providers served	46	providers served
4	health and safety trainings	6	health and safety trainings
85	onsite visits	100	onsite visits
0.5	FTE qualified CCNC	0.5	FTE qualified CCNC

### Comments regarding meeting benchmark targets

Chris Lee, CCNC successfully met all benchmarks identified by our FFY16 project plan. We are excited that our project ends on a positive note.

### ECI Funding Investments

\$35,086.23	4 R Kids ECI funds expended
97.3%	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (inkind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
\$35,086.23	<b>Total cost of program</b>

### Outputs

100	# of visits by a nurse consultant
28	# of programs participating with nurse consultant (unduplicated)

Number of programs participating with nurse consultant by QRS category	Number of programs by regulation (should add to be the same as B29)
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0	QRS Level 1	0	Non-Registered
10	QRS Level 2	28	DHS Registered
3	QRS Level 3	0	DHS Licensed
10	QRS Level 4	0	DE Regulated/license exempt
5	QRS Level 5	28	<b>Total</b>
28	<b>Total</b>		

6	# of health and safety trainings provided
5	# of children with special health care needs
148	# of technical assistance contacts
	# of early learning programs participating in quality initiative (i.e. QRS 3-5, QPPS, National Accreditation, Head Start Standards)
11	
39.3%	% of programs participating in quality initiative (unduplicated)
\$1,253.08	Average cost of service

## Outcomes

	5	# of children with a special health care need who have a care plan at the facility
	100%	% of children with special health care needs with a special needs care plan in place at the child care facility (program)

	13	# of programs that received onsite assessment and consultation that improve health safety conditions in their early learning environments
	46%	% of programs receiving onsite assessment and consultation that improve health and safety conditions in their early learning environments

	13	# of early learning programs that received child care nurse consultation that achieved a level 3, 4, or 5 in the QRS system
	46%	% of programs rating a 3 or higher in the QRS system

## Other comments

## Successes

New Opportunities has been providing CCNC services in Dallas County since July 2012. We meet some challenges in the first 18 months of the project as we struggled to successfully complete the on-line training. Each year that passed we became more and more successful. Partnerships were developed with local public health, Child Care Resource and Referral, CACFP and ISU Extension. Each contributing to the success of the project. The project offered staff great rewards in serving child care providers in Dallas County who were working to improve early childhood environments for young children of Dallas county. We thank the Board for their support of the project.

## Challenges

## Success Story

### Fiscal Accountability (this will be completed by the ECI Director)

12	# of payment vouchers submitted this fiscal year
11	# of payment voucher submitted that had no issues this fiscal year
92%	% of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Child Care Nurse Consultant - Indirect

<b>Agency:</b>	Warren County Health Services	
<b>Name of Program:</b>	Child Care Nurse Consultant serving Madison & Warren County	
<b>Completed By:</b>	Shelly Jensen RN BSN	<b>Date:</b> 7/6/16

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$37,126.00	ECI grant award		
35	providers served	42	providers served
3	health and safety trainings	10	health and safety trainings
100	onsite visits	141	onsite visits
0.4	FTE qualified CCNC	0.4	FTE qualified CCNC

### Comments meeting benchmark targets

All benchmarks met and exceeded. Trainings provided included: Safe Sleep, Universal Precautions, Mandatory Reporter, Injury Prevention in Child Care ,Preventing Shaken Baby Syndrome. A total of 131 providers trained. Providers served via the CCNC program include home providers, child care centers, and preschool programs.

### ECI Funding Investments (inkind is not to be reported only cash)

\$37,126.00	4 R Kids ECI funds expended
<b>100.0%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source

\$0.00	
\$0.00	
\$0.00	
<b>\$37,126.00</b>	<b>Total cost of program</b>

### Outputs

<b>141</b>	# of visits by nurse	<b>32</b>	Madison	<b>109</b>	Warren
<b>42</b>	# of programs participating with nurse consultant (unduplicated)	<b>9</b>	Madison	<b>33</b>	Warren

### Number of programs participating with nurse consultant by QRS category

### Number of programs by regulation (should add to be the same as B29)

0	QRS Level 1	0	Non-Registered
6	QRS Level 2	30	DHS Registered
5	QRS Level 3	12	DHS Licensed
10	QRS Level 4	0	DE Regulated/license exempt
3	QRS Level 5	<b>42</b>	<b>Total</b>
<b>24</b>	<b>Total</b>		

10	# of health and safety trainings provided
9	# of children with special health care needs
114	# of technical assistance contacts
18	# of early learning programs participating in quality initiative (i.e. QRS 3-5, QPPS, National Accreditation, Head Start Standards)
<b>42.9%</b>	% of programs participating in quality initiative (unduplicated)
<b>\$883.95</b>	Average cost of service

## Outcomes

	8	# of children with a special health care need who have a care plan at the facility
	89%	% of children with special health care needs with a special needs care plan in place at the child care facility (program)
	42	# of programs that received onsite assessment and consultation that improve health safety conditions in their early learning environments
	100%	% of programs receiving onsite assessment and consultation that improve health and safety conditions in their early learning environments
	18	# of early learning programs that received child care nurse consultation that achieved a level 3, 4, or 5 in the QRS system
	43%	% of programs rating a 3 or higher in the QRS system

### Other comments

### Successes

The ongoing relationships and the trust providers instill in the CCNC for guidance related to health and safety is a great success. Providers are confident that when they have a question or a need they can access the CCNC and will receive a timely and evidenced based response. Relationship building is at the core of this program. Another success is new provider participation with the CCNC, particularly in Madison county, which has been historically difficult to engage in consultation services and QRS. Over the past year, the CCNC program has worked with 2 large centers who are both pursuing QRS and are very motivated to implement quality changes. The overall result and effect of this directly influences the quality of care and the environment of children in these programs.

### Challenges

One challenge this year continues to be engaging new providers in seeing the value and benefit of the Quality Rating System and the importance of onsite assessments with a CCNC. Another challenge is related to the changes with the Child Care Development Block Grant and uncertainty of what this will bring to providers.

### Success Story

A home provider relocated and had some challenges with her outdoor environment/landscaping related to safety. This provider contacted the CCNC for guidance in implementing multiple safety features in the outdoor play space. This was an added financial burden and affected the aesthetics of the landscape, but the provider was willing to make these changes. She is very experienced in providing care and has worked with the CCNC for many years. She genuinely sees the benefit in quality and safe child care. She called me very frequently with the changes that were implemented and openly invited me to assess the environment multiple times. She is passionate about providing the best quality care in her power and appropriately seeks the resources she needs to implement change. This a true success!

### Fiscal Accountability (this will be completed by the ECI Director)

12	# of payment vouchers submitted this fiscal year
12	# of payment voucher submitted that had no issues this fiscal year
100%	% of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Quality Improvement for Early Learning - Indirect

<b>Agency:</b>	Orchard Place/Child Care Resource and Referral		
<b>Name of Program:</b>	Cash incentives for child care providers - serving Adair, Dallas, Madison, and Warren County		
<b>Completed By:</b>	Leslie Stonehocker	<b>Date:</b>	7/6/16

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$4,751.00	ECI grant award		
13	provider mini grants	12	Provider mini grants

### Comments regarding meeting benchmark targets

ECI Funding Investments	
\$4,410.00	4 R Kids ECI funds expended
<b>92.8%</b>	% of 4 R Kids ECI funds expended

Other Funding Expended and Source (inkind is not to be reported only cash)	
\$0.00	
\$0.00	
\$0.00	
<b>\$4,410.00</b>	<b>Total cost of program</b>

<b>12</b>	# of programs participating in the funded quality improvement activity
0	Adair
2	Madison
3	Dallas
7	Warren

Number of programs participating in quality initiative by QRS category	
0	QRS Level 1
11	QRS Level 2
1	QRS Level 3
0	QRS Level 4
0	QRS Level 5
<b>12</b>	<b>Total</b>

Number of programs participating in the quality initiative by category	
1	QRS 3, 4, 5
0	IQPPS Verified
0	NAEYC Accredited
0	NAFCC Accredited
0	Head Start Standards
<b>1</b>	<b>Total</b>

## Outcomes

<b>1</b>	# of programs participating in the quality improvement activity that improve their rating in one or more of the quality initiatives (as defined by ECI) or that maintain their rating at the highest level in the rating
<b>8.3%</b>	% of programs that improve or maintain at the highest level their rating in a quality initiative
<b>1</b>	# of early learning programs that have achieved a level 3, 4, 5 in the QRS system
<b>8.3%</b>	% of programs rating 3 or higher in the QRS system

**Other Comments**

The purpose of this project is to support child development home providers as they obtain DHS registration, attend ChildNet training, become ChildNet Certified, and apply for an entry level QRS rating. Similar projects in other counties show that the earlier a provider begins working with a consultant and pursues continuous quality improvement, they experience increased levels of internal motivation which keeps them participating throughout their careers.

**Successes**

The consultant working primarily with this project reported the following: "Even though we don't receive much funding from ECI, I think it really helps to have some funds available to these providers because that motivates them to participate in these quality initiatives. Each person will receive \$350 from us, and they all have plans on how they want to put the money back into their child care program."

**Challenges**

The consultant working primarily with this project reported that the numbers of cancelled visits becomes challenging. Those visits nearly always get rescheduled, but it seems to take providers longer to process, implement, and complete the requirements of ChildNet Certification. Offering ChildNet training early in the fiscal year has allowed more time later in the fiscal year for providers to complete expectations.

**Success Story**

My name is Courtney Bowlsby and I have been a child care provider for 1 year. I started my program in March 2015 but didn't become involved with CCR&R until late summer/early fall. The resources and information I have gathered have been incredible. In the short time I have been involved, I have been able to become ChildNet Certified and achieve a QRS Level 2. I wouldn't have known about any of these resources without my CCR&R child care consultant, Janelle Peiffer. I was able to receive a grant by completing the FCCERS program, which in turn provided a fence for my back yard at my new house. My new house is located near a highway so this was an amazing opportunity to have! Becoming ChildNet Certified also provided me with funds to put back into my program. These funds will be going towards my new daycare space! I am finishing my basement to accommodate a daycare playroom along with kitchenette, private daycare restroom, and a separate naptime room. I'm so excited for this big project to be completed and we are coming right along! I cannot express enough how working with Janelle and CCR&R have not only helped my program but have educated me tremendously on what a QUALITY program looks like. I plan to continue to work with Janelle and grow my program's quality. CCR&R is an amazing resource to providers and I'm so happy I learned about them. I have referred other providers I know to CCR&R to help them with their programs and the feedback I have gotten has been nothing but positive. Thank you so much!

**Other Information**

Number of mini grants by County		Amount Expended by County	
0	Adair	\$0.00	Adair
3	Dallas	\$1,102.50	Dallas
2	Madison	\$735.00	Madison
7	Warren	\$2,572.50	Warren
<b>12</b>	<b>Total</b>	<b>\$4,410.00</b>	<b>Total</b>

**Fiscal Accountability (this will be completed by the ECI Director)**

9	# of payment vouchers submitted this fiscal year
9	# of payment voucher submitted that had no issues this fiscal year
<b>100%</b>	% of payment vouchers that had no issues this fiscal year

**Reporting Accountability (this will be completed by the ECI Director)**

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
<b>100%</b>	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Professional Development Training - Indirect

<b>Agency:</b>	Dallas County ISU Extension	
<b>Name of Program:</b>	Quality Improvement Program - Serving Adair, Dallas, Madison, and Warren County	
<b>Completed By:</b>	Myra Willms	<b>Date:</b> 7-11-2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$94,654.00	ECI grant award		
50	Trainings	51	Trainings
165	Provider visits	127	Provider visits
500	Parent contacts	902	Parent contacts
1.5	FTE	1.5	FTE
1	Complete outside evaluation	0	Outside evaluation completed

### Comments regarding benchmark targets

Provider visits were low this year due to a reduced number of providers participating in the mini grants. Most providers have participated in the grants in past years so were familiar with the process and did not need additional visits, other than the two required, to complete their self evaluations and quality improvement plans. Parent contacts were good as most all providers receiving grants were willing to share our informational sheet with their parents. Also made several contacts through Toddlerfests. We did not complete an outside evaluation this year due to not being able to confirm availability of campus staff.

### ECI Funding Investments

\$87,389.59	4 R Kids ECI funds expended
<b>92.3%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (inkind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
<b>\$87,389.59</b>	<b>Total cost of program</b>

**51** # of trainings

### Number of trainings that best fit each of the following categories

17	early learning programs
0	family support
4	special needs
30	health, mental health, nutrition
<b>51</b>	<b>Total</b>

## Outcomes

### % of trainings that best fit following categories

<b>33%</b>	% early programs
<b>0%</b>	% family support
<b>8%</b>	% special needs
<b>59%</b>	% health, mental health, nutrition
<b>\$1,713.52</b>	Cost per training

### Other Comments

(Provide update on the outside evaluation)

No outside evaluation done at this time.

### Successes

This year was successful in implementing a variety of trainings across the four counties. We saw a need for several Health and Safety and the mandatory trainings DHS requires of providers and therefore offered extra sessions of them at provider requests. We also had several child care centers offer their facility as free space for trainings which helped us with cost. We offered 8 university driven trainings in 3 of the counties under STEM. These were very successful and providers were very much engaged. We were able to offer some brand new trainings to providers that they had not had opportunity to take before.

### Challenges

One challenge with trainings this year is that many presenters have increased their prices to train which makes it harder to stretch the dollars in the budget, however, I did take advantage of some ISU Extension staff to do some training during their work hours which lowered our costs. Another challenge has been to offset all of the online classes now available to providers and to make sure to meet the needs of providers in each of the four counties. It is harder to take training to less populated areas because the number of enrollees is usually less and it takes extra effort with phone calls to get enough enrollments to run the class.

### Success Story

In collaboration with a preschool in Adair County, I was able to take 2 university level trainings to that county. The center director helped by providing free meeting space, janitorial set up, snacks and beverages so that we could keep costs to providers at a minimum. It was well received, and enjoyed by all who attended. We had participants from 6 different counties that day.

#### Other Information

# of Face to Face Contacts by County		# of Parent Contacts by County	
8	Adair	5	Adair
36	Dallas	324	Dallas
16	Madison	221	Madison
67	Warren	352	Warren
<b>127</b>	<b>Total</b>	<b>902</b>	<b>Total</b>

# of trainings conducted by County		# of Participants served through training	
5	Adair	59	Adair
16	Dallas	192	Dallas
5	Madison	58	Madison
25	Warren	254	Warren
<b>51</b>	<b>Total</b>	102	Polk
		32	Other
		<b>697</b>	<b>Total</b>

#### Fiscal Accountability (this will be completed by the ECI Director)

12	# of payment vouchers submitted this fiscal year
10	# of payment voucher submitted that had no issues this fiscal year
83%	% of payment vouchers that had no issues this fiscal year

#### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Quality Improvement for Early Learning - Indirect

<b>Agency:</b>	Dallas County ISU Extension		
<b>Name of Program:</b>	Incentives for child care providers - serving Adair, Dallas, Madison, and Warren County		
<b>Completed By:</b>	Myra Willms	<b>Date:</b>	7-11-2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$26,250.00	ECI grant award		
15	provider mini grants	12	Provider mini grants

### Comments regarding benchmark targets

The number of provider mini grants was less than what we had anticipated in the beginning, but we were able to give a grant to all who applied. We did try making a few additional contacts to encourage a few more, but others were either not interested or did not want to take the ERS class required to do the quality self assessment in order to fill out the item request form.

### ECI Funding Investments

\$26,250.00	4 R Kids ECI funds expended
<b>100.0%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (inkind is not to be reported only cash)

\$91,400.00	United Way of Central Iowa
\$0.00	
\$0.00	
<b>\$117,650.00</b>	<b>Total cost of program</b>

**60** # of programs participating in the funded quality improvement activity

6	Adair	18	Dallas
6	Madison	30	Warren

### Number of programs participating in quality initiative by QRS category

1	QRS Level 1
6	QRS Level 2
4	QRS Level 3
20	QRS Level 4
10	QRS Level 5
<b>41</b>	<b>Total</b>

### Number of programs participating in the quality initiative by category

34	QRS 3, 4, 5
6	IQPPS Verified
1	NAEYC Accredited
0	NAFCC Accredited
0	Head Start Standards
<b>41</b>	<b>Total</b>

### Outcomes

<b>41</b>	# of programs participating in the quality improvement activity that improve their rating in one or more of the quality initiatives (as defined by ECI) or that maintain their rating at the highest level in the rating
<b>68.3%</b>	% of programs that improve or maintain at the highest level their rating in a quality initiative

**34** # of early learning programs that have achieved a level 3, 4, 5 in the QRS system

**56.7%** % of programs rating 3 or higher in the QRS system

### Other Comments

The total number of grants dropped this year. We feel this is because of the changes in provider numbers. Some of our providers who have gotten grants for years, have discontinued care, or have chosen to no longer participate in quality improvement activities due to the amount of time and paperwork involved and they don't have real needs for materials at this time. We do have new providers who have participated and others who will in the future, but were not yet at a point to take the ERS class and do the self evaluation.

### Successes

We had 7 new providers participate this year from the four counties and also 7 providers who received grants several years ago, but have not participated in the recent years. They have come back on board to improve the quality of their programs and are wanting to participate in QRS again. In the four county area there are 77 providers currently participating in QRS. We hope to entice more to be part of our grant program this next year.

### Challenges

Each year we have a few programs who do the basics to part pâté in the grant, but don't seem to move forward much. There are 18 programs who have received grants in the hopes of moving into the QRS, but have not yet completed the process. 5 of those programs do participate in the QPPS. We hope to encourage those all programs to participate at least at a level 3. United Way has asked us to put down a benchmark this year directly tied to QRS, so we may be adjusting our grant guidelines a little to encourage increases in the quality initiative.

### Success Story

We have been visiting a child care home for over two years now. The child care provider has a nurturing, respectful relationship with the small number of children in her program. When the QRS began, she participated, but has not followed through to renew her rating in several years. Her program is high quality, but does have room for improvement. Through much discussion, our grant process has encouraged her to reapply for the QRS and strive for continued improvement. Through room arrangement modifications as well as additions of specific play materials, and health/safety items, she is making intentional efforts to positively impact her program. She has completely changed her hand washing procedure and increased at least 5 points in 3 sections of the FCCERS. She is also reorganizing her space to allow for greater accessibility, supervision, and convenient storage location for more access to rotate toys. The visible impact of the grant has been inspiring to see as the excitement and focus return to a veteran child care provider.

### Other Information

Number of mini grants by County		Amount Expended by County	
6	Adair	\$9,975.00	Adair
18	Dallas	\$31,550.00	Dallas
6	Madison	\$16,275.00	Madison
30	Warren	\$59,850.00	Warren
<b>60</b>	<b>Total</b>	<b>\$117,650.00</b>	<b>Total</b>

### Fiscal Accountability (this will be completed by the ECI Director)

**3** # of payment vouchers submitted this fiscal year

**3** # of payment voucher submitted that had no issues this fiscal year

**100%** % of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

**4** # of reports completed this fiscal year

**4** # of reports completed timely this fiscal year

**100%** % of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Coordinated Intake - Indirect

<b>Agency:</b>	Dallas County ISU Extension	
<b>Name of Program:</b>	Coordinated intake for family support programs serving Adair, Dallas, Madison, and Warren County	
<b>Completed By:</b>	Val Cameron	<b>Date:</b> 7/11/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$11,800.00	ECI grant award		
30 est	families that enroll in a family support program (20% of those)	15	families that enroll in a family support program (20% of those applying for tuition)

### Comments regarding meeting benchmark targets

Benchmark target was high for enrollment. Programs have waiting lists. Percentage needs to be reevaluated for FY 17. Priority will be given to families with younger children in the home.

### ECI Funding Investments

\$11,400.83	4 R Kids ECI funds expended
<b>96.6%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (in kind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
<b>\$11,400.83</b>	<b>Total cost of program</b>

<b>207</b>	# of intakes processed
<b>207</b>	# of families served
<b>15</b>	# of families that received a referral and enrolled in a local program
<b>192</b>	# of families that received a referral and did not enroll in a local program

### Outcomes

<b>\$55.08</b>	Cost per intake
<b>7.2%</b>	% of families that received a referral that enrolled in a local program
<b>92.8%</b>	% of families that received a referral that did not enroll in a local program

### Other Comments

### Successes

Collaboration from Family Support Programs with the Coordinated Intake Project. We meet on a regular schedule and communicate as needed with questions and concerns. Partners met to update protocol, MOU's and referral forms for FY 17

### Challenges

Waiting lists, family engagement.

### Success Story

In working with this very high needs family-the parent demonstrated concerns about child having possible ADHD/Autism behaviors and wanted child to be assessed. Educator gave multiple referrals to this family over the course of about 6-7 months. Every time the educator would follow up on the progress of the referral, the parent would have multiple reasons that the referral was not successful-waiting list, refused to use multiple sources due to negative past experiences, parent not able to get documentation from schools as needed, etc. Finally, things go very serious for the well being of the child and educator again made referrals and parent did follow through w/ contacting the doctor, child was seen and diagnosed by professional and is now having more success in school and at home. Parent is happy w/ dr up to this time and plans to have follow up appointments w/ this dr, as needed, to ensure child is healthy and the new medicine is effective.

### Other Information

# of Families Referred by County		# of Families Accepting Service by County	
46	SWCC - PAT	1	Adair
134	PFD - PAT	4	Dallas
21	LSI - New Parent Program	2	Madison
6	DCPH - MCH	8	Warren
0	Other	0	Other
<b>207</b>	<b>Total</b>	<b>15</b>	<b>Total</b>

#### Fiscal Accountability (this will be completed by the ECI Director)

12	# of payment vouchers submitted this fiscal year
11	# of payment voucher submitted that had no issues this fiscal year
92%	% of payment vouchers that had no issues this fiscal year

#### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
100%	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Dental - Direct

<b>Agency:</b>	Dallas County ISU Extension (with subcontracts)	
<b>Name of Program:</b>	Preschool Dental Screenings - Serving Adair, Dallas, Madison, and Warren County	
<b>Completed By:</b>	Val Cameron	<b>Date:</b> 7/14/16

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$9,500.00	ECI grant award		
300	Dental Screenings	616	Dental Screenings

### Comments regarding meeting benchmark targets

We were very happy with the amount of dental screenings provided. Benchmark target was exceeded.

### ECI Funding Investments

\$12,850.12

**135.3%** % of 4 R Kids ECI funds expended

### Other Funding Expended and Source (inkind is not to be reported only cash)

\$0.00

\$0.00

\$0.00

**\$12,850.12** Total cost of program

### Age of Children Served

**0** Age Prenatal

**0** Ages 0-1

**0** Ages 1-2

**25** Ages 2-3

**206** Ages 3-4

**385** Ages 4-5

**616** Total children served

**616** # of children who were screened

**169** # of children screened that were referred for follow up services

**22** # of children who went to a dentist after a dental screening identified the need for additional treatment

**447** # of children who did not have any untreated cavities

### Outcomes

**\$20.86** Cost per child

**100%** % of children screened for dental decay

**27.4%** % screened that were referred for the service/treatment

**13.0%** % of children who need dental treatment that went to a dentist

**72.6%** % of children that are cavity free

### Other Comments

### Successes

We had great return rates in the preschools we provided to. The teachers are very proactive in getting the forms returned from the parents.

### Challenges

A challenge was connecting with families of children with dental needs. Phone calls and letters are sent, but sometimes we are unable to contact them to ensure child has been to the dentist.

### Success Story

Child usually visits the dentist every 6 months or so. Mom states that she was very happy that we were able to provide the screening at school because she called the dentist office right away and they did find a cavity that was filled before it got larger. mom was very appreciative of the services we provided.

### Other Information

# Children Served by County		Funds Expended by County	
118	Adair	\$2,430.00	Adair
132	Dallas	\$3,480.76	Dallas
212	Madison	\$4,019.52	Madison
154	Warren	\$2,919.84	Warren
<b>616</b>	<b>Total</b>	<b>\$12,850.12</b>	<b>Total</b>

Number Preschools Served by County	
4	Adair
5	Dallas
4	Madison
3	Warren
<b>16</b>	<b>Total</b>

### Fiscal Accountability (this will be completed by the ECI Director)

4	# of payment vouchers submitted this fiscal year
3	# of payment voucher submitted that had no issues this fiscal year
<b>75%</b>	% of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

4	# of reports completed this fiscal year
4	# of reports completed timely this fiscal year
<b>100%</b>	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: **Preschool Coordination - Indirect**

<b>Agency:</b>	Dallas County ISU Extension	
<b>Name of Program:</b>	Preschool Enrichment Program - Serving Adair, Dallas, Madison, and Warren County	
<b>Completed By:</b>	Val Cameron	<b>Date:</b> 7/11/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$50,228.00	ECI grant award		
65	Visits	82	Visits
28	Preschools	23	Preschools
1	Complete Preschool Map	1	Complete Preschool Map
0.8	FTE	0.8	FTE
1	Complete outside evaluation	0	Complete outside evaluation

### Comments regarding meeting benchmark targets

Visits exceeded benchmark for FY 16. Programs are in need of more assistance with understanding of new Federal regulations and changes to QRS system. I also have been working with two new directors the past school year. Several programs have expanded hours to accommodate families.

### ECI Funding Investments

\$49,754.06	4 R Kids ECI funds expended
<b>99.1%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (in kind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
<b>\$49,754.06</b>	<b>Total cost of program</b>

**252** # of tuition assistance applications completed

**23** # of programs in which children received direct tuition assistance

### Number of programs in which children received direct tuition assistance at each of the following levels

<b>3</b>	QRS Level 3
<b>7</b>	QRS Level 4
<b>4</b>	QRS Level 5
<b>14</b>	<b>Total</b>

**187** # of children that received tuition assistance to an early learning environment

**36** # of tuition assistance applications that were turned down

**216** # of tuition assistance applications that were awarded

### Outcomes

**\$197.44** Cost per application

**85.7%** % of children applying for preschool scholarship who actually receive the scholarship

**60.9%** % of programs rating a 3 or higher in the QRS system

14.3%

% of children applying for the scholarship that did not receive it because of:(list reasons below)  
(1)20-over income  
(2)14- eligible for other programs  
(3) 2- other  
(4)

**Other Comments**  
**(Provide update on outside evaluation)**

N/A

**Successes**

Programs expanding hours to provide wrap-around care to accommodate family's needs as well as community's for 5 year olds.

**Challenges**

Transportation continues to be a challenge. Trolley is used but for families not on scholarship, tickets are pricey.

**Success Story**

An immigrant family had 3 year old start preschool and he spoke very little English. The family was not very trusting of teachers at first. 2 year old joined program and family told program that they were only people they trusted to care for their children.

**Fiscal Accountability (this will be completed by the ECI Director)**

12  
11  
92%

# of payment vouchers submitted this fiscal year  
# of payment voucher submitted that had no issues this fiscal year  
% of payment vouchers that had no issues this fiscal year

**Reporting Accountability (this will be completed by the ECI Director)**

4  
4  
100%

# of reports completed this fiscal year  
# of reports completed timely this fiscal year  
% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Transportation - Direct	
Agency:	Dallas County ISU Extension (with subcontracts to preschools)
Name of Program:	Preschool Transportation Scholarships - Serving Adair, Dallas, Madison, and Warren County
Completed By:	Val Cameron <span style="float: right;">Date: 7/14/16</span>

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$7,500.00	ECI grant award		
35	Preschool children	27	Preschool children

### Comments regarding meeting benchmark targets

Dallas County was unable to provide service due to lack of drivers. Warren County had very limited seating due to school runs. Children transported were below benchmark because of these issues.

### ECI Funding Investments

\$7,653.21	4 R Kids ECI funds expended
<b>102.0%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (inkind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
<b>\$7,653.21</b>	<b>Total cost of program</b>

## Demographics

### Age of children served (as of September 15th)

0	Age 0-1 year	12	Age 3-4 years
0	Age 1-2 years	15	Age 4-5 years
0	Age 2-3 years	0	Age 5-6 years
<b>27</b>	<b>Total Children Served</b>		

<b>2916</b>	# of days transportation was provided multiplied by the total number of children served		
<b>\$283.45</b>	Cost per child for the transportation		
<b>92.6%</b>	% of days that children attended preschool that were provided transportation		
2700	numerator	2916	denominator

### Other Comments

### Successes

### Challenges

Reporting and billing by agencies. One child in Madison County fees to transport were over \$8.00 a day. Policy needs to be updated to set a cap.

### Success Story

Several children were transported from childcare homes in Adair County. They would be unable to attend preschool without the trolley.

### Other Information

Number Children Served by County		Funds Expended by County	
12	Adair	\$1,701.00	Adair
0	Dallas	\$0.00	Dallas
13	Madison	\$5,087.75	Madison
2	Warren	\$500.00	Warren
<b>27</b>	<b>Total</b>	<b>\$7,288.75</b>	<b>Total</b>

### Number Preschools Served by County

2	Adair
0	Dallas
2	Madison
1	Warren
<b>5</b>	<b>Total</b>

### Fiscal Accountability (this will be completed by the ECI Director)

<b>10</b>	# of payment vouchers submitted this fiscal year
<b>8</b>	# of payment voucher submitted that had no issues this fiscal year
<b>80%</b>	% of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

<b>4</b>	# of reports completed this fiscal year
<b>4</b>	# of reports completed timely this fiscal year
<b>100%</b>	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: Scholarships - Direct

<b>Agency:</b>	Dallas County ISU Extension (with subcontracts to preschools)		
<b>Name of Program:</b>	Preschool Tuition Scholarships - Serving Adair, Dallas, Madison, and Warren County		
<b>Completed By:</b>	Val Cameron	<b>Date:</b>	7/11/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed	
\$181,725.00	ECI grant award		
185	Preschool scholarships	187	Preschool scholarships
35	Preschools served	23	Preschools served

### Comments regarding meeting benchmark targets

Benchmark on scholarships exceeded. Preschool served were down due to families attending programs within county boundaries. Numerous faith-based programs in 3 of 4 counties choose not to participate due to the quality measures and assessments required.

### ECI Funding Investments

\$175,795.57	4 R Kids ECI funds expended
<b>96.7%</b>	% of 4 R Kids ECI funds expended

### Other Funding Expended and Source (in-kind is not to be reported only cash)

\$0.00	
\$0.00	
\$0.00	
<b>\$175,795.57</b>	<b>Total cost of program</b>
<b>\$940.08</b>	<b>Average cost per child served with scholarship</b>

## Demographics

### Age of children served (as of September 15th)

0	Age 0-1 year	85	Age 3-4 years
0	Age 1-2 years	100	Age 4-5 years
0	Age 2-3 years	2	Age 5-6 years
<b>187</b>	<b>Total Children Served</b>		

### Marital Status of Head of Household

106	Married	5	Partnered
40	Single	22	Divorced
0	Widowed	13	Separated
<b>186</b>	<b>Total</b>		

### Household Size

16	2	50	5
28	3	29	6
51	4	12	greater than 6
<b>186</b>	<b>Total</b>		

### Federal Poverty Level

87	100% or below	0	201-299%
50	101-150%	0	300% or greater
49	151-200%		
<b>186</b>	<b>Total</b>		

### Education Level of Head of Household

4	middle school or lower	24	trade or vocational training
2	some high school	26	2-year college degree
62	high school diploma	47	4-year college degree
7	GED	14	master's degree or higher
<b>186</b>	<b>Total</b>		

### Race/Ethnicity Head of Household

1	Native American or Alaskan Native	2	Asian
1	Native Hawaiian or Pacific Islander	178	White
4	African American	0	Multiracial
<b>186</b>	<b>Total</b>		

### Hispanic/Latino

12	# that are Hispanic/Latino
174	# that are not Hispanic/Latino
<b>186</b>	<b>Total</b>

### Meeting Quality Initiative

4	NAEYC Accredited	3	QRS Level 3
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0	NAFCC Accredited
0	Head Start
5	IQPPS Verified
<b>23</b>	<b>Total</b>

7	QRS Level 4
4	QRS Level 5

Education Level of Lead Teacher(s)	
0	GED
4	high school diploma
0	CDA
2	AA in early childhood or child development
4	AA in related field
8	BA/BS in early childhood or child development
4	holds teaching license with Early Childhood endorsement
1	post graduate degree
<b>23</b>	<b>Total</b>

Outputs	
<b>187</b>	# of total children served (# from demographics)
<b>23</b>	# of preschool programs in which children received a scholarship
<b>187</b>	# of children screened for developmental delays
<b>10</b>	# of children screened that were referred for follow up services
<b>177</b>	# of children demonstrating age appropriate skills
<b>14</b>	# of early learning programs that have achieved a QRS Level, 3, 4, or 5 (from demographics)

Outcomes	
<b>100.0%</b>	% of children screened for developmental delays
<b>5.3%</b>	% screened that were referred for additional services/treatment
<b>\$197.56</b>	Cost Per child
<b>94.7%</b>	% of children demonstrating age appropriate skills as measured by: indicate the tool(s) utilized GOLD
<b>60.9%</b>	% of programs rating a 3 or higher in the QRS system

### Other Information

# of Children By County		# of Families by County	
35	Adair	35	Adair
88	Dallas	88	Dallas
30	Madison	29	Madison
34	Warren	34	Warren
<b>187</b>	<b>Total</b>	<b>186</b>	<b>Total</b>

# of Preschool Programs by County		Funds Expended by County	
5	Adair	\$23,704.00	Adair
8	Dallas	\$90,219.50	Dallas
4	Madison	\$19,910.50	Madison
6	Warren	\$33,590.35	Warren
<b>23</b>	<b>Total</b>	<b>\$167,424.35</b>	<b>Total</b>

### Other Comments

#### Successes

Implementing IGD'S and using data to help plan instruction. A new program in Warren passing ECERS.

#### Challenges

Family participation in events. Instructional coaches not readily available. Special needs instruction of 3 year olds. Food allergies in programs. Children only staying a couple months so difficult to get required assessments done.

#### Success Story

Our family is so thankful for the generous gift of the scholarship that allows our daughter, Olivia, to attend the YMCA preschool. Both my husband and myself are in FT ministry positions and have been truly blessed by this gift! We have 6 kids - 17, 16, 14,12,4 and 3 - so sometimes the cost of something desired (rather than needed) stretches our family beyond our financial capabilities. Have this scholarship means that our 4 year old daughter gets to interact with other little kids her age, she gets loved on by AMAZING teachers and I get to hear about all her amazing experiences. Thank you!!

### Fiscal Accountability (this will be completed by the ECI Director)

<b>9</b>	# of payment vouchers submitted this fiscal year
<b>8</b>	# of payment voucher submitted that had no issues this fiscal year
<b>89%</b>	% of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

<b>4</b>	# of reports completed this fiscal year
<b>4</b>	# of reports completed timely this fiscal year
<b>100%</b>	% of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

Program service type as defined by ECI: WAGE\$ -Indirect

<b>Agency:</b>	Iowa AEYC	
<b>Name of Program:</b>	WAGE\$ - Serving Adair, Dallas, Madison, and Warren County	
<b>Completed By:</b>	Dara Madigan	<b>Date:</b> 07/18/2016

Benchmark Targets and ECI Grant Award		Year To Date Completed
\$23,437.43	ECI grant award	
14-18	Providers	19 Providers

### Comments regarding meeting benchmark targets

#### ECI Funding Investments

\$23,437.43	4 R Kids ECI funds expended
<b>100.0%</b>	% of 4 R Kids ECI funds expended

#### Other Funding Expended and Source (inkind is not to be reported only cash)

\$18,013.38	W. K. Kellogg Foundation
\$12,975.00	United Way of Central Iowa
\$0.00	
<b>\$54,425.81</b>	<b>Total cost of program</b>

### Outputs

<b>19</b>	# of total recipients
<b>18</b>	# of recipients who retained employment in their early learning program
<b>11</b>	# of recipients at temporary award levels
<b>5</b>	# of recipients at temporary award levels who earned additional college credits
<b>36</b>	# of six-month financial supplements
<b>19</b>	# of recipients who received at least one six-month financial supplement (unduplicated)
<b>14</b>	# of early learning programs with at least one WAGE\$ recipient
<b>13</b>	# of participating child care programs at each of QRS levels
	0 QRS level 1
	0 QRS level 2
	0 QRS level 3
	11 QRS level 4
	2 QRS level 5
<b>\$34,975.00</b>	Cost of six-month financial supplement issued
<b>2</b>	# of early learning programs with at least one WAGE\$ recipients that meet the following:
	2 NAEYC Accredited
	0 NAFCC Accredited
	0 Head Start
	0 IQPPS Verified

### Outcomes

<b>\$971.53</b>	Average monthly amount of six-month financial supplement
<b>\$2,864.52</b>	Average cost per recipient in the program
<b>92.9%</b>	% of programs rating a 3 or higher in the QRS system
<b>94.7%</b>	% of recipients who retained employment in their early learning program
<b>45.5%</b>	% of recipients at temporary award levels who earned additional college credits

### Other Comments

Notes on the data: One child care program does not participate in Iowa's QRS, but is NAEYC Accredited, so they meet the criteria required for program quality. The above output and outcome data is for all participants in the four-county area. The participation and funding information below the narrative sections reflect only those that are supported with 4 R Kids funds.

### Successes

Expanding into all four counties this year was a great opportunity. The flexibility of funding available from United Way of Central Iowa helped partner with 4 R Kids funding to keep the waitlist to a minimum. Our proximity to local programs has made it easier for our staff to meet with individuals about share information about the WAGE\$ program as well as options for advancement through the T.E.A.C.H. program.

### Challenges

Funding levels are always a challenge. Although another funder was able to support a number of the individuals in these counties that were on the waitlist this year, that source of funding is also not increasing for the upcoming fiscal year, which may present a challenge. Part of the goal of WAGE\$ is to act as an incentive for those not yet eligible to achieve a higher level of education or increase their program quality. It is difficult to market WAGE\$ to other child care providers in this way when there is not a guarantee that funds will be available if they do take those steps to become eligible.

### Success Story

One the participating Child Development Home Providers, located in Earlham, maintains a QRS Level 4. This individual has been participating in the T.E.A.C.H. Early Childhood® IOWA scholarship program for a number of years. She has worked diligently to maintain a quality program for the children in her care and improve her own education by taking college courses while providing full-time care. She began working toward her Child Development Associate (CDA) Credential in 2012 and this year she completed her Associate Degree from DMACC. She is currently taking classes to work toward a Bachelor's Degree in Early Childhood as well. This continued education has allowed her to move up the WAGE\$ scale and increase her award amount. She is able to use these WAGE\$ stipends to help support her higher education costs and the costs associated with maintaining her program's quality rating.

### Other Information

**7** # of child care center staff participating in salary supplements

0	Adair
7	Dallas
0	Madison
0	Warren

**12** # of child care development homes participating in salary supplements

1	Adair
1	Dallas
3	Madison
7	Warren

### Funds Expended by County (Should equal total amount expended)

\$2,159.35	Adair
\$3,259.36	Dallas
\$4,159.36	Madison
\$13,859.36	Warren
<b>\$23,437.43</b>	<b>Total</b>

### Fiscal Accountability (this will be completed by the ECI Director)

**10** # of payment vouchers submitted this fiscal year  
**9** # of payment voucher submitted that had no issues this fiscal year  
**90%** % of payment vouchers that had no issues this fiscal year

### Reporting Accountability (this will be completed by the ECI Director)

**4** # of reports completed this fiscal year  
**4** # of reports completed timely this fiscal year  
**100%** % of reports completed timely this fiscal year

## 4 R Kids ECI Annual Report - FY16

### ECI Director

<b>Agency:</b>	Central Iowa Juvenile Detention Center/Debra Schrader	
<b>Name of Program:</b>	ECI Executive Director	
<b>Completed By:</b>	Debra Schrader	<b>Date:</b> 6/30/16

### ECI Allocations

\$76,165.00	ECI grant award for Salary and Benefits
\$12,600.00	ECI grant award for expenses

### ECI funding Investments (inkind is not to be reported only cash)

\$77,685.96	4 R Kids ECI funds expended for Salary and Benefits
<b>102.0%</b>	% of 4 R Kids ECI funds expended

\$11,172.49	4 R Kids ECI Funds expended for expenses
<b>88.7%</b>	% of 4 R Kids ECI funds expended

### Outputs

<b>225</b>	# of payment vouchers processed
<b>10</b>	# of contracts monitored
<b>2</b>	# of state wide ECI Director meetings attended
<b>70</b>	# of community collaboration meeting convened
<b>103</b>	# of community collaboration meeting attended not hosted by ECI
<b>53.5</b>	# of professional development hours
<b>302</b>	# of community partners that receive regular communication
<b>4</b>	# of newsletters completed
<b>163.68</b>	# of vacation hours accumulated
<b>458</b>	# of sick leave hours accumulated
<b>14942</b>	# of miles driven

### Other Comments

I have been participating in the Opportunity Summit meetings with United Way of Central Iowa and have joined subcommittees to work on ending poverty in Dallas, Warren and Polk County. While this has been time consuming it has added to a list of collaborators and the networking opportunities.

Developing new marketing materials - the new info-graphics - has added to advocacy efforts and they have been well received.

### Successes

A house of representatives attended the 5th annual appreciation reception in which he remembered the 4 R Kids board during the legislative session. He provided dental products to assist the I-Smiles program. While this may seem minut, it was a huge gain in understanding the importance of early childhood services as well as recognition for the 4 R Kids ECI area.

The implementation of Google Spreadsheets for reporting has increased efficiency and the learning curve has been minimal this year.

### Challenges

Early Childhood Iowa has changed over the years and there is more of a focus on data and compliancy with data. While it is understandable that there needs to be data, somewhere in the mix the true meaning of early childhood is getting lost. Striking a balance is difficult to do with the state mandates and expectations while trying to work collaboratively with contractors who serve families in need.

## 4 R Kids ECI Annual Report - FY16

### Board Administrative Expenses

<b>Agency:</b>	Central Iowa Juvenile Detention Center		
<b>Name of Program:</b>	Board administrative expenses		
<b>Completed By:</b>	Debra Schrader	<b>Date:</b>	7-15-16

### Allocation for Administrative Expenses

\$19,785.00	ECI grant for administrative board expenses
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### ECI funding Investments

\$17,060.08	4 R Kids ECI funds expended
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<b>86.2%</b>	% of 4 R Kids ECI funds expended
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### Expended by category

\$10,000.00	expended on fiscal agent fees
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\$1,533.00	expended on board liability insurance
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\$858.60	expended on fiscal audit fees
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\$1,144.30	expended on copies
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\$2,065.51	expended on event sponsorship
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\$257.13	expended on marketing
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\$1,201.54	expended on misc
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<b>\$17,060.08</b>	<b>Total expended</b>
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### Outputs

<b>86</b>	# of volunteer hours provided by board members
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<b>5 of 6</b>	# of board meetings that meet quorum
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<b>5725</b>	# of website hits
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<b>138</b>	# of Facebook likes
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<b>10</b>	# of presentations provided by programs for professional development
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<b>6</b>	# of community events participated in
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<b>1</b>	# of community outreach activities (presentations, etc)
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### Other Comments

Due to receiving model status the Board was able to utilize the categorical funds in a flexible manner, which allowed the Board to met the local needs. Additionally, ECI reimbursed the 4 R Kids Board for the annual audit review (\$858.60) and a one time purchase of a computer (\$390.45) for a total of \$1,249.50.

### Successes

The passage of SF2299 was a significant success for ECI. While the bill did not address the elimination of the categorical funds, it did make changes to other legislative language that will assist the local ECI boards.

Collaborating with 12 other ECI local boards to provide a mini day on the hill was a success as it brought local ECI areas together for a common goal.

The fiscal audit review revealed no deficiencies for the 5th year in a row.

### Challenges

Meeting gender balance continues to be challenge. Good faith efforts continue in meeting this criteria.

The status quo funding makes it difficult to serve the needs.